FORM SPAC SPECIFIC-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The SPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 101 00067719 3 COMMITTEE NAME **OFFICE USE ONLY** Texans for Kelly Hancock SPAC Date Received **ELECTRONICALLY FILED** 07/14/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 4908 Dory Court Date Hand-delivered or Date Postmarked North Richland Hills, TX 76180 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Jim NAME NICKNAME LAST **SUFFIX** Wilkinson STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 2005 White Wing Cove STREET **ADDRESS** (Residence or Business) Westlake, TX 76262 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 4908 Dory Court MAILING **ADDRESS** North Richland Hills, TX 76180 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (817) 818-9863 PHONE REPORT January 15 30th day before election Exceeded modified reporting limit **TYPE** Dissolution (Attach PAC-DR) 8th day before election X July 15 Runoff 10th day after campaign treasurer termination 10 PERIOD Month Year Month Day Year Day COVERED **THROUGH** 06/30/2025 01/01/2025 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 03/03/2026 General Special

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC COVER SHEET PG 2

| 12 COMMITTEE NAME | | 1: | 3 Filer ID | (Ethics Commission Filers) |
|---|---|---|-----------------|----------------------------|
| Texans for Kelly Hanco | ck SPAC | | 00067719 | |
| 14 COMMITTEE PURPOSE | | CANDIDATE / OFFICEHOLDER NAME Sen. Kelly Hancock | | |
| (Attach lists on plain paper to complete this | Candidate | | | |
| report if necessary.) | X Officeholder | OFFICE SOUGHT (candidate) / OFFICE HELD State Senator | (officeholder) | |
| SUPPORT | | | | |
| (Candidate or Measure) OPPOSE (Candidate or Measure) | | BALLOT IDENTIFICATION / # | Month | ON DATE Day Year |
| | Measure | | | |
| X ASSIST (Officeholder) | | DESCRIPTION | | |
| 15 CONTRIBUTION TOTALS | | I TRIBUTIONS OF \$50 OR LESS (OTHER THAN I ES OF LOANS, OR CONTRIBUTIONS MADE LESS ITEMIZED | PLEDGES, | \$ \$0.00 |
| | 2. TOTAL POLITICAL C | ONTRIBUTIONS | | |
| | | \$ \$1,525,080.42 | | |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED PO | LITICAL EXPENDITURES | | \$ \$2,127.80 |
| | 4. TOTAL POLITICAL E | KPENDITURES | | \$ \$334,795.07 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CON REPORTING PERIOD | TRIBUTIONS MAINTAINED AS OF THE LAST D | AY OF THE | \$ \$5,974,347.53 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMO DAY OF THE REPORTIN | UNT OF ALL OUTSTANDING LOANS AS OF THIG PERIOD | IE LAST | \$ \$0.00 |
| 16 AFFIDAVIT | | | | |
| 10 ATTIDAVIT | | I swear, or affirm, under penalty of perjur and correct and includes all information r Title 15, Election Code. | | |
| | | Jim Will | kinson | |
| AFFIX NOTARY | STAMP / SEAL ABOVE | Signature of Cam | paign Treasure | er . |
| Sworn to and subscribed | before me, by the said | , this | s the | day |
| of | , 20, to certify which | n, witness my hand and seal of office. | | |
| | | | | |
| Signature of officer ad | ministering oath Prin | ted name of officer administering oath | Title of office | er administering oath |
| | | | | |

FORM SPAC SPECIFIC-PURPOSE COMMITTEE REPORT: **ADDENDUM PURPOSE** Page 3 of 101 (Ethics Commission Filers) 12 COMMITTEE NAME 13 Filer ID Texans for Kelly Hancock SPAC 00067719 14 COMMITTEE CANDIDATE / OFFICE HOLDER NAME **PURPOSE** Sen. Kelly Hancock (Attach lists on plain CANDIDATE paper to complete this report if necessary.) OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) OFFICE HOLDER Comptroller SUPPORT (Candidate or Measure) **BALLOT IDENTIFICATION ELECTION DATE** MONTH DAY YEAR OPPOSE MEASURE (Candidate or Measure) DESCRIPTION **ASSIST** (Officeholders only)

SUBTOTALS - SPAC

FORM SPAC **COVER SHEET PG 3**

| | | | | | 4 01 101 |
|-------------|----------|--|--------------|-------|-----------------------|
| 17 C | TTIMMC | EE NAME | 18 Filer ID | (Ethi | cs Commission Filers) |
| T€ | exans fo | r Kelly Hancock SPAC | 00067719 | | |
| | | E SUBTOTALS SCHEDULE | | | SUBTOTAL AMOUNT |
| 1. | X | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ | 1,523,790.41 |
| 2. | X | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ | 1,290.01 |
| 3. | | SCHEDULE B: PLEDGED CONTRIBUTIONS | | \$ | |
| 4. | | SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION | PR | \$ | |
| 5. | | SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION | ATION OR | \$ | |
| 6. | | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (| ORGANIZATION | \$ | |
| 7. | | SCHEDULE E: LOANS | | \$ | |
| 8. | X | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION: | S | \$ | 334,795.07 |
| 9. | | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ | |
| 10 | ,. | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION | ONS | \$ | |
| 11 | 🔲 | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ | |
| 12 | . 🔲 | SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS | OF C/OH | \$ | |
| 13 | i. 🔲 | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | ONS | \$ | |
| 14 | l. X | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER | RETURNED | \$ | 90,655.40 |
| | | | | • | |

| | MONET | ARY POLITICAL C | ONTRIBUTION | NS | | SCHEDU | LE A1 |
|---|-----------------------------|---|--|---|---|--|--------------|
| | The Instruc | ction Guide explains how | to complete this for | m. | 1 | Total pages Schedule A1: Sch: 1/35 Rpt: 5/101 | |
| 2 | FILER NAME Texans for K | elly Hancock SPAC | | | 3 | Filer ID (Ethics Commission 00067719 | on Filers) |
| 4 | Date 06/30/2025 | 5 Full name of contributor [Albritton, Robert (Mr.)6 Contributor address; City; Sta | out-of-state PAC (ID#: te; Zip Code | | 7 | Amount of Contribution (\$) | \$5,000.00 |
| 8 | Principal occu | Fort Worth, TX 76116 pation / Job title (See Instructions) | 9 | Employer (See Instructions |) | | |
| | CEO | , | | Mayfair Investments | , | | |
| | Date 06/26/2025 | American Hotel & Lodging Contributor address; City; Sta | | 001198) | | Amount of Contribution (\$) | \$5,000.00 |
| | Principal occu | Washington, DC 20005 pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | | | | | | | |
| | Date 06/26/2025 | Full name of contributor [Ancira, Jesse (Mr.) Contributor address; City; Sta | out-of-state PAC (ID#: te; Zip Code |) | | Amount of Contribution (\$) | \$1,000.00 |
| | Data disal asses | Taylor, TX 76574 | | Frankrije (Osta krativationa | | | |
| | Attorney | pation / Job title (See Instructions) | | Employer (See Instructions Self Employed |) | | |
| | Date 06/23/2025 | Full name of contributor Andro, Richard (Mr.) Contributor address; City; Sta | | | | Amount of Contribution (\$) | \$10,000.00 |
| | Principal occu President | pation / Job title (See Instructions) | | Employer (See Instructions Refund Advisory Corp |) | | |
| | Date 06/30/2025 | Full name of contributor Aplin, Arch (Mr.) Contributor address; City; Sta Lake Jackson, TX 77566 | |) | | Amount of Contribution (\$) | \$10,000.00 |
| | Principal occu Founder | pation / Job title (See Instructions) | | Employer (See Instructions Buc-ee's |) | | |
| | | | , | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDU | LE A1 |
|---|-----------------------------|--|---|----------|--|--------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 2/35 Rpt: 6/101 | |
| 2 | FILER NAME Texans for K | Celly Hancock SPAC | | 3 | Filer ID (Ethics Commission 00067719 | ion Filers) |
| 4 | Date 06/23/2025 | 5 Full name of contributor out-of-state PAC (ID#:_Armes, Joseph (Mr.) 6 Contributor address; City; State; Zip Code |) | 7 | Amount of Contribution (\$) | \$10,000.00 |
| _ | | Dallas, TX 75220 | | | | |
| 8 | Principal occu Executive | pation / Job title (See Instructions) | 9 Employer (See Instructions) CSW Industries |) | | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_Ashlock, Mickey (Mr.) Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$5,000.00 |
| | Principal occu | Keller, TX 76248 pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | President & | | Ram Products Co. | | | |
| | Date 06/27/2025 | Full name of contributor out-of-state PAC (ID#:_ Associa PAC Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$5,000.00 |
| | | Dallas, TX 75205 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_ Auld, Marianne (Ms.) Contributor address; City; State; Zip Code Fort Worth, TX 76102 | | | Amount of Contribution (\$) | \$2,500.00 |
| | Principal occu Officer | pation / Job title (See Instructions) | Employer (See Instructions Good Government Fund | | | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_BNSF RAILPAC Contributor address; City; State; Zip Code Fort Worth, TX 76161 | | | Amount of Contribution (\$) | \$5,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | | | | | | |

| | MONEI | ARY POLITICAL (| CONTRIBUTION | NS | | SCHEDU | LE A1 |
|----------|---------------------------|---|--|--|----------|--|----------------|
| | The Instru | ction Guide explains hov | v to complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 3/35 Rpt: 7/101 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commissi | ion Filers) |
| | Texans for K | (elly Hancock SPAC | | | | 00067719 | |
| 4 | Date 06/26/2025 | 5 Full name of contributorBailey, Mona (Mrs.)6 Contributor address; City; S | out-of-state PAC (ID#: tate; Zip Code |) | 7 | Amount of Contribution (\$) | \$2,000.00 |
| | | North Richland Hills, TX 7 | | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions | 9 | Employer (See Instructions Retired | 5) | | |
| | Reliieu | | | Relifeu | _ | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | #100.00 |
| | 06/27/2025 | Baxter, Victor (Mr.) | | | | | \$100.00 |
| | | Contributor address; City; S | tate; Zip Code | | | | |
| | | North Richland Hills, TX 7 | 76180 | | | | |
| | Principal occu | pation / Job title (See Instructions | 5) | Employer (See Instructions | 5) | | |
| | Retired | | | Retired | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/26/2025 | BearbackerPAC | | | | | \$2,000.00 |
| | | Contributor address; City; S | tate; Zip Code | | | | |
| | | Houston, TX 77056 | | | | | |
| | Principal occu | pation / Job title (See Instructions | s) | Employer (See Instructions | 5) | | |
| | | | | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/25/2025 | Benda, Robert (Mr.) | _ | | | | \$1,000.00 |
| | | Contributor address; City; S | tate; Zip Code | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Fort Worth, TX 76108 | | | <u>_</u> | | |
| | | pation / Job title (See Instructions | 5) | Employer (See Instructions | | | |
| | CEO | | | Westwood Contractors | ınc | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/26/2025 | Blake, Gary (Mr.) | | | | | \$10,000.00 |
| | | Contributor address; City; S | tate; Zip Code | | | | |
| | | | | | | | |
| | | Fort Worth, TX 76109 | | | | | |
| H | Principal occu | pation / Job title (See Instructions | 5) | Employer (See Instructions | <u>L</u> | | |
| | CEO | | , | Creative Solutions in He | | hcare | |
| <u> </u> | | | | S. S | | | |
| | | | | | | | |
| | | | | | | | |

| | MONEI | ARY POLITICAL CONTRI | BUTIONS | SCHEDUI | LE A1 |
|---|------------------------------|---|----------------------------------|--|--------------|
| | The Instruc | ction Guide explains how to compl | ete this form. | 1 Total pages Schedule A1: Sch: 4/35 Rpt: 8/101 | |
| 2 | FILER NAME Texans for K | elly Hancock SPAC | | 3 Filer ID (Ethics Commission 00067719 | on Filers) |
| 4 | Date 06/23/2025 | | e PAC (ID#: | 7 Amount of Contribution (\$) | \$1,000.00 |
| 8 | Principal occu Sr. VP | Fort Worth, TX 76107 pation / Job title (See Instructions) | 9 Employer (See Vistra Energy | | |
| | Date 06/26/2025 | Full name of contributor out-of-state Blocker, Trey (Mr.) Contributor address; City; State; Zip Code Austin, TX 78701 | e PAC (ID#: | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu CEO/founde | oation / Job title (See Instructions) | Employer (See Salvation Sp | | |
| | Date 06/27/2025 | Boenker IV, Alvin (Mr.) Contributor address; City; State; Zip Code | e PAC (ID#: |) Amount of Contribution (\$) | \$25,000.00 |
| | | Weatherford, TX 76135 pation / Job title (See Instructions) | Employer (See | , and the second | |
| | Date 06/29/2025 | Full name of contributor out-of-state Bond, Tom (Mr.) Contributor address; City; State; Zip Code | PAC (ID#: | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu Attorney | oation / Job title (See Instructions) | Employer (See Greenberg T | , | |
| | Date 06/27/2025 | Full name of contributor out-of-state Boydstun, W Reid (Mr.) Contributor address; City; State; Zip Code | PAC (ID#: |) Amount of Contribution (\$) | \$500.00 |
| | Principal occu Owner/CEO | oation / Job title (See Instructions) | Employer (See Spiral Pipe o | | |
| | | | | | |

| | MONEI | ARY POLITICAL (| CONTRIBUTIO | NS | | SCHEDU | LE A1 |
|----------------------------|------------------------------|--|--|---|--|--|-------------|
| | The Instruc | ction Guide explains how | to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 5/35 Rpt: 9/101 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commissi | on Filers) |
| | Texans for K | elly Hancock SPAC | | | | 00067719 | |
| 4 | Date | 5 Full name of contributor | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/26/2025 | Brauer Jr., Stephen (Mr.) | | | | | \$50,000.00 |
| | | 6 Contributor address; City; St | tate; Zip Code | | | | |
| | | Fort Worth, TX 76107 | 1 | | | | |
| 8 | | pation / Job title (See Instructions | s) | 9 Employer (See Instructions | | | |
| | Chairman | | | Hunter Engineering Cor | npa | any ———————————————————————————————————— | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Britton, Kathy (Mrs.) | | | | | \$5,000.00 |
| | | Contributor address; City; Si | tate; Zip Code | | | | |
| | | Houston, TX 77019 | | | | | |
| | | pation / Job title (See Instructions . | 5) | Employer (See Instructions | s) | | |
| | Executive Ch | nairman | | Perry Homes | | | |
| Date Full name of contribu | | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/26/2025 Brown, Jeff (Mr.) | | | | | \$1,000.00 | |
| | | Contributor address; City; Si Westlake, TX 76262 | iate; Zip Code | | | | |
| | Principal occu | pation / Job title (See Instructions | 5) | Employer (See Instructions | <u>. </u> | | |
| | Retired | | | Retired | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Π | Amount of Contribution (\$) | |
| | 06/23/2025 | Brown, Jill (Ms.) | | | | (,) | \$5,000.00 |
| | | Contributor address; City; Si | tate; Zip Code | | • | | |
| | | Westlake, TX 76262 | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions | 5) | Employer (See Instructions Retired | 5) | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Bugg, Alethea (Mrs.) | | | | | \$2,000.00 |
| | | Contributor address; City; Si | tate; Zip Code | | • | | |
| | | San Antonio, TX 78209 | <u>, </u> | | | | |
| | Principal occu Homemaker | pation / Job title (See Instructions | s) | Employer (See Instructions Homemaker | s) | | |
| | | | , | | | | |

| | MONEI | ARY POLITICAL CONTR | IBUTION | S | | SCHEDULE A1 |
|---|------------------------------|--|--------------------|--|----------|---|
| | The Instruc | ction Guide explains how to comp | lete this form | n. | 1 | Total pages Schedule A1: Sch: 6/35 Rpt: 10/101 |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission Filers) |
| | Texans for K | elly Hancock SPAC | | | | 00067719 |
| 4 | Date 06/30/2025 | Full name of contributor out-of-star out-o | ate PAC (ID#: e | | 7 | Amount of Contribution (\$) \$10,000.00 |
| 8 | Principal occu | San Antonio, TX 78209 pation / Job title (See Instructions) | 9 | Employer (See Instructions | <u> </u> | |
| Ü | CEO | sation, our title (See mandenons) | | Argyle Investments Co | , | |
| | Date 06/25/2025 | Bunch, Donald (Mrs.) Contributor address; City; State; Zip Cod | ate PAC (ID#: | | | Amount of Contribution (\$) \$50.00 |
| | | Bedford, TX 76021 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions) Retired |) | |
| | Date 06/25/2025 | Full name of contributor out-of-state Byrd, Lance (Mr.) Contributor address; City; State; Zip Code | ete PAC (ID#: | | | Amount of Contribution (\$) \$5,000.00 |
| | | Fort Worth, TX 76107 | | | | |
| | Principal occu President | pation / Job title (See Instructions) | | Employer (See Instructions Byrd Family Ventures |) | |
| | Date 06/25/2025 | Full name of contributor out-of-state Cammack, Kerry (Mr.) Contributor address; City; State; Zip Code | ate PAC (ID#: |) | | Amount of Contribution (\$) \$2,000.00 |
| | Principal occu Attorney | pation / Job title (See Instructions) | | Employer (See Instructions Cammack & Strong, P.C | | |
| | Date 06/27/2025 | Full name of contributor out-of-state Carona Sr., John (Mr.) Contributor address; City; State; Zip Code Dallas, TX 76205 | ate PAC (ID#: | | | Amount of Contribution (\$) \$100,000.00 |
| | Principal occu Chairman & | pation / Job title (See Instructions) | | Employer (See Instructions |) | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUI | LE A1 |
|---|-----------------------------|--|--|---|---|--------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 7/35 Rpt: 11/101 | |
| 2 | FILER NAME Texans for K | Kelly Hancock SPAC | | 3 | Filer ID (Ethics Commission 00067719 | on Filers) |
| 4 | Date 06/28/2025 | 5 Full name of contributor out-of-state PAC (ID#:_ Cawley, Jennifer (Mrs.) 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$250.00 |
| | | Austin, TX 78701 | | | | |
| 8 | Principal occu CEO | ipation / Job title (See Instructions) | Employer (See Instructions TALHI |) | | |
| | Date 06/28/2025 | Full name of contributor out-of-state PAC (ID#:_ Cawley, Rick (Mr.) Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu Builder | Austin, TX 78747 Ipation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_ Charter Communications, Inc. Texas PAC Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$5,000.00 |
| | Principal occu | Austin, TX 78701 upation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_Clark, Jimmy (Mr.) Contributor address; City; State; Zip Code North Richland Hills, TX 76182 | | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions Retired |) | | |
| | Date 06/28/2025 | Full name of contributor out-of-state PAC (ID#:_ Clevenger, Don (Mr.) Contributor address; City; State; Zip Code Sunnnyvale, TX 75182 | | | Amount of Contribution (\$) | \$2,500.00 |
| | Principal occu Executive | ipation / Job title (See Instructions) | Employer (See Instructions Oncor Electric |) | | |
| | | | | | | |

| | MONEI | ARY POLITICAL (| CONTRIBUTION | NS | | SCHEDU | LE A1 |
|---|-------------------------------|---|------------------------|--|----|---|--------------|
| | The Instru | ction Guide explains how | to complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 8/35 Rpt: 12/101 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commissi | on Filers) |
| | | Celly Hancock SPAC | _ | | | 00067719 | |
| 4 | Date 06/26/2025 | 5 Full name of contributor Coates, Christopher (Mr.)6 Contributor address; City; S | |) | 7 | Amount of Contribution (\$) | \$1,000.00 |
| | | Fort Worth, TX 76109 | | | | | |
| 8 | Principal occu CEO | pation / Job title (See Instructions | 9 | Employer (See Instructions Miles Foundation | i) | | |
| | Date 06/30/2025 | Full name of contributor Cogdill, Barbara Lee (Ms. Contributor address; City; S | | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | Gatesville, TX 76528 pation / Job title (See Instructions | 5) | Employer (See Instructions | .) | | |
| | Retired | pation / dob title (dee matractions | | Retired | ') | | |
| | Date 06/27/2025 | Full name of contributor Cox, Bobby (Mr.) Contributor address; City; S | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$5,000.00 |
| | | Fort Worth, TX 76109 | | | | | |
| | Principal occu Restaurants | pation / Job title (See Instructions -investments | 5) | Employer (See Instructions Self employed |) | | |
| | Date 06/23/2025 | Full name of contributor Crawford, Clark (Mr.) Contributor address; City; S Round Rock, TX 78681 | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu Sound Desig | pation / Job title (See Instructions gner | 5) | Employer (See Instructions The Harten Center for U | | erprivileged Sounds | |
| | Date 06/26/2025 | Full name of contributor Crow, Harlan (Mr.) Contributor address; City; S Dallas, TX 75219 | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$50,000.00 |
| | Principal occu Investor | pation / Job title (See Instructions | 5) | Employer (See Instructions Crow Holdings |) | | |
| | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | DNS | SCHEDULE A1 | |
|---|-------------------------------|--|--|---|----|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 9/35 Rpt: 13/101 | _ |
| 2 | FILER NAME Texans for K | celly Hancock SPAC | | 3 Filer ID (Ethics Commission Filers) 00067719 | |
| 4 | Date 06/24/2025 | Full name of contributor | | 7 Amount of Contribution (\$) \$200.0 | 0 |
| | | Fort Worth, TX 76107 | | | |
| 8 | Principal occu Chairman | pation / Job title (See Instructions) | 9 Employer (See Instructions) Greenwood-Mt. Olivet Co | | |
| | Date 06/25/2025 | Full name of contributor out-of-state PAC (ID#:_ Davis, Marty (Mr.) Contributor address; City; State; Zip Code | | Amount of Contribution (\$) \$50.0 | 10 |
| | Principal occu | Bedford, TX 76021 pation / Job title (See Instructions) | Employer (See Instructions) | (| |
| | Retired | | Retired | | |
| | Date 06/23/2025 | Full name of contributor out-of-state PAC (ID#:_ Davis, Richard (The Honorable) Contributor address; City; State; Zip Code |) | Amount of Contribution (\$) \$100.0 | 0 |
| | | North Richland Hills, TX 76180 | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions) Retired | | |
| | Date 06/25/2025 | Full name of contributor out-of-state PAC (ID#:_ Dodson, David (Mr.) Contributor address; City; State; Zip Code North Richland Hills, TX 76180 | | Amount of Contribution (\$) \$200.0 | 10 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions) Retired | | _ |
| | Date 06/24/2025 | Full name of contributor out-of-state PAC (ID#:_ Dunaway, Scott (Mr.) Contributor address; City; State; Zip Code Austin, TX 78746 | | Amount of Contribution (\$) \$2,500.0 | 0 |
| | Principal occu Managing Pa | pation / Job title (See Instructions) artner | Employer (See Instructions) The Monument Group | | |
| | | | 1 | | - |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDU | LE A1 |
|---|-------------------------------|--|---|---|--|--------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 10/35 Rpt: 14/101 | |
| 2 | FILER NAME Texans for K | Celly Hancock SPAC | | 3 | Filer ID (Ethics Commiss 00067719 | ion Filers) |
| 4 | Date 06/27/2025 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$10,000.00 |
| _ | | Grapevine, TX 76099 | | | | |
| 8 | Principal occu President | ipation / Job title (See Instructions) | 9 Employer (See Instructions) Classic Chevrolet |) | | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_Folkins, Sally (Ms.) Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | Grand Prairie, TX 75052 upation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Business Aa | | Wycliffe | , | | |
| | Date 06/27/2025 | Full name of contributor out-of-state PAC (ID#:_ Foote, Durwood (Mr.) Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$100.00 |
| | | Hurst, TX 76053 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions) Retired |) | | |
| | Date 06/27/2025 | Full name of contributor out-of-state PAC (ID#:_Fox, Chad (Mr.) Contributor address; City; State; Zip Code Southlake, TX 76092 |) | | Amount of Contribution (\$) | \$350.00 |
| | Principal occu Wealth Advi | pation / Job title (See Instructions) or | Employer (See Instructions) Morgan Stanley |) | | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_ Gebbia, Joe (Mr.) Contributor address; City; State; Zip Code Austin, TX 78703 | | | Amount of Contribution (\$) | \$500.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions) Retired |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL C | ONTRIBUTION | S | | SCHEDULE A1 |
|---|------------------------------|---|--|---|------------|--|
| | The Instruc | ction Guide explains how | to complete this for | n. | 1 | Total pages Schedule A1: Sch: 11/35 Rpt: 15/101 |
| 2 | FILER NAME Texans for K | Celly Hancock SPAC | | | 3 | Filer ID (Ethics Commission Filers) 00067719 |
| 4 | Date 06/27/2025 | 5 Full name of contributor [Gilchrist, Charles (Mr.)6 Contributor address; City; Sta | out-of-state PAC (ID#: te; Zip Code |) | 7 | Amount of Contribution (\$) \$10,000.00 |
| _ | Dringing Lagra | Weatherford, TX 76087 | | Franklavar (Caa Iratuvatiana | _ | |
| 8 | New Vehicle | pation / Job title (See Instructions) Dealer | 9 | Employer (See Instructions Gilchrist Automotive | 5) | |
| | Date 06/28/2025 | Full name of contributor [Gilchrist, Stephen (Mr.) Contributor address; City; Sta | |) | | Amount of Contribution (\$) \$10,000.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | .) | |
| | New Vehicle | | | Gilchrist Automotive | ') | |
| | Date 06/30/2025 | Full name of contributor Glickman, Jo Ann (Ms.) Contributor address; City; Sta | out-of-state PAC (ID#: te; Zip Code |) | | Amount of Contribution (\$) \$25.00 |
| | Daine die al access | Austin, TX 78759 | | Faralas en (Cara la struction e | Ĺ | |
| | Retired | pation / Job title (See Instructions) | | Employer (See Instructions Retired | ·) | |
| | Date 06/30/2025 | Full name of contributor [Goldman, Elliot (Mr.) Contributor address; City; Sta Fort Worth, TX 76109 | out-of-state PAC (ID#: te; Zip Code | | | Amount of Contribution (\$) \$10.00 |
| | Principal occu unemployed | pation / Job title (See Instructions) | | Employer (See Instructions unemployed | <u>;</u>) | |
| | Date 06/26/2025 | Full name of contributor Good Government Fund Contributor address; City; Sta Fort Worth, TX 76102 | out-of-state PAC (ID#: te; Zip Code |) | | Amount of Contribution (\$) \$25,000.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> | |
| | | | | | | |

| MONETARY POLITICAL CONTRIBUTIONS | | | | SCHEDULE A1 | | | |
|----------------------------------|----------------------------|---|--|-------------|--|------------|--|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 12/35 Rpt: 16/101 | | |
| 2 | FILER NAME Texans for k | Celly Hancock SPAC | | 3 | Filer ID (Ethics Commission 00067719 | on Filers) | |
| 4 | Date 06/23/2025 | 5 Full name of contributor out-of-state PAC (ID#:_ Gould, Thomas (Mr.) 6 Contributor address; City; State; Zip Code |) | 7 | Amount of Contribution (\$) | \$100.00 | |
| _ | Daine in all a service | Grand Prairie, TX 75050 | 2 Farely (Carlot Arthur) | | | | |
| 8 | Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions Retired |) | | | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_ Gray Reed PAC Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$5,000.00 | |
| | Principal occu | Houston, TX 77056 pation / Job title (See Instructions) | Employer (See Instructions |) | | | |
| | i illoipai ooda | pation 7 cos title (ecc metadotoris) | Employer (Geo metrocione | | | | |
| | Date 06/28/2025 | Full name of contributor out-of-state PAC (ID#:_ Greer, James (Mr.) Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$2,500.00 | |
| | | Roanoke, TX 76262 | | | | | |
| | Principal occu Officer | pation / Job title (See Instructions) | Employer (See Instructions Oncor Electric |) | | | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_ Guevara, Rosalinda (Mrs.) Contributor address; City; State; Zip Code Westlake, TX 76262 | | | Amount of Contribution (\$) | \$2,500.00 | |
| | Principal occu Homeaker | pation / Job title (See Instructions) | Employer (See Instructions Homemaker |) | | | |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_ HOMEPAC of the Texas Association of Builders Contributor address; City; State; Zip Code Austin, TX 78701 | | | Amount of Contribution (\$) | \$2,500.00 | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | | |
| | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDULE A1 |
|---|------------------------------|--|---|----------------|--|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 13/35 Rpt: 17/101 |
| 2 | FILER NAME Texans for K | Celly Hancock SPAC | | 3 | Filer ID (Ethics Commission Filers) 00067719 |
| 4 | Date 06/23/2025 | Full name of contributor | | 7 | Amount of Contribution (\$) \$25.00 |
| | | Plano, TX 75093 | | | |
| 8 | | pation / Job title (See Instructions) Il Estate Broker | 9 Employer (See Instructions Self Employed | 5) | |
| | Date 06/30/2025 | Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) \$250.00 |
| | Principal occu Retired | Arlington, TX 76012 pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) | |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_ Harper, Alan (Mr.) Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) \$25,000.00 |
| | Principal occu | Fort Worth, TX 76132 pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) | |
| | CEO | Full name of contributor | L & M Service Group Ind | c | Associate of Contribution (f) |
| | 06/23/2025 | Harrison, Paul (Mr.) |) | | Amount of Contribution (\$) \$1,000.00 |
| | Principal occu Founder CT | pation / Job title (See Instructions) | Employer (See Instructions Simpli.fi | 5) | |
| | Date 06/28/2025 | Full name of contributor out-of-state PAC (ID#:_ Heldenfels IV, Fred (Mr.) Contributor address; City; State; Zip Code Austin, TX 78746 | | | Amount of Contribution (\$) \$2,500.00 |
| | Principal occu Chairman | pation / Job title (See Instructions) | Employer (See Instructions Heldenfels Enterprises, | | : |
| | | | | | |

| | MONET | ARY POLITICAL C | ONTRIBUTION | S | | SCHEDULE A1 |
|---|----------------------------|--|---|--|--------|--|
| | The Instruc | ction Guide explains how | to complete this for | n. | 1 | Total pages Schedule A1: Sch: 14/35 Rpt: 18/101 |
| 2 | FILER NAME Texans for K | elly Hancock SPAC | | | 3 | Filer ID (Ethics Commission Filers) 00067719 |
| 4 | Date 06/28/2025 | 5 Full name of contributor Henry, Matthew (Mr.)6 Contributor address; City; Sta | out-of-state PAC (ID#: tte; Zip Code | | 7 | Amount of Contribution (\$) \$2,500.00 |
| _ | Deinainal assu | Dallas, TX 75218 | lo. | Frankston (Cookstants) | _ | |
| 8 | | pation / Job title (See Instructions) General Counsel | 9 | Employer (See Instructions Oncor |) | |
| | Date 06/30/2025 | Full name of contributor Hey, Bill (Mr.) Contributor address; City; Sta | |) | | Amount of Contribution (\$) \$100.00 |
| | Deinainal assu | Keller, TX 76248 | | Frankston (Cookstanting | _ | |
| | • | pation / Job title (See Instructions) Training Instructor | | Employer (See Instructions Southwest Airlines | 5) | |
| | Date 06/24/2025 | Full name of contributor Hill III, John (Mr.) Contributor address; City; Sta | out-of-state PAC (ID#: tte; Zip Code | | | Amount of Contribution (\$) \$10,000.00 |
| | | Houston, TX 77019 | | | | |
| | Principal occu CEO | pation / Job title (See Instructions) | | Employer (See Instructions Calpine Corporation | i) | |
| | Date 06/26/2025 | Full name of contributor Hillco PAC Contributor address; City; Sta Austin, TX 78701 | out-of-state PAC (ID#: tte; Zip Code | | | Amount of Contribution (\$) \$5,000.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | |
| | Date 06/26/2025 | Full name of contributor Hilliary, Dustin (Mr.) Contributor address; City; Sta | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) \$10,000.00 |
| | Principal occu Co-CEO | pation / Job title (See Instructions) | | Employer (See Instructions Hillary Communictions | i) | |
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| | MONETARY POLITICAL CONTRIBUTIONS | | | | SCHEDU | LE A1 |
|---|----------------------------------|---|---|---|--|--------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 15/35 Rpt: 19/101 | |
| 2 | FILER NAME Texans for k | Kelly Hancock SPAC | | 3 | Filer ID (Ethics Commiss 00067719 | ion Filers) |
| 4 | Date 06/26/2025 | 5 Full name of contributor out-of-state PAC (ID#:_ Hilliary Jr., Edward (Mr.) 6 Contributor address; City; State; Zip Code |) | 7 | Amount of Contribution (\$) | \$10,000.00 |
| _ | | Elgin, OK 73538 | | | | |
| 8 | Principal occu Co-CEO | pation / Job title (See Instructions) | 9 Employer (See Instructions Hillary Communications |) | | |
| | Date 06/25/2025 | Full name of contributor out-of-state PAC (ID#:_ Hoskins, Melissa (Ms.) Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu | Benbrook, TX 76126 spation / Job title (See Instructions) | Employer (See Instructions | | | |
| | CEO | pation / sob title (see instructions) | WilliamsRDM, Inc | , | | |
| | Date 06/25/2025 | Full name of contributor out-of-state PAC (ID#:_ Howard, Nancy Kay (Mrs.) Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$500.00 |
| | | Fort Worth, TX 76107 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions Retired |) | | |
| | Date 06/23/2025 | Full name of contributor out-of-state PAC (ID#:_ Howard Jr., John (Mr.) Contributor address; City; State; Zip Code Marble Falls, TX 78654 |) | | Amount of Contribution (\$) | \$500.00 |
| | Principal occu Attorney | pation / Job title (See Instructions) | Employer (See Instructions Dell technologies |) | | |
| | Date 06/23/2025 | Full name of contributor out-of-state PAC (ID#:_ Huang, Paul (Mr.) Contributor address; City; State; Zip Code Richardson, TX 75080 |) | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu Realtor | pation / Job title (See Instructions) | Employer (See Instructions Richland Real Estate |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDU | LE A1 |
|---|-------------------------------|---|--|----------|--|--------------|
| | The Instru | ction Guide explains how to complete this | form. | 1 | Total pages Schedule A1: Sch: 16/35 Rpt: 20/101 | |
| 2 | FILER NAME Texans for K | Celly Hancock SPAC | | 3 | Filer ID (Ethics Commiss 00067719 | ion Filers) |
| 4 | Date 06/23/2025 | Full name of contributor | :) | 7 | Amount of Contribution (\$) | \$50.00 |
| _ | | Grapevine, TX 76051 | T | | | |
| 8 | Attorney | pation / Job title (See Instructions) | 9 Employer (See Instructions The Hurley Law Firm | 5) | | |
| | Date 06/26/2025 | Full name of contributor x out-of-state PAC (ID# Intercontinental Exhange Inc PAC Contributor address; City; State; Zip Code | : C00443168) | | Amount of Contribution (\$) | \$5,000.00 |
| | Principal occu | Atlanta, GA 30328 pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID# Jackson, Lee (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75219 | :) | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions Retired | <u> </u> | | |
| | Date 06/29/2025 | Full name of contributor out-of-state PAC (ID# James Jr., Paul (Mr.) Contributor address; City; State; Zip Code San Antonio, TX 78255 | | | Amount of Contribution (\$) | \$10.00 |
| | Principal occu Engineer | pation / Job title (See Instructions) | Employer (See Instructions J4 Oilfield |) | | |
| | Date 06/25/2025 | Full name of contributor out-of-state PAC (ID# Johnson, Casey (Mr.) Contributor address; City; State; Zip Code Hallsville, TX 75760 | :) | | Amount of Contribution (\$) | \$10,000.00 |
| | Principal occu Heavy Highv | pation / Job title (See Instructions) vay | Employer (See Instructions Longview Bridge and Ro | | | |
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| | MONEI | ARY POLITICAL CO | NIRIBUTION | S | SCHEDULE A1 |
|---|---------------------------------|--|-------------------------|--|--|
| | The Instru | ction Guide explains how to | complete this form | n. | 1 Total pages Schedule A1: Sch: 17/35 Rpt: 21/101 |
| 2 | FILER NAME | | | | 3 Filer ID (Ethics Commission Filers) |
| | Texans for K | elly Hancock SPAC | | | 00067719 |
| 4 | Date 06/26/2025 | 5 Full name of contributor | out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) \$5,000.00 |
| | | Fort Worth, TX 76107 | • | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 | Employer (See Instructions) |) |
| | Attorney | | | Kelly Hart Attorneys at L | aw |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 06/25/2025 | King, Daryl (Mr.) | out of state 1710 (1211 | | \$100.00 |
| | 33,23,232 | Contributor address; City; State; | 7in Code | | 720000 |
| | | Contributor address, Oity, State, | Zip Code | | |
| | | | | | |
| | | North Richland Hills, TX 7618 | 80 | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions) | |
| | Retired | | | Retired | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 06/25/2025 | Kleinhelnz, John (Mr.) | | | \$10,000.00 |
| | | Contributor address; City; State; | Zip Code | | |
| | | | | | |
| | | | | | |
| | | Fort Worth, TX 76107 | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions) | |
| | CEO and Pre | esident | | Kleinheinz Capital | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 06/23/2025 | Koos, Tom (Mr.) | | | \$5,000.00 |
| | | Contributor address; City; State; | Zip Code | | |
| | | | | | |
| | | W 4 1 TV 70000 | | | |
| | | Westlake, TX 76262 | | | |
| | | oation / Job title (See Instructions) | | Employer (See Instructions) |) |
| | CEO | | | Prime Source Brands | |
| | Date | — | out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 06/25/2025 | Kromann, Barry (Mr.) | | | \$500.00 |
| | | Contributor address; City; State; | Zip Code | | |
| | | | | | |
| | | Fort Worth TV 76122 | | | |
| | Dringing! | Fort Worth, TX 76132 | ı | Employer (Con Instructions) | |
| | Principal occu Private Equit | pation / Job title (See Instructions) | | Employer (See Instructions) Guardian Equity, LLC | , |
| | Trivale Equil | у | | Guaruian Equity, LLC | |
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| | MONET | ARY POLITICAL CONTRIBUTIO | NS | SCHEDULE | € A1 |
|---|----------------------------|--|---|--|-------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 Total pages Schedule A1: Sch: 18/35 Rpt: 22/101 | |
| 2 | FILER NAME Texans for K | Kelly Hancock SPAC | | 3 Filer ID (Ethics Commission 00067719 | Filers) |
| 4 | Date 06/27/2025 | 5 Full name of contributor out-of-state PAC (ID#:_ Kumar, Yogesh (Mr.) 6 Contributor address; City; State; Zip Code |) | 7 Amount of Contribution (\$) | \$5,000.00 |
| | | Westlake, TX 76262 | | | |
| 8 | Principal occu CEO | pation / Job title (See Instructions) | 9 Employer (See Instructions Southlake Specialty Insu | | |
| | Date 06/23/2025 | Full name of contributor out-of-state PAC (ID#:_ Laurence, Brenda (Mrs.) Contributor address; City; State; Zip Code |) | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | North Richland Hills, TX 76182 upation / Job title (See Instructions) | Employer (See Instructions Retired |) | |
| | Date 06/25/2025 | Full name of contributor out-of-state PAC (ID#:_ Lee, Michelle (Mrs.) Contributor address; City; State; Zip Code Westlake, TX 76262 |) | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu Retired | Ipation / Job title (See Instructions) | Employer (See Instructions Retired |) | |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_Lind, Rick (Mr.) Contributor address; City; State; Zip Code Hillsboro, TX 76645 |) | Amount of Contribution (\$) | \$5.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions Retired |) | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_Livon, Dave (Mr.) Contributor address; City; State; Zip Code Roanoke, TX 76262 | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu Retired | ipation / Job title (See Instructions) | Employer (See Instructions Retired | | |
| | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | DNS | | SCHEDUI | E A1 |
|---|-----------------------------|---|---|--------|--|------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 19/35 Rpt: 23/101 | |
| 2 | FILER NAME Texans for K | elly Hancock SPAC | | 3 | Filer ID (Ethics Commission 00067719 | on Filers) |
| 4 | Date 06/23/2025 | Full name of contributor | | 7 | Amount of Contribution (\$) | \$25.00 |
| _ | | Borne, TX 78006 | I | Ĺ | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions Retired | s) | | |
| | Date 06/24/2025 | Full name of contributor out-of-state PAC (ID#:_ Luskey, Stephen (Mr.) Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$5,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Oil & Gas | , | Brazos Midstream | -, | | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_ Marcontell Jr., Donald (Mr.) Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$1,000.00 |
| | | Westlake, TX 76262 | | | | |
| | | pation / Job title (See Instructions) enefits Advisor | Employer (See Instructions OneDigital Health | s) | | |
| | Date 06/23/2025 | Full name of contributor out-of-state PAC (ID#:_ Marcus, Leland (Mr.) Contributor address; City; State; Zip Code Hurst, TX 76053 | | | Amount of Contribution (\$) | \$50.00 |
| | • | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Patent Attori | <u> </u> | Devin Law Firm | | | |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_ McAdams, James (Mr.) Contributor address; City; State; Zip Code Cedar Park, TX 78613 |) | | Amount of Contribution (\$) | \$5,000.00 |
| | Principal occu President | pation / Job title (See Instructions) | Employer (See Instructions McAdams Energy Group | | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | NS | SCHEDULE A1 |
|---|----------------------------|--|---|---|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 Total pages Schedule A1: Sch: 20/35 Rpt: 24/101 |
| 2 | FILER NAME Texans for K | Celly Hancock SPAC | | 3 Filer ID (Ethics Commission Filers) 00067719 |
| 4 | Date 06/30/2025 | Full name of contributor | | 7 Amount of Contribution (\$) \$100.00 |
| | | Mt Pleasant, TX 75456 | | |
| 8 | Principal occu Owner | pation / Job title (See Instructions) | 9 Employer (See Instructions) Longhorn Trailer Sales L | |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_McCord, Mia (Mrs.) Contributor address; City; State; Zip Code |) | Amount of Contribution (\$) \$500.00 |
| | Dringinal occu | Leander, TX 78641 pation / Job title (See Instructions) | Employer (See Instructions) | |
| | | nment Affairs | Texas Chemistry Counci | |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#: McGuire, Michael (Mr.) Contributor address; City; State; Zip Code | | Amount of Contribution (\$) \$50,000.00 |
| | | Dallas, TX 75205 | | |
| | Principal occu CEO | pation / Job title (See Instructions) | Employer (See Instructions) Andrews Distributing | |
| | Date 06/27/2025 | Full name of contributor out-of-state PAC (ID#:_ Messner, Joe (Mr.) Contributor address; City; State; Zip Code Roanoke, TX 76262 |) | Amount of Contribution (\$) \$1,000.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions) Retired | |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_ Moak Casey PAC Contributor address; City; State; Zip Code Austin, TX 78701 | | Amount of Contribution (\$) \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions) | |
| | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDULE A1 |
|---|-------------------------------|--|---|---|--|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 21/35 Rpt: 25/101 |
| 2 | FILER NAME Texans for K | Celly Hancock SPAC | | 3 | Filer ID (Ethics Commission Filers) 00067719 |
| 4 | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_ Moore, Ardon (Mr.) Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$1,000.00 |
| _ | Deinsinal | Fort Worth, TX 76102 | 10. 5 | | |
| 8 | Principal occu President & | pation / Job title (See Instructions) CEO | 9 Employer (See Instructions) Lee M Bass, Inc |) | |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_ Morris, James (Mr.) Contributor address; City; State; Zip Code Austin, TX 78749 | | | Amount of Contribution (\$) \$100.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions) |) | |
| | Date 06/24/2025 | Full name of contributor out-of-state PAC (ID#:_ Mr. Kevin Eltife Campaign Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) \$5,000.00 |
| | Principal occu | Tyler, TX 75702 pation / Job title (See Instructions) | Employer (See Instructions) |) | |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_ Nau III, John (Mr.) Contributor address; City; State; Zip Code Houston, TX 77219 | | | Amount of Contribution (\$) \$250,000.00 |
| | Principal occu CEO | pation / Job title (See Instructions) | Employer (See Instructions) Silver Eagle Distributors | | |
| | Date 06/24/2025 | Full name of contributor out-of-state PAC (ID#:_ Nitsch, Benjamin (Mr.) Contributor address; City; State; Zip Code Fort Worth, TX 76107 | | | Amount of Contribution (\$) \$250.00 |
| | Principal occu Insurance | pation / Job title (See Instructions) | Employer (See Instructions) Marsh McLennan Agenc | | |
| | | | , | | |

| | MONET | ARY POLITICAL CONTRIBUTIO | NS | SCHEDULE A1 |
|---|-----------------------------|---|---|--|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 Total pages Schedule A1: Sch: 22/35 Rpt: 26/101 |
| 2 | FILER NAME Texans for K | Celly Hancock SPAC | | 3 Filer ID (Ethics Commission Filers) 00067719 |
| 4 | Date 06/25/2025 | 5 Full name of contributor out-of-state PAC (ID#:_ Nye Jr., Erle (Mr.) 6 Contributor address; City; State; Zip Code | | 7 Amount of Contribution (\$) \$100,000.00 |
| _ | | Dallas, TX 75225 | | |
| 8 | Principal occu CEO | pation / Job title (See Instructions) | 9 Employer (See Instructions) Oncor Electric Delivery (| |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_ O'Donnell, Scott (Mr.) Contributor address; City; State; Zip Code |) | Amount of Contribution (\$) \$1,000.00 |
| | Dringing oggu | Southlake, TX 76092 | Employer (See Instructions | |
| | Retired | pation / Job title (See Instructions) | Employer (See Instructions) Retired |) |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#: PSEL Political Action Committee Contributor address; City; State; Zip Code |) | Amount of Contribution (\$) \$25,000.00 |
| | Principal occu | Fort Worth, TX 76102 pation / Job title (See Instructions) | Employer (See Instructions |) |
| | Date 06/27/2025 | Full name of contributor out-of-state PAC (ID#:_ Pack, Tony (Mr.) Contributor address; City; State; Zip Code Southlake, TX 76092 | | Amount of Contribution (\$) \$10,000.00 |
| | Principal occu President | pation / Job title (See Instructions) | Employer (See Instructions) Sam Pack Auto Group | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_ Pape-Dawson Engineers PAC Contributor address; City; State; Zip Code San Antonio, TX 78213 | | Amount of Contribution (\$) \$2,500.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions) | |
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| | MONET | ARY POLITICAL CONTRIBUTIO | NS | SCHEDULE A1 |
|---|----------------------------|---|--|--|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 Total pages Schedule A1: Sch: 23/35 Rpt: 27/101 |
| 2 | FILER NAME Texans for K | Celly Hancock SPAC | | 3 Filer ID (Ethics Commission Filers) 00067719 |
| 4 | Date 06/23/2025 | 5 Full name of contributor out-of-state PAC (ID#: Payne, Lea (Mrs.) 6 Contributor address; City; State; Zip Code | | 7 Amount of Contribution (\$) \$1,000.00 |
| _ | | Fort Worth, TX 76107 | | |
| 8 | Staff | pation / Job title (See Instructions) | 9 Employer (See Instructions) US House of Representa | |
| | Date 06/27/2025 | Full name of contributor out-of-state PAC (ID#:_Pellegrino, Kevin (Mr.) Contributor address; City; State; Zip Code |) | Amount of Contribution (\$) \$100.00 |
| | Principal occu | Fort Worth, TX 76179 pation / Job title (See Instructions) | Employer (See Instructions | |
| | CEO | pation / 300 title (See Instructions) | Fort Worth Apartment As | |
| | Date 06/23/2025 | Full name of contributor out-of-state PAC (ID#: Pena, John (Mr.) Contributor address; City; State; Zip Code |) | Amount of Contribution (\$) \$500.00 |
| | | Keller, TX 76262 | | |
| | Principal occu retired | pation / Job title (See Instructions) | Employer (See Instructions) Retired |) |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_ Perdue, Brandon, Fielder, Collins & Mott LLP Contributor address; City; State; Zip Code Lubbock, TX 79408 | | Amount of Contribution (\$) \$2,500.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions) | |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_ Perot Jr., Ross (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75219 |) | Amount of Contribution (\$) \$25,000.00 |
| | Principal occu Chairman | pation / Job title (See Instructions) | Employer (See Instructions) Hillwood | |
| | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | SCHEDULE A1 |
|---|----------------------------|--|--|--|
| | The Instru | ction Guide explains how to complete this | form. | 1 Total pages Schedule A1: Sch: 24/35 Rpt: 28/101 |
| 2 | FILER NAME Texans for K | elly Hancock SPAC | | 3 Filer ID (Ethics Commission Filers) 00067719 |
| 4 | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#: Posey, Jake (Mr.) Contributor address; City; State; Zip Code | | 7 Amount of Contribution (\$) \$1,000.00 |
| | | Gerogetown, TX 78633 | | |
| 8 | Principal occu Attorney | pation / Job title (See Instructions) | 9 Employer (See Instructions The Posey Law Firm, PC | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#: Powell, Gideon (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75251 | | Amount of Contribution (\$) \$25,000.00 |
| | Principal occu CEO | pation / Job title (See Instructions) | Employer (See Instructions Cholla Petroleum | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#: Radler, Michael (Mr.) Contributor address; City; State; Zip Code |) | Amount of Contribution (\$) \$20,000.00 |
| | Principal occu | Forst Worth, TX 76107 pation / Job title (See Instructions) | Employer (See Instructions |) |
| | CEO | | Tug Hill | |
| | Date 06/27/2025 | Full name of contributor out-of-state PAC (ID#: Rampy, Troy (Mr.) Contributor address; City; State; Zip Code North Richland Hills, TX 76182 | | Amount of Contribution (\$) \$100.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions Retired | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#; Richards, David (Mr.) Contributor address; City; State; Zip Code Austin, TX 78749 | | Amount of Contribution (\$) \$25.00 |
| | | pation / Job title (See Instructions) erneral Counsel | Employer (See Instructions Texas Department of Mo | |
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| | MONET | ARY POLITICAL CONTRIBUTION | ONS | SCHEDULE A1 |
|---|-----------------------------|---|--|--|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 25/35 Rpt: 29/101 |
| 2 | FILER NAME Texans for K | elly Hancock SPAC | | 3 Filer ID (Ethics Commission Filers) 00067719 |
| 4 | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_ Ripley, David (Mr.) Contributor address; City; State; Zip Code | | 7 Amount of Contribution (\$) \$10,000.00 |
| | | Moraga, CA 94556 | | |
| 8 | Principal occu Co-CEO | pation / Job title (See Instructions) | 9 Employer (See Instructions Payward |) |
| | Date 06/23/2025 | Full name of contributor out-of-state PAC (ID#:_ Roberts, Rick (Mr.) Contributor address; City; State; Zip Code | | Amount of Contribution (\$) \$25.00 |
| | Principal occu Retired | Watauga, TX 76148 pation / Job title (See Instructions) | Employer (See Instructions |) |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_ Rove, Karen (Mrs.) Contributor address; City; State; Zip Code | | Amount of Contribution (\$) \$5,000.00 |
| | Principal occu | Austin, TX 78703 pation / Job title (See Instructions) | Employer (See Instructions |) |
| | President | · | Infrastructure Solutions, | , |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_ Rove, Karl (Mr.) Contributor address; City; State; Zip Code Austin, TX 78703 |) | Amount of Contribution (\$) \$5,000.00 |
| | Principal occu Principal | pation / Job title (See Instructions) | Employer (See Instructions Karl Rove & Co |) |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_ Rowling, Robert (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75219 | | Amount of Contribution (\$) \$50,000.00 |
| | Principal occu Chairman | pation / Job title (See Instructions) | Employer (See Instructions TRT Holding Inc. |) |
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| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUL | E A1 |
|---|------------------------------|--|--|---|--|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 26/35 Rpt: 30/101 | |
| 2 | FILER NAME Texans for K | Celly Hancock SPAC | | 3 | Filer ID (Ethics Commission 00067719 | on Filers) |
| 4 | Date 06/27/2025 | 5 Full name of contributor out-of-state PAC (ID#:_ Ruelas, Robert (Mr.) 6 Contributor address; City; State; Zip Code |) | 7 | Amount of Contribution (\$) | \$1,000.00 |
| _ | | Southlake, TX 76092 | | | | |
| 8 | Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions) Retired |) | | |
| | Date 06/28/2025 | Full name of contributor out-of-state PAC (ID#:_ Rutter, Donna (Ms.) Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$500.00 |
| | Daine in all account | Fort Worth, TX 76126 | England (Contact disc) | | | |
| | CPA | pation / Job title (See Instructions) | Employer (See Instructions) Donna R Rutter CPA |) | | |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_Saenz, Cynthia (Mrs.) Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$1,000.00 |
| | | Austin, TX 78739 | | | | |
| | Principal occu Teacher | pation / Job title (See Instructions) | Employer (See Instructions) Retired |) | | |
| | Date 06/23/2025 | Full name of contributor out-of-state PAC (ID#:_ Sargent, John (Mr.) Contributor address; City; State; Zip Code Bedford, TX 76021 | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu Dispatcher | pation / Job title (See Instructions) | Employer (See Instructions) American Airlines |) | | |
| | Date 06/25/2025 | Full name of contributor out-of-state PAC (ID#:_Schuh, Martha (Ms.) Contributor address; City; State; Zip Code San Antonio, TX 78230 |) | | Amount of Contribution (\$) | \$10.41 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions) Retired |) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | ONS | SCHEDULE A1 |
|---|------------------------------|---|---|--|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 27/35 Rpt: 31/101 |
| 2 | FILER NAME Texans for K | elly Hancock SPAC | | 3 Filer ID (Ethics Commission Filers) 00067719 |
| 4 | Date 06/25/2025 | Full name of contributor out-of-state PAC (ID#:_ Schwrtz, Dennis (Mr.) Contributor address; City; State; Zip Code | | 7 Amount of Contribution (\$) \$5,000.00 |
| _ | | Roanoke, TX 76262 | | |
| 8 | Attorney | pation / Job title (See Instructions) | 9 Employer (See Instructions Self Employed |) |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_ Sewell, Carl (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75225 | | Amount of Contribution (\$) \$10,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions Sewell Auto Dealerships | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_ Sewell, Robert (Mr.) Contributor address; City; State; Zip Code Westake, TX 76262 | | Amount of Contribution (\$) \$1,000.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions Retired |) |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_ Sewell III, Carl (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75205 | | Amount of Contribution (\$) \$10,000.00 |
| | Principal occu CEO | pation / Job title (See Instructions) | Employer (See Instructions Sewell Automotive Com | |
| | Date 06/29/2025 | Full name of contributor out-of-state PAC (ID#:_Short, Gregg (Mr.) Contributor address; City; State; Zip Code Westlake, TX 76262 | | Amount of Contribution (\$) \$500.00 |
| | Principal occu Founder/Ow | pation / Job title (See Instructions) ner | Employer (See Instructions WMC Inc | |
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| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDU | LE A1 |
|---|--------------------------------|--|--|---|--|--------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 28/35 Rpt: 32/101 | |
| 2 | FILER NAME Texans for k | Celly Hancock SPAC | | 3 | Filer ID (Ethics Commission 00067719 | on Filers) |
| 4 | Date 06/25/2025 | 5 Full name of contributor out-of-state PAC (ID#:_ Simcox, Stephen (Mr.) 6 Contributor address; City; State; Zip Code |) | 7 | Amount of Contribution (\$) | \$500.00 |
| _ | <u> </u> | Dallas, TX 75201 | 10 5 1 10 10 11 | | | |
| 8 | Attorney | pation / Job title (See Instructions) | 9 Employer (See Instructions) Stinson |) | | |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_Simmons, Caroline (Ms.) Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$2,500.00 |
| | Deignainal agai | Austin, TX 78746 | | | | |
| | Principal occu Partner | pation / Job title (See Instructions) | Employer (See Instructions Texas Lobby Stategies |) | | |
| | Date 06/24/2025 | Full name of contributor out-of-state PAC (ID#:_ Skaggs, Jason (Mr.) Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$1,000.00 |
| | | Fort Worth, TX 76132 | | | | |
| | Principal occu CEO | ipation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 06/25/2025 | Full name of contributor out-of-state PAC (ID#:_Stamps , Gregory (Mr.) Contributor address; City; State; Zip Code North Richland Hills, TX 76182 |) | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu Non Profit E | ripation / Job title (See Instructions) xecutive | Employer (See Instructions Stanford University |) | | |
| | Date 06/28/2025 | Full name of contributor out-of-state PAC (ID#:_ Stewart, Timothy (Mr.) Contributor address; City; State; Zip Code Westlake, TX 76262 | | | Amount of Contribution (\$) | \$5,000.00 |
| | Principal occu Real Estate | pation / Job title (See Instructions) | Employer (See Instructions Bloomfield Homes |) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDULE A | 1 |
|---|----------------------------|--|--------------------------------------|----------|--|-------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 29/35 Rpt: 33/101 | |
| 2 | FILER NAME Texans for K | Celly Hancock SPAC | | 3 | Filer ID (Ethics Commission Filer 00067719 | s) |
| 4 | Date 06/26/2025 | 5 Full name of contributor out-of-state PAC (ID#:_ Stolenberg, Wayne (Mr.) 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$1,00 | 00.00 |
| _ | | Westlake, TX 76262 | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | 9 Employer (See Instructions Retired | 5) | | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_ Sutton, Jim (Mr.) Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) \$2 | 25.00 |
| | Principal occu | Pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Retired | | Retired | | | |
| | Date 06/27/2025 | Full name of contributor out-of-state PAC (ID#:_ TALHI LIPAC Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) \$3,00 | 00.00 |
| | | Austin, TX 78767 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_ Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code Austin, TX 78701 | | | Amount of Contribution (\$) \$10,00 | 00.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_ Texans for Responsible Government PAC Contributor address; City; State; Zip Code Austin, TX 78701 | | | Amount of Contribution (\$) \$25,00 | 00.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | () | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDU | LE A1 |
|---|----------------------------|--|------------------------------|---|--|--------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 30/35 Rpt: 34/101 | |
| 2 | FILER NAME Texans for K | Celly Hancock SPAC | | 3 | Filer ID (Ethics Commission 00067719 | on Filers) |
| 4 | Date 06/27/2025 | 5 Full name of contributor out-of-state PAC (ID#:_ Texans for Truth & Liberty PAC 6 Contributor address; City; State; Zip Code |) | 7 | Amount of Contribution (\$) | \$20,000.00 |
| _ | <u> </u> | Austin, TX 78701 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_ Texas Association of Health Plans PAC Contributor address; City; State; Zip Code Austin, TX 78701 | | | Amount of Contribution (\$) | \$2,500.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_ Texas Food & Fuel Association PAC Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$2,500.00 |
| | Principal occu | Austin, TX 78701 pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | i illicipai occu | pation 7 300 title (See manuculons) | Employer (See instructions | , | | |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_ Texas Manufactured Housing Assoc Inc PAC Contributor address; City; State; Zip Code Austin, TX 78759 |) | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_ Texas Optometric PAC Contributor address; City; State; Zip Code Austin, TX 78705 | | | Amount of Contribution (\$) | \$2,500.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
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| | MONET | ARY POLITICAL CONTRIBUTIO | ONS | SCHEDULE A1 | |
|---|------------------------------|---|--|--|-----|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 Total pages Schedule A1: Sch: 31/35 Rpt: 35/101 | |
| 2 | FILER NAME Texans for K | elly Hancock SPAC | | 3 Filer ID (Ethics Commission Filers) 00067719 | |
| 4 | Date 06/23/2025 | Full name of contributor | , | 7 Amount of Contribution (\$) \$25,000 | 00 |
| _ | | Dallas, TX 75201 | | | |
| 8 | Principal occu Homemaker | pation / Job title (See Instructions) | 9 Employer (See Instructions) Homemaker | ns) | |
| | Date 06/23/2025 | Full name of contributor out-of-state PAC (ID#:_ Todd, Patrick (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75201 | | Amount of Contribution (\$) | 00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions) | ns) | |
| | Real Estate | Development & Investment | Todd Interests | | |
| | Date 06/29/2025 | Full name of contributor |) | Amount of Contribution (\$) \$1,000 | .00 |
| | | Austin, TX 78701 | | | |
| | Principal occu Consultant | pation / Job title (See Instructions) | Employer (See Instructions) Self Employed | ns) | |
| | Date 06/29/2025 | Full name of contributor out-of-state PAC (ID#:_ Travelstead, DeWayne (Mr.) Contributor address; City; State; Zip Code Westlake, TX 76262 | | Amount of Contribution (\$) | .00 |
| | Principal occu Engineer | pation / Job title (See Instructions) | Employer (See Instructions) Third Oil | ns) | |
| | Date 06/27/2025 | Full name of contributor out-of-state PAC (ID#:_ Troutman Pepper Locke LLP Contributor address; City; State; Zip Code Atlanta, GA 30308 | | Amount of Contribution (\$) \$5,000 | 00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions) | ns) | |
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| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDULI | E A1 |
|---|----------------------------|--|--|---|--|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 32/35 Rpt: 36/101 | |
| 2 | FILER NAME Texans for K | Celly Hancock SPAC | | | Filer ID (Ethics Commission 00067719 | n Filers) |
| 4 | Date 06/27/2025 | Full name of contributor out-of-state PAC (ID#:_Uhr, William (Mr.) Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$50.00 |
| _ | | Weatherford, TX 76087 | | | | |
| 8 | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions) Retired |) | | |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_ Valero Energy Corporation Political Action Com Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$3,000.00 |
| | Principal occu | San Antonio, TX 78269 pation / Job title (See Instructions) | Employer (See Instructions) |) | | |
| | Date 06/27/2025 | Full name of contributor out-of-state PAC (ID#:_ Walker, Jimmie (Mr.) Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$5.00 |
| | Principal occu | Fort Worth, TX 76117 pation / Job title (See Instructions) | Employer (See Instructions) |) | | |
| | Accountant | , | Minuteman Press | | | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_ Warren, Kelcy (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75225 | | | Amount of Contribution (\$) \$: | 50,000.00 |
| | Principal occu Chairman | pation / Job title (See Instructions) | Employer (See Instructions) Energy Transfer Partners | | | |
| | Date 06/27/2025 | Full name of contributor out-of-state PAC (ID#:_ Weekley, Fred (Mr.) Contributor address; City; State; Zip Code Arlington, TX 76012 | | | Amount of Contribution (\$) | \$500.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions) Retired |) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDULE A1 |
|---|--|--|--|--|--|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 33/35 Rpt: 37/101 |
| 2 | FILER NAME Texans for K | Kelly Hancock SPAC | | 3 | Filer ID (Ethics Commission Filers) 00067719 |
| 4 | Date 06/23/2025 | 5 Full name of contributor out-of-state PAC (ID#:_ Weekley, Richard (Mr.) 6 Contributor address; City; State; Zip Code | 7 | Amount of Contribution (\$) \$5,000.00 | |
| 8 | Principal occu | Houston, TX 77027 Ipation / Job title (See Instructions) | 9 Employer (See Instructions | | |
| 0 | Real Estate | Developer | Self Employed |) | |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_ Weisman, John (Mr.) Contributor address; City; State; Zip Code | | Amount of Contribution (\$) \$150,000.00 | |
| | Principal occu | New Braunfels, TX 78132 upation / Job title (See Instructions) | Employer (See Instructions |) | |
| | CEO Hunter Industri | | | | |
| | Date Full name of contributor out-of-state PAC (ID#:) Wentworth, Jeffrey (Sen.) Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) \$500.00 | |
| | | San Antonio, TX 78209 | | | |
| | Principal occu Attorney | ipation / Job title (See Instructions) | Employer (See Instructions Self employed |) | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_ Wheeler, Lynda (Mrs.) Contributor address; City; State; Zip Code North Richland Hills, TX 76180 | | | Amount of Contribution (\$) \$25.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions Retired |) | |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#:_ Whitley, G. David (Mr.) Contributor address; City; State; Zip Code Austin, TX 78701 | | | Amount of Contribution (\$) \$1,000.00 |
| | Principal occu Attorney | upation / Job title (See Instructions) | Employer (See Instructions Gregory Strategies |) | |
| | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | DNS | | SCHEDU | LE A1 |
|---|--|---|--|-----------------------------|--|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 34/35 Rpt: 38/101 | |
| 2 | FILER NAME Texans for K | Celly Hancock SPAC | | 3 | Filer ID (Ethics Commission 00067719 | on Filers) |
| 4 | Date 06/26/2025 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$2,500.00 |
| _ | Deinsinal | Austin, TX 78701 | O Frankrije (Contraction) | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions) |) | | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_Wilkinson, James (Mr.) Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$10,000.00 |
| | Principal occu | Westlake, TX 76262 pation / Job title (See Instructions) | Employer (See Instructions) |) | | |
| | CEO Trail Runner Interna | | | | | |
| | Date Full name of contributor out-of-state PAC (ID#:) Work, Richard (Mr.) Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$200.00 | |
| | | North Richland Hills, TX 76180 | | | | |
| | Principal occu Retired | pation / Job title (See Instructions) | Employer (See Instructions) Retired |) | | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:_ Worley, Carinda (Mrs.) Contributor address; City; State; Zip Code Waxahachie, TX 75165 | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu Homemaker | pation / Job title (See Instructions) | Employer (See Instructions) Homemaker |) | | |
| | Date 06/24/2025 | Full name of contributor out-of-state PAC (ID#:_ Worliz, Tim (Mr.) Contributor address; City; State; Zip Code Keller, TX 76248 | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu COO | pation / Job title (See Instructions) | Employer (See Instructions) Catco USA, LLC |) | | |
| | | | | | | |

| | MONETARY POLITICAL CONTRIBUTIONS | SCHEDULE A1 |
|---|--|---|
| | The Instruction Guide explains how to complete this form. | 1 Total pages Schedule A1: Sch: 35/35 Rpt: 39/101 |
| 2 | FILER NAME Texans for Kelly Hancock SPAC | 3 Filer ID (Ethics Commission Filers) 00067719 |
| 4 | Date 06/24/2025 5 Full name of contributor out-of-state PAC (ID#: | 7 Amount of Contribution (\$) \$1,000.00 |
| | North Richland Hills, TX 76180 | |
| 8 | Principal occupation / Job title (See Instructions) Chairman 9 Employer (See Southwester | e Instructions) rn Services |
| | Date Full name of contributor out-of-state PAC (ID#: | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Fort Worth, TX 76185 | |
| | | ee Instructions) Services |
| | | |
| | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

| SCI | HED | UL | E | Α2 |
|-----|-----|----|---|----|
| | | | | |

| The Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A2: Sch: 1/4 Rpt: 40/101 |
|----------------------------|---|---------------------------------|--|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Texans for k | Kelly Hancock SPAC | | 00067719 |
| 4 TOTAL OF | UNITEMIZED IN-KIND POLITICAL CONTRIB | UTIONS | \$ |
| 5 Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#: |) | 8 Amount of contribution (\$) description s35.84 Event expense |
| 10 Principal occu | pation / Job title (FOR NON-JUDICIAL) (See instructions) | 11 Employer (FOR NON | I-JUDICIAL) (See instructions) |
| Consultant | | Self Employed | |
| 12 Contributor's | principal occupation (FOR JUDICIAL) | 13 Contributor's job title | (FOR JUDICIAL) (See instructions) |
| 14 Contributor's | employer/law firm (FOR JUDICIAL) | 15 Law firm of contributo | or's spouse (if any) (FOR JUDICIAL) |
| 16 If contributor i | s a child, law firm of parent(s) (if any) (FOR JUDICIAL) | 1 | |
| Date 06/26/2025 | Full name of contributor |) | Amount of In-kind contribution contribution (\$) description \$35.84 Event expense |
| | Austin, TX 78701 | | Check if travel outside of Texas. Complete Schedule T. |
| Principal occu | upation / Job title (FOR NON-JUDICIAL) (See instructions) | Employer (FOR NON | I-JUDICIAL) (See instructions) |
| Attorney | | Moak Casey | |
| Contributor's | principal occupation (FOR JUDICIAL) | Contributor's job title | (FOR JUDICIAL) (See instructions) |
| Contributor's | employer/law firm (FOR JUDICIAL) | Law firm of contributo | or's spouse (if any) (FOR JUDICIAL) |
| If contributor i | s a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | |
| Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#: Kearns, Dennis (Mr.) Contributor address; City; State; Zip Code | | Amount of In-kind contribution contribution (\$) description \$35.84 Event expense |
| | Austin, TX 78701 | | Check if travel outside of Texas. Complete Schedule T. |
| Principal occu Attorney | upation / Job title (FOR NON-JUDICIAL) (See instructions) | Employer (FOR NON Self employed | I-JUDICIAL) (See instructions) |
| Contributor's | principal occupation (FOR JUDICIAL) | Contributor's job title | (FOR JUDICIAL) (See instructions) |
| Contributor's | employer/law firm (FOR JUDICIAL) | Law firm of contributo | or's spouse (if any) (FOR JUDICIAL) |
| If contributor i | s a child, law firm of parent(s) (if any) (FOR JUDICIAL) | 1 | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| The Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A2: Sch: 2/4 Rpt: 41/101 | | | | |
|--------------------------------------|--|--|---|--|--|--|--|
| 2 FILER NAME Texans for h | Kelly Hancock SPAC | | 3 Filer ID (Ethics Commission Filers) 00067719 | | | | |
| 4 TOTAL OF | UNITEMIZED IN-KIND POLITICAL CONTRIB | UTIONS | \$ | | | | |
| 5 Date 06/26/2025 | 6 Full name of contributor out-of-state PAC (ID#: | | 8 Amount of solution (\$) In-kind contribution (\$) description \$35.84 Event expense | | | | |
| | Austin, TX 78701 | | Check if travel outside of Texas. Complete Schedule T. | | | | |
| 10 Principal occu Lobbyist | upation / Job title (FOR NON-JUDICIAL) (See instructions) | -JUDICIAL) (See instructions) egy | | | | | |
| 12 Contributor's | principal occupation (FOR JUDICIAL) | 13 Contributor's job title | Contributor's job title (FOR JUDICIAL) (See instructions) | | | | |
| 14 Contributor's | employer/law firm (FOR JUDICIAL) | 15 Law firm of contributo | or's spouse (if any) (FOR JUDICIAL) | | | | |
| 16 If contributor | is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | | | | |
| Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#: McCart, J (Mr.) Contributor address; City; State; Zip Code | | Amount of In-kind contribution contribution (\$) description \$35.84 Event expense | | | | |
| | Austiin, TX 78701 | | Check if travel outside of Texas. Complete Schedule T. | | | | |
| Principal occu Partner | upation / Job title (FOR NON-JUDICIAL) (See instructions) | Employer (FOR NON Hillco Partners | -JUDICIAL) (See instructions) | | | | |
| Contributor's | principal occupation (FOR JUDICIAL) | Contributor's job title | (FOR JUDICIAL) (See instructions) | | | | |
| Contributor's | employer/law firm (FOR JUDICIAL) | Law firm of contributo | or's spouse (if any) (FOR JUDICIAL) | | | | |
| If contributor | is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | | | | |
| Date 06/26/2025 | Full name of contributor out-of-state PAC (ID#: Newton, Chris (Mr.) Contributor address; City; State; Zip Code | | Amount of In-kind contribution contribution (\$) description \$35.84 Event expense | | | | |
| | Austin, TX 78701 | | Check if travel outside of Texas. Complete Schedule T. | | | | |
| | upation / Job title (FOR NON-JUDICIAL) (See instructions) ice President | Employer (FOR NON Texas Apartment A | , | | | | |
| Contributor's | principal occupation (FOR JUDICIAL) | Contributor's job title | (FOR JUDICIAL) (See instructions) | | | | |
| Contributor's | employer/law firm (FOR JUDICIAL) | Law firm of contributo | or's spouse (if any) (FOR JUDICIAL) | | | | |
| If contributor | is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | | | | |
| | | | | | | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| The Instru | ction Guide explains how to complete this 1 | form. | 1 Total pages Schedule A2: Sch: 3/4 Rpt: 42/101 |
|-------------------|---|----------------------------|--|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Texans for I | Kelly Hancock SPAC | | 00067719 |
| 4 TOTAL OF | UNITEMIZED IN-KIND POLITICAL CONTRIB | UTIONS | \$ |
| 5 Date | 6 Full name of contributor out-of-state PAC (ID#: |) | 8 Amount of 9 In-kind contribution |
| 06/26/2025 | Rove, Karl (Mr.) | | contribution (\$) description \$35.84 Event expense |
| | 7 Contributor address; City; State; Zip Code | | I |
| | | | l l |
| | | | _ |
| | Austin, TX 78703 | | Check if travel outside of Texas. Complete Schedule T. |
| | upation / Job title (FOR NON-JUDICIAL) (See instructions) | 11 Employer (FOR NON | I-JUDICIAL) (See instructions) |
| Principal | | Karl Rove & Co | |
| 12 Contributor's | principal occupation (FOR JUDICIAL) | 13 Contributor's job title | (FOR JUDICIAL) (See instructions) |
| | | | |
| 14 Contributor's | employer/law firm (FOR JUDICIAL) | 15 Law firm of contribute | or's spouse (if any) (FOR JUDICIAL) |
| | | | |
| 16 If contributor | is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | |
| | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of In-kind contribution |
| 06/26/2025 | Scott, Bruce (Mr.) | | contribution (\$) description |
| | Contributor address; City; State; Zip Code | | \$35.84 Event expense |
| | , , , , | | ! |
| | | | i |
| | Austin, TX 78703 | | Check if travel outside of Texas. Complete Schedule T. |
| Principal occu | upation / Job title (FOR NON-JUDICIAL) (See instructions) | Employer (FOR NON | I-JUDICIAL) (See instructions) |
| Consultant | | Self Employed | |
| Contributor's | principal occupation (FOR JUDICIAL) | Contributor's job title | (FOR JUDICIAL) (See instructions) |
| | | | |
| Contributor's | employer/law firm (FOR JUDICIAL) | Law firm of contribute | or's spouse (if any) (FOR JUDICIAL) |
| | | | |
| If contributor | is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | I | |
| | | | |
| Date | Full name of contributor out-of-state PAC (ID#: | \ | Amount of ! In-kind contribution |
| 06/30/2025 | Travelstead, Chris (Mr.) | | contribution (\$) description |
| | Contributor address; City; State; Zip Code | | \$967.45 Event expense |
| | Continuator address, City, State, 21p Code | | į |
| | | | l l |
| | Westlake , TX 76262 | | Check if travel outside of Texas. Complete Schedule T. |
| Principal occu | upation / Job title (FOR NON-JUDICIAL) (See instructions) | Employer (FOR NON | |
| Petroleum E | Engineer | Self Employed | , |
| | principal occupation (FOR JUDICIAL) | Contributor's job title | (FOR JUDICIAL) (See instructions) |
| | , | ' | , . |
| Contributor's | employer/law firm (FOR JUDICIAL) | Law firm of contribute | or's spouse (if any) (FOR JUDICIAL) |
| | , | | , (), (, |
| If contributor | is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | <u> </u> | |
| 5511.1154.01 | | | |
| | | | |
| | | | |

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 4/4 Rpt: 43/101 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Texans for Kelly Hancock SPAC 00067719 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 6 Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 06/26/2025 Williams, Tommy (Mr.) \$35.84 i Event expense 7 Contributor address; City; State; Zip Code Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) Williams Public Affairs Owner 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officenoider/Politica Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 1/54 Rpt: 44/101 | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 03/04/2025 | ALC Steaks |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$780.02 | 1205 N Lamar |
| | | |
| | | Austin, TX 78703 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Event Expense Check if travel outside of Texas. Complete Schedule T. |
| | LAI LINDITORE | Check if Austin, TX, officeholder living expense |
| | | Officeholder's hosting dinner meeting with committee |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| 9 | Complete ONLY if direct expenditure to benefit C/Ol | |
| _ | Data | |
| | Date | Payee name |
| | 01/18/2025 | AT&T |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$83.49 | P.O. Box 6463 |
| | | |
| | | Carol Stream, IL 60197 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Campaign telecommunications |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | 1 |
| | Date | Payee name |
| | 02/19/2025 | AT&T |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$83.35 | P.O. Box 6463 |
| | | |
| | | Carol Stream, IL 60197 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | | Campaign telecommunications |
| | Complete ONLY if direct | Candidate/Officeholder name Office county Office hold |
| | Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Expense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

| | Credit Card Payment | The Instruction Guide explains how to com | - | ete this form. |
|---|--|--|------|--|
| 1 | Total pages Schedule F1: | · | _ | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 2/54 Rpt: 45/101 | Texans for Kelly Hancock SPAC | | 00067719 |
| 4 | Date | 5 Payee name | | <u> </u> |
| | 03/20/2025 | AT&T | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Cod | de | |
| | \$83.35 | P.O. Box 6463 | | |
| | | | | |
| | | Carol Stream, IL 60197 | | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) | Description |
| | OF EXPENDITURE | Fees | | Check if travel outside of Texas. Complete Schedule T. |
| | _/ | | | Check if Austin, TX, officeholder living expense |
| | | | | Campaign telecommunications |
| _ | Complete ONLY if direct | Condidate/Officeholder name | ,b+ | Office hold |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office soug | Jrit | Office held |
| | | | | |
| | Date | Payee name | | |
| | 04/21/2025 | AT&T | | |
| | Amount (\$) | Payee address; City; State; Zip Cod | de | |
| | \$83.37 | P.O. Box 6463 | | |
| | | | | |
| | | Carol Stream, IL 60197 | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) | Description |
| | OF EXPENDITURE | Fees | | Check if travel outside of Texas. Complete Schedule T. |
| | EXI ENDITORE | | | Check if Austin, TX, officeholder living expense |
| | | | | Campaign telecommunications |
| | 0 1: 0 11 1 1 | | | 0.5 |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office soug | gnt | Office held |
| | <u>'</u> | | | |
| | Date | Payee name | | |
| | 05/19/2025 | AT&T | | |
| | Amount (\$) | Payee address; City; State; Zip Cod | de | |
| | \$83.37 | P.O. Box 6463 | | |
| | | | | |
| | | Carol Stream, IL 60197 | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) | Description |
| | OF EXPENDITURE | Fees | | Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITORE | | | Check if Austin, TX, officeholder living expense |
| | | | | Campaign telecommunications |
| | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office soug | ght | Office held |
| | portation to bottom 0/01 | | | |
| | | | | |
| | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense Contributions/ Donations Made By -Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|---|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 3/54 Rpt: 46/101 | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 06/17/2025 | AT&T |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$83.37 | P.O. Box 6463 |
| | | |
| | | Carol Stream, IL 60197 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. |
| | | Campaign telecommunications |
| | | Campaign telecommunications |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| 9 | expenditure to benefit C/O | |
| _ | <u> </u> | |
| | Date | Payee name |
| | 06/24/2025 | Anedot |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$3,685.49 | P.O. Box 84314 |
| | | |
| | | Baton Rouge, LA 70884 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Campaign donation processing fees |
| | | Campaign donation processing rees |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| | Data | |
| | Date | Payee name |
| | 06/25/2025 | Anedot |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$1,082.24 | P.O. Box 84314 |
| | | |
| | | Baton Rouge, LA 70884 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. |
| | EXI ENDITORE | Check if Austin, TX, officeholder living expense |
| | | Campaign donation processing fees |
| | 0 1. 0 | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | p = 1 2 25 3/01 | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|----------|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 4/54 Rpt: 47/101 | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 06/27/2025 | Anedot |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$1,504.48 | P.O. Box 84314 |
| | | |
| | | Baton Rouge, LA 70884 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Campaign donation processing fees |
| | | Campaigh donation processing ices |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| 9 | expenditure to benefit C/O | |
| \vdash | Data | Para a sana |
| | Date | Payee name |
| | 06/29/2025 | Anedot |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$2,433.20 | P.O. Box 84314 |
| | | |
| | | Baton Rouge, LA 70884 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense |
| | | Campaign donation processing fees |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| _ | Data | |
| | Date | Payee name |
| | 03/11/2025 | Anthropologie |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$415.16 | 266 Grand Ave |
| | | #3-D |
| | | Southlake, TX 76092 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Officeholder's staff gifts |
| | | Officeriolder's stair gifts |
| \vdash | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | | nmittee | Legal Services | • | | Vages | s/Contract Labor | | OTHER (enter | a category not listed abov | re) |
|----------|---|----------|--------------------|---------------------|--------------------|--------------|-------|------------------|-------|--------------------|----------------------------|-----------|
| | | | | The Instruction | Guide explai | ns how to co | mple | ete this form. | | | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | | | 3 | Filer ID | (Ethics Commissio | n Filers) |
| | Sch: 5/54 Rpt: 48/101 | | Texans for k | Celly Hancoc | k SPAC | | | | | 00067719 | | |
| 4 | Date | 5 | Payee name | | | | | | | | | |
| | 03/04/2025 | ı | Apple Spice | | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee addres | s; City; | Sta | ate; Zip Co | nde | | | | | |
| ľ | \$671.00 | ı | 859 Iaom Ro | | 3.0 | o,p | , | | | | | |
| | 4011.00 | | 000 10011111 | Jaa | | | | | | | | |
| | | | Can Antinia | TV 70216 | | | | | | | | |
| | | ⊢ | San Antinio, | | | | | | | | | |
| 8 | PURPOSE OF | | | e Categories listed | at the top of this | schedule) | (b) | Description | | | | |
| | EXPENDITURE | | Event Exper | ise | | | | = | | officeholder livir | mplete Schedule T. | |
| | | | | | | | | — | | | vith grassroots | |
| | | | | | | | | constituents | | | g | |
| 9 | Complete ONLY if direct | | Candidate/Offic | eholder name | | Office sou | laht | | | Office h | neld | |
| | expenditure to benefit C/O | | od raidator o me | oriolaer riarrie | | 011100 000 | ·9··· | | | 0111001 | ioid | |
| \vdash | Date | | Dove a second | | | | | | | | | |
| | 03/26/2025 | ı | Payee name | scopiotoc I I I | 5 | | | | | | | |
| | | Ь— | | ssociates LLF | | | | | | | | |
| | Amount (\$) | ı | Payee addres | | Sta | ate; Zip Co | ode | | | | | |
| | \$625.00 | | 1005 La Pos | sada Drive | | | | | | | | |
| | | | | | | | | | | | | |
| | | | Austin, TX 7 | 8752 | | | | | | | | |
| | PURPOSE | (a) | Category (Se | e Categories listed | at the top of this | schedule) | (b) | Description | | | | |
| | OF EXPENDITURE | | Accounting/l | | | | | | | | nplete Schedule T. | |
| | | | | | | | | ш | | officeholder livir | ng expense | |
| | | | | | | | | Campaign ac | COL | unung iees | | |
| | Operation ONLY if allowed | <u> </u> |)!! -! - t - 10 ff | | | 04: | | | | Off I | -1-1 | |
| | Complete ONLY if direct expenditure to benefit C/OI | | andidate/Offic | eholder name | | Office sou | ignt | | | Office h | ieia | |
| | | _ | | | | | | | | | | |
| | Date | ı | Payee name | | | | | | | | | |
| | 01/13/2025 | | Ausitn Prope | er | | | | | | | | |
| | Amount (\$) | | Payee addres | s; City; | Sta | ate; Zip Co | ode | | | | | |
| | \$344.69 | | 600 W 2nd S | Street | | | | | | | | |
| | | | | | | | | | | | | |
| | | | Austin, TX 7 | 8701 | | | | | | | | |
| | PURPOSE | (a) | Category (Se | e Categories listed | at the ton of this | schedule) | (b) | Description | | | | |
| | OF | | | age Expense | | | | | outsi | de of Texas. Cor | mplete Schedule T. | |
| | EXPENDITURE | | | • | | | | | | officeholder livir | | |
| | | | | | | | | Meeting to dis | scu | ss campaiq | gn issues | |
| | | | | | | | | | | | | |
| | Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Office | eholder name | | Office sou | ıght | | | Office h | neld | |
| | experiorale to belief C/Of | 11 | | | | | | | | | | |
| | | | | | | | _ | | _ | | | |
| | | | | | | | | | | | | |

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

| | Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | nmittee | Food/Beverage Expe Gift/Awards/Memoria Legal Services The Instruction (| als Expense | | xpens Vages | se s/Contract Labor | | Travel in District Travel Out of Dis OTHER (enter a | strict category not listed above) |
|---|---|----------|-----------------|--|------------------------|--------------|----------------|------------------------|-------|---|--------------------------------------|
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | | | 3 | Filer ID | (Ethics Commission Filers) |
| | Sch: 6/54 Rpt: 49/101 | | | Kelly Hancock | SPAC | | | | | 00067719 | |
| 4 | Date | 5 | Payee name | | | | | | | | |
| | 04/28/2025 | | Bexar Coun | ty GOP | | | | | | | |
| 6 | Amount (\$) | 7 | Payee addres | ss; City; | State; | Zip Co | ode | | | | |
| | \$750.00 | | 909 NE Loo | p 410W | | | | | | | |
| | | | Suite 801 | | | | | | | | |
| | | | San Antonio | o, TX 78209 | | | | | | | |
| 8 | PURPOSE | (a) | Category (Se | ee Categories listed a | t the top of this sche | edule) | (b) | Description | | | |
| | OF EXPENDITURE | | Contribution | s/Donations N | /lade By | | | = | | | plete Schedule T. |
| | | | Candidate/0 | Officeholder/Po | olitical Comm | ittee | | _ | | officeholder living | |
| | | | | | | | | golf tourname | | ภาสแบท เบ B | exar County GOP annual |
| 9 | Complete ONLY if direct | <u> </u> | `andidato/Offi | ceholder name | | Office sou | laht | | | Office he | ald |
| 9 | expenditure to benefit C/O | | zariuluale/OIII | CETIONET HAITIE | | ,,,,,,ce 200 | agrit | | | Office He | siu . |
| | Date | | Payee name | | | | | | | | |
| | 04/08/2025 | | Bowie Hous | se | | | | | | | |
| | Amount (\$) | | Payee addre | ss; City; | State; | Zip Co | ode | | | | |
| | \$2,875.00 | | 3700 Camp | Bowie | | | | | | | |
| | | | | | | | | | | | |
| | | | Fort Worth, | TX 76107 | | | | | | | |
| | PURPOSE OF | (a) | | ee Categories listed a | t the top of this sche | edule) | (b) | Description | | | |
| | EXPENDITURE | | Event Expe | nse | | | | ш | | | plete Schedule T. |
| | | | | | | | | Campaign ev | | officeholder living | |
| | | | | | | | | Jampaign GV | UIII | Vonde leilt | ··· |
| | Complete ONLY if direct | | Candidate/Offi | ceholder name | C | office sou | ıght | | | Office he | eld |
| | expenditure to benefit C/OI | н | | | | | | | | | |
| | Date | | Payee name | | | | | | | | |
| | 05/21/2025 | | Bowie Hous | se . | | | | | | | |
| | Amount (\$) | | Payee addres | | State; | Zip Co | ode | | _ | | |
| | \$2,875.00 | | 3700 Camp | Bowie | | | | | | | |
| | | | | | | | | | | | |
| L | | L | Fort Worth, | TX 76107 | | | | | | | |
| | PURPOSE OF | (a) | Category (Se | ee Categories listed a | t the top of this sche | edule) | (b) | Description | | | |
| | EXPENDITURE | | Event Expe | nse | | | | ш | | de of Texas. Com officeholder living | plete Schedule T. |
| | | | | | | | | Campaign ev | | | |
| | | | | | | | | Jampaignev | J: 10 | . 701140 10110 | |
| | Complete ONLY if direct | Щ | Candidate/Offi | ceholder name | C | Office sou | l ıght | | | Office he | eld |
| | expenditure to benefit C/O | | | | | | - | | | | |
| | | | | | | | | | | | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 7/54 Rpt: 50/101 | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 06/17/2025 | Bowie House |
| 6 | Amount (\$) \$2,212.23 | 7 Payee address; City; State; Zip Code 3700 Camp Bowie Fort Worth, TX 76107 |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign event venue rental |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | Date | Payee name |
| | 03/24/2025 | Capital Gift Shop |
| | Amount (\$) \$59.54 | Payee address; City; State; Zip Code 1400 Congress Ave E1.006 Austin, TX 78701 |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Officeholder's staff gifts |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | Date | Payee name |
| | 06/25/2025 | Capital Grill |
| | Amount (\$) \$671.80 | Payee address; City; State; Zip Code 117 West 4th Street |
| | | Austin, TX 78701 |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign staff dinner |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

| | Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | |
|---|---|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) | |
| | Sch: 8/54 Rpt: 51/101 | Texans for Kelly Hancock SPAC 00067719 | |
| 4 | Date | 5 Payee name | |
| | 01/06/2025 | Catch Digital Strategy | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | - |
| | \$1,089.52 | 2714 Washington Street | |
| | · | Suite 163 | |
| | | Greenville, TX 75401 | |
| _ | DUDD 0.05 | | _ |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taylor Complete Schedule T | |
| | EXPENDITURE | Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | |
| | | Campaign advertising | |
| | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held | |
| | Date | Payee name | = |
| | 02/06/2025 | Catch Digital Strategy | |
| | Amount (\$) | Payee address; City; State; Zip Code | _ |
| | ` ' | | |
| | \$2,252.36 | 2714 Washington Street | |
| | | Suite 163 | |
| | | Greenville, TX 75401 | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF EXPENDITURE | Advertising Expense Check if travel outside of Texas. Complete Schedule T. | |
| | | Check if Austin, TX, officeholder living expense Campaign advertising | |
| | | Campaign advertising | |
| | Complete ONLY if direct expenditure to benefit C/Oh | Candidate/Officeholder name Office sought Office held | _ |
| | Date | Payee name | _ |
| | 03/06/2025 | Catch Digital Strategy | |
| | Amount (\$) | Payee address; City; State; Zip Code | _ |
| | \$1,212.99 | 2714 Washington Street | |
| | | Suite 163 | |
| | | Greenville, TX 75401 | |
| | PURPOSE | | _ |
| | OF | (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. | |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense | |
| | | Campaign advertising | |
| | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | _ |
| | expenditure to benefit C/OI | 1 | |
| | | | _ |
| | | | |
| | | | |

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|---|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 9/54 Rpt: 52/101 | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 04/03/2025 | Catch Digital Strategy |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$1,212.99 | 2714 Washington Street |
| | | Suite 163 |
| | | Greenville, TX 75401 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Advertising Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Campaign advertising |
| | | Sampaigh davertising |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| | Date | Payee name |
| | 05/01/2025 | Catch Digital Strategy |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$3,513.87 | 2714 Washington Street |
| | | Suite 163 |
| | | Greenville, TX 75401 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Advertising Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Campaign advertising |
| | | Campaigh auvertising |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | Date | Payee name |
| | 06/09/2025 | Catch Digital Strategy |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$2,424.21 | 2714 Washington Street |
| | | Suite 163 |
| | | Greenville, TX 75401 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Advertising Expense |
| | LAFENDITORE | Check if Austin, TX, officeholder living expense |
| | | Campaign advertising |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | | |
| | | |
| 1 | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | Committee Legal Services Salaries/Wages/C The Instruction Guide explains how to complete | |
|---|--|---|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 10/54 Rpt: | Texans for Kelly Hancock SPAC | 00067719 |
| 4 | Date | 5 Payee name | |
| | 02/10/2025 | Central Market | |
| 6 | Amount (\$) \$954.58 | 7 Payee address; City; State; Zip Code 4001 N Lamar Austin, TX 78745 | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) | Description |
| | OF EXPENDITURE | Gift/Awards/Memorials Expense | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Officeholder's staff gifts |
| 9 | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought | Office held |
| | Date | Payee name | |
| | 01/27/2025 | Cityview Florest | |
| | Amount (\$) \$189.44 | Payee address; City; State; Zip Code 6120 Bryant Irving Road | |
| | | Fort Worth, TX 76132 | |
| | PURPOSE OF EXPENDITURE | Gift/Awards/Memorials Expense | Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Flowers for Officeholder's staff member's family |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought | Office held |
| | Date | Payee name | |
| | 04/10/2025 | Clayton Spangler Photographic Design | |
| | Amount (\$) \$429.00 | Payee address; City; State; Zip Code 235 Point Lick Drive | |
| | | Charleston, WV 25306 | |
| | PURPOSE OF EXPENDITURE | Advertising Expense | Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Photo of 2025 Texas Senate for advertising |
| | Complete ONLY if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought | Office held |
| | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wanes/Contract Labor

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|----------|--|--|
| _ | | · · · · · · · · · · · · · · · · · · · |
| 1 | Total pages Schedule F1: | |
| | Sch: 11/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 01/03/2025 | Corporate High Rise Cleaning |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$300.00 | P.O. Box 341091 |
| | φοσο.σσ | 1.0. 50% 041001 |
| | | |
| | | Austin, TX 78734 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Office Overhead/Rental Expense |
| | | X Check if Austin, TX, officeholder living expense |
| | | Cleaning of Officeholders Austin apartment |
| | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | experialitate to beliefit 6/01 | • |
| | Date | Payee name |
| | 02/03/2025 | Corporate High Rise Cleaning |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$300.00 | P.O. Box 341091 |
| | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | | Austin TV 70704 |
| | | Austin, TX 78734 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | X Check if Austin, TX, officeholder living expense Cleaning of Officeholder's Austin apartment |
| | | Glocaling of Cinconstant apartition |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | | |
| | Date | Payee name |
| | 03/03/2025 | Corporate High Rise Cleaning |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$300.00 | P.O. Box 341091 |
| | | |
| | | Austin, TX 78734 |
| \vdash | PURPOSE | I |
| | OF | , |
| | EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Cleaning of Officeholder's Austin apartment |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| - | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|---|--|---|
| Ļ | | · · · · · · · · · · · · · · · · · · · |
| 1 | Total pages Schedule F1: | |
| | Sch: 12/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 04/01/2025 | Corporate High Rise Cleaning |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| ľ | \$450.00 | P.O. Box 341091 |
| | φ-30.00 | 1.0. Box 341031 |
| | | |
| | | Austin, TX 78734 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Office Overhead/Rental Expense |
| | LAI LIIDITORE | X Check if Austin, TX, officeholder living expense |
| | | Cleaning of Officeholder's Austin apartment |
| | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| | Date | Payee name |
| | 05/01/2025 | Corporate High Rise Cleaning |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$300.00 | P.O. Box 341091 |
| | φ300.00 | F.O. BOX 341091 |
| | | |
| | | Austin, TX 78734 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. |
| | LAI LINDITORE | X Check if Austin, TX, officeholder living expense |
| | | Cleaning of Officeholder's Austin apartment |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| | Date | Payee name |
| | 06/01/2025 | Corporate High Rise Cleaning |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | ` , | P.O. Box 341091 |
| | \$350.00 | P.O. BOX 341091 |
| | | |
| | | Austin, TX 78734 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. |
| | LAFENDITORE | X Check if Austin, TX, officeholder living expense |
| | | Cleaning of Officeholder's Austin apartment |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

| | Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|---|---|
| 1 | Total pages Schedule F1: | · · · · · · · · · · · · · · · · · · · |
| | Sch: 13/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 01/21/2025 | Cowtown Republican Womens Club |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$1,000.00 | P.O. Box 470152 |
| | | |
| | | Fort Worth, TX 76147 |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Candidate/Officeholder/Political Committee |
| | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| _ | Date | Payee name |
| | 01/07/2025 | Dropbox Inc |
| _ | Amount (\$) | Payee address; City; State; Zip Code |
| | \$25.56 | 1800 Owens Street |
| | Ψ23.30 | 1000 Gwells Street |
| | | San Francisco, CA 94158 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Campaign data management fee |
| | | Campaign data management lee |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| - | Date | Payee name |
| | 02/07/2025 | Payee name Dropbox Inc |
| | | · |
| | Amount (\$) \$25.56 | Payee address; City; State; Zip Code 1800 Owens Street |
| | Φ25.50 | 1800 Owerts Street |
| | | San Francisco, CA 94158 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. |
| | LAFENDITORE | Check if Austin, TX, officeholder living expense |
| | | Campaign data management fees |
| | 2 2 | |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
pense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

| | Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|----------------------------|---|
| 1 | Total pages Schedule F1: | · · · · · · · · · · · · · · · · · · · |
| | Sch: 14/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 03/07/2025 | Dropbox Inc |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$25.56 | 1800 Owens Street |
| | | |
| | | San Francisco, CA 94158 |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Campaign data management fees |
| | | l a la |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| ⊨ | Date | Payee name |
| | 04/07/2025 | Dropbox Inc |
| | | · |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$25.57 | 1800 Owens Street |
| | | |
| | | San Francisco, CA 94158 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Campaign data management fees |
| | | Campaign data management rees |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| H | Data | |
| | Date 05/12/2025 | Prophey Inc. |
| | | Dropbox Inc |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$25.56 | 1800 Owens Street |
| | | |
| | | San Francisco, CA 94158 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Campaign data management fees |
| | | Campaigh data management lees |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | · · · · · · · · · · · · · · · · · · · |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

1g Expense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

| | Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|---|---|
| 1 | Total pages Schedule F1: | · · · · · · · · · · · · · · · · · · · |
| | Sch: 15/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 06/09/2025 | Dropbox Inc |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$25.56 | 1800 Owens Street |
| | | |
| | | San Francisco, CA 94158 |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Campaign data management fee |
| | | Campagn data management is |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| 9 | expenditure to benefit C/O | |
| _ | Data | |
| | Date | Payee name |
| | 01/31/2025 | Dyer, James (Mr.) |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$1,566.12 | 1212 East Harris |
| | | |
| | | Brownfield , TX 79316 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Salaries/Wages/Contract Labor |
| | | Check if Austin, TX, officeholder living expense |
| | | Campaign staff salary |
| | Commiste ONLY if divest | Condidate/Office holds |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | | |
| | Date | Payee name |
| | 02/28/2025 | Dyer, James (Mr.) |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$1,566.12 | 1212 East Harris |
| | | |
| | | Brownfield , TX 79316 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | | Campaign staff salary |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|----------|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 16/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 03/31/2025 | Dyer, James (Mr.) |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$1,566.12 | 1212 East Harris |
| | | |
| | | Brownfield , TX 79316 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Campaign staff salary |
| | | Campaigh stan salary |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| Г | Date | Payee name |
| | 04/30/2025 | Dyer, James (Mr.) |
| Г | Amount (\$) | Payee address; City; State; Zip Code |
| | \$1,436.13 | 1212 East Harris |
| | | |
| | | Brownfield , TX 79316 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Campaign staff salary |
| | | Campaigh stan cataly |
| H | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| F | Date | Payee name |
| | 05/31/2025 | Dyer, James (Mr.) |
| Н | Amount (\$) | Payee address; City; State; Zip Code |
| | \$1,436.12 | 1212 East Harris |
| | | |
| | | Brownfield , TX 79316 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Campaign staff salary |
| | | Campaigh stail salary |
| \vdash | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | · · · · · · · · · · · · · · · · · · · |
| \vdash | | |
| | | |
| ı | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ense Event Expense Loan Repayment/Reimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

| Credit Card Payment | The Instruction Guide explains how to complete this form. |
|--|--|
| 1 Total pages Schedule F1: | · · · · · · · · · · · · · · · · · · · |
| Sch: 17/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 Date | 5 Payee name |
| 06/30/2025 | Dyer, James (Mr.) |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$1,436.12 | 1212 East Harris |
| | |
| | Brownfield , TX 79316 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor |
| LAFENDITORE | Check if Austin, TX, officeholder living expense |
| | Campaign staff salary |
| | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held H |
| | |
| Date | Payee name |
| 05/31/2025 | FIXE Southern House |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$1,285.93 | 500 West 5th Street |
| | |
| | Austin, TX 78701 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Food/Beverage Expense |
| LAFENDITORE | Check if Austin, TX, officeholder living expense |
| | Dinner with Officeholder's Austin staff |
| Complete ONLY if direct | Condidate/Officeholder name Office county Office hold |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held H |
| - | T |
| Date | Payee name |
| 02/12/2025 | Fort Worth Club |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$433.80 | 306 West 7th Street |
| | |
| | Fort Worth, TX 76102 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Event Expense Check if travel outside of Texas. Complete Schedule T. |
| EXI ENDITORE | Check if Austin, TX, officeholder living expense |
| | Room rental, food and beverage for campaign meeting |
| 0 1: 2:::::::::::::::::::::::::::::::::: | |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held H |
| | |
| | |
| | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
rtising Expense Event Expense Loan Repayment/Reimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Loan Fees Offic Food/Beverage Expense Pollir Gift/Awards/Memorials Expense Print Legal Services Salar

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

| | Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|--|---|
| 1 | Total pages Schedule F1: Sch: 18/54 Rpt: | 2 FILER NAME Texans for Kelly Hancock SPAC 3 Filer ID (Ethics Commission Filers) 00067719 |
| 4 | Date 03/04/2025 | 5 Payee name Fort Worth Club |
| 6 | Amount (\$) \$35.00 | 7 Payee address; City; State; Zip Code 306 West 7th Street |
| Ĺ | 2112202 | Fort Worth, TX 76102 |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign meeting service charge |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| | Date 05/28/2025 | Payee name Frost Bank |
| | Amount (\$) \$4,250.00 | Payee address; City; State; Zip Code 8501 Davis Blvd. North Richland Hills, TX 76182 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Officeholder's staff gifts |
| | Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| | Date 06/24/2025 | Payee name Frost Bank |
| | Amount (\$) \$15.00 | Payee address; City; State; Zip Code 8501 Davis Blvd. |
| | | North Richland Hills, TX 76182 |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign donation wire transfer fee |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | | |

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission | |
|--|---------|
| | Filers) |
| Sch: 19/54 Rpt: Texans for Kelly Hancock SPAC 00067719 | |
| 4 Date 5 Payee name | |
| 06/27/2025 Frost Bank | |
| 6 Amount (\$) 7 Payee address; City; State; Zip Code | |
| \$15.00 8501 Davis Blvd. | |
| | |
| North Richland Hills, TX 76182 | |
| 8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| OF EXPENDITURE Accounting/Banking Check if travel outside of Texas. Complete Schedule T. | |
| Check if Austin, TX, officenoider living expense | |
| Campaign donation wire transfer fee | |
| | |
| 9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH | |
| onpondutar of a soliton of a r | |
| Date Payee name | |
| 06/30/2025 Frost Bank | |
| Amount (\$) Payee address; City; State; Zip Code | |
| \$45.00 8501 Davis Blvd. | |
| | |
| North Richland Hills, TX 76182 | |
| PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| OF EXPENDITURE Fees Check if travel outside of Texas. Complete Schedule T. | |
| Check if Austin, TX, officeholder living expense Campaign donation wire transfer fees | |
| Campaigh donation wire transier ices | |
| Complete ONLY if direct Candidate/Officeholder name Office sought Office held | |
| Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH | |
| | |
| Date Payee name | |
| 02/03/2025 Gardner Pate PLLC | |
| Amount (\$) Payee address; City; State; Zip Code | |
| \$625.00 P.O. Box 729 | |
| | |
| Austin, TX 78767 | |
| PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| OF EXPENDITURE Legal Services Check if travel outside of Texas. Complete Schedule T. | |
| Check if Austin, 1X, officenoider living expense | |
| Campaign legal fees | |
| Complete ONLY if direct Condidate/Officeholder name | |
| Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH | |
| | |
| | |
| | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee 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

| Credit Card Payment | The Instruction Guide explains how to c | omplete this form. | - · · · <u>(</u> - · · · · · | |
|--|--|--------------------|---|----------------------------|
| 1 Total pages Schedule F1: | 2 FILER NAME | | 3 Filer ID | (Ethics Commission Filers) |
| Sch: 20/54 Rpt: | Texans for Kelly Hancock SPAC | | 00067719 | |
| 4 Date | 5 Payee name | | • | |
| 01/03/2025 | H.E.B. Foods | | | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip C | ode | | |
| \$125.49 | 2701 East 7th Street | | | |
| | | | | |
| | Austin, TX 78702 | | | |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| OF | Office Overhead/Rental Expense | | vel outside of Texas. Com | plete Schedule T. |
| EXPENDITURE | , | | stin, TX, officeholder living | |
| | | Supplies fo | r Officeholder's A | ustin Capital office |
| | | | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office so | ught | Office he | eld |
| experialitate to benefit 6/6 | | | | |
| Date | Payee name | | | |
| 01/30/2025 | H.E.B. Foods | | | |
| Amount (\$) | Payee address; City; State; Zip C | ode | | |
| \$173.05 | 2701 East 7th Street | | | |
| | | | | |
| | Austin, TX 78702 | | | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| OF EXPENDITURE | Office Overhead/Rental Expense | . . | vel outside of Texas. Com | |
| | | | stin, TX, officeholder living | |
| | | Supplies to | or Officeriolder's A | ustin Capital office |
| Complete ONLY if direct | Candidate/Officeholder name Office so | laht | Office he | ald. |
| expenditure to benefit C/O | | agrit | Office fie | au |
| Doto | | | | |
| Date 02/14/2025 | Payee name H.E.B. Foods | | | |
| | | | | |
| Amount (\$) | Payee address; City; State; Zip C | ode | | |
| \$95.34 | 2701 East 7th Street | | | |
| | | | | |
| | Austin, TX 78702 | | | |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | |
| EXPENDITURE | Office Overhead/Rental Expense | . | vel outside of Texas. Comp stin, TX, officeholder living | |
| | | | | ustin Capital office |
| | | 22880310 | | |
| Complete ONLY if direct | Candidate/Officeholder name Office so | l ught | Office he | eld |
| expenditure to benefit C/O | | ~9· ·· | Omice ne | ···· |
| | | | | |
| | | | | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

| Credit Card Payment | The Instruction Guide explains how to c | omplete this forr | n. |
|---|--|-------------------|--|
| 1 Total pages Schedule F1: | 2 FILER NAME | | 3 Filer ID (Ethics Commission Fi |
| Sch: 21/54 Rpt: | Texans for Kelly Hancock SPAC | | 00067719 |
| 4 Date | 5 Payee name | | - |
| 03/03/2025 | H.E.B. Foods | | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip C | ode | |
| \$228.13 | 2701 East 7th Street | | |
| | | | |
| | Austin, TX 78702 | | |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) Description | on |
| OF | Office Overhead/Rental Expense | _ | travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | , | 1 — | Austin, TX, officeholder living expense |
| | | Supplies | for Officeholder's Austin Capital office |
| | | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office so | ught | Office held |
| experialitire to belieff C/O | п | | |
| Date | Payee name | | |
| 03/27/2025 | H.E.B. Foods | | |
| Amount (\$) | Payee address; City; State; Zip C | ode | |
| \$244.08 | 2701 East 7th Street | | |
| | | | |
| | Austin, TX 78702 | | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) Description | on |
| OF EXPENDITURE | Office Overhead/Rental Expense | | travel outside of Texas. Complete Schedule T. |
| LAFENDITORE | | . — | Austin, TX, officeholder living expense |
| | | Supplies | for Officeholder's Austin Capital office |
| Complete ONLY if direct | Candidate/Officeholder name Office so | l | Office held |
| expenditure to benefit C/O | | ugni | Office field |
| Dete | T - | | |
| Date | Payee name | | |
| 04/28/2025 | H.E.B. Foods | | |
| Amount (\$) | Payee address; City; State; Zip C | ode | |
| \$252.13 | 2701 East 7th Street | | |
| | | | |
| | Austin, TX 78702 | | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| OF EXPENDITURE | Office Overhead/Rental Expense | , <u>—</u> | travel outside of Texas. Complete Schedule T. |
| | | ı — | Austin, TX, officeholder living expense for Officeholder's Austin Capital office |
| | | Supplies | To Sincerolaci 3 Austin Capital Office |
| Complete ONLY if direct | Candidate/Officeholder name Office so | <u> </u> | Office held |
| expenditure to benefit C/O | | ugiit | Office field |
| | | | |
| | | | |
| | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|---|--|---|
| ┰ | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| ľ | Sch: 22/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 05/15/2025 | H.E.B. Foods |
| 6 | Amount (\$) \$209.04 | 7 Payee address; City; State; Zip Code 2701 East 7th Street |
| L | | Austin, TX 78702 |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies for Officeholder's Austin Capital office |
| 9 | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| Г | Date | Payee name |
| | 06/12/2025 | H.E.B. Foods |
| Г | Amount (\$) | Payee address; City; State; Zip Code |
| | \$101.55 | 2701 East 7th Street |
| | | |
| | | Austin, TX 78702 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| l | | Supplies for Officeholder's Austin Capital office |
| l | | |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| F | Date | Payee name |
| | 01/03/2025 | Hill Country Spring Water |
| | Amount (\$) \$22.99 | Payee address; City; State; Zip Code P.O.Box 2220 |
| | | Manchaca, TX 78652 |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Water for Officeholder's Austin Capital office |
| | Complete ONLY if direct expenditure to benefit C/Oh | Candidate/Officeholder name Office sought Office held |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

| | Credit Card Payment | The Instruction Guide explains how to comp | olete this for | rm. | | | |
|---|-----------------------------|--|----------------|------|--|----------------------------|----|
| 1 | Total pages Schedule F1: | 2 FILER NAME | | 3 F | iler ID | (Ethics Commission Filers) | |
| | Sch: 23/54 Rpt: | Texans for Kelly Hancock SPAC | | | 00067719 | | |
| 4 | Date | 5 Payee name | | · | | | |
| | 02/03/2025 | Hill Country Spring Water | | | | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | ; | | | | |
| | \$84.98 | P.O.Box 2220 | | | | | |
| | | | | | | | |
| | | Manchaca, TX 78652 | | | | | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) |) Descripti | | | | |
| | OF EXPENDITURE | Office Overhead/Rental Expense | | | e of Texas. Com officeholder living | plete Schedule T. | |
| | | | _ | | | er's Austin Capital office | 9 |
| | | | | 11 7 | | • | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought | t | | Office he | eld | _ |
| | expenditure to benefit C/OI | Н | | | | | |
| | Date | Payee name | | | | | _ |
| | 03/03/2025 | Hill Country Spring Water | | | | | |
| | Amount (\$) | Payee address; City; State; Zip Code |) | | | | _ |
| | \$79.99 | P.O.Box 2220 | | | | | |
| | | | | | | | |
| | | Manchaca, TX 78652 | | | | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) |) Descripti | | | | |
| | OF EXPENDITURE | Office Overhead/Rental Expense | | | e of Texas. Com officeholder living | plete Schedule T. | |
| | | | | | | er's Austin Capital office | Э. |
| | | | | , | | · | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought | t | | Office he | eld | _ |
| | expenditure to benefit C/OI | H | | | | | |
| | Date | Payee name | | | | | _ |
| | 04/01/2025 | Hill Country Spring Water | | | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | ; | | | | |
| | \$49.99 | P.O.Box 2220 | | | | | |
| | | | | | | | |
| | | Manchaca, TX 78652 | | | | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) |) Descripti | ion | | | |
| | OF EXPENDITURE | Office Overhead/Rental Expense | | | e of Texas. Com officeholder living | plete Schedule T. | |
| | | | | | | stin Capital office | |
| | | | | | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought | t | | Office he | eld | |
| | expenditure to benefit C/OI | Н | | | | | |
| | | | | | | | _ |
| | | | | | | | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

| Credit Card Payment | The Instruction Guide explains how to o | omplete th | nis form. | |
|---|--|-------------------|--|----------------------------|
| 1 Total pages Schedule F1: | 2 FILER NAME | | 3 Filer ID | (Ethics Commission Filers) |
| Sch: 24/54 Rpt: | Texans for Kelly Hancock SPAC | | 00067719 | |
| 4 Date | 5 Payee name | | <u> </u> | |
| 05/01/2025 | Hill Country Spring Water | | | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip C | Code | | |
| \$49.99 | P.O.Box 2220 | | | |
| | | | | |
| | Manchaca, TX 78652 | | | |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) Des | scription | |
| OF EXPENDITURE | Office Overhead/Rental Expense | | Check if travel outside of Texas. Comp | olete Schedule T. |
| EXPENDITORE | · | | Check if Austin, TX, officeholder living | |
| | | Wa | ater supply for Officeholde | r's Austin Capital office |
| | | 1 | 011 | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office so | ought | Office he | ld |
| · | | | | |
| Date | Payee name | | | |
| 06/01/2025 | Hill Country Spring Water | | | |
| Amount (\$) | Payee address; City; State; Zip C | Code | | |
| \$70.99 | P.O.Box 2220 | | | |
| | | | | |
| | Manchaca, TX 78652 | | | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) Des | scription | |
| OF EXPENDITURE | Office Overhead/Rental Expense | | Check if travel outside of Texas. Comp | |
| | | | Check if Austin, TX, officeholder living ater supply for Officeholde | |
| | | *** | ater supply for Officeriolde | 13 Austin capital office |
| Complete ONLY if direct | Candidate/Officeholder name Office so | <u> </u> ouaht | Office he | ld |
| expenditure to benefit C/OI | | ,agnt | Omoo ne | |
| Date | Davis name | | | |
| 05/27/2025 | Payee name Hobby Lobby | | | |
| Amount (\$) | Payee address; City; State; Zip C | `odo | | |
| \$160.82 | 4040 S. Lamar Blvd. | Joue | | |
| Ψ100.02 | 4040 S. Lamai bivu. | | | |
| | Augtin TV 70704 | | | |
| | Austin, TX 78704 | 1 | | |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) | | scription Check if travel outside of Texas. Comp | oloto Schodulo T |
| EXPENDITURE | Gift/Awards/Memorials Expense | | Check if Austin, TX, officeholder living | |
| | | . — | iceholder staff gifts | |
| | | | | |
| Complete ONLY if direct | Candidate/Officeholder name Office so | ought | Office he | ld |
| expenditure to benefit C/OI | 1 | | | |
| | | | | |
| | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment

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

| | Credit Card Payment | | The Instruction Guide explains how to co | mple | olete this form. |
|---|---|----------------|---|------------------|--|
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 25/54 Rpt: | | Texans for Kelly Hancock SPAC | | 00067719 |
| 4 | Date | 5 | Payee name | | · |
| | 01/14/2025 | | Home Goods | | |
| 6 | Amount (\$) | 7 | Payee address; City; State; Zip Co | ode | |
| | \$199.05 | | 4810 SW Loop 820 | | |
| | | | | | |
| | | | Fort Worth, TX 76109 | | |
| 8 | PURPOSE | (a) | Category (See Categories listed at the top of this schedule) | (b) |) Description |
| | OF EXPENDITURE | | Office Overhead/Rental Expense | | Check if travel outside of Texas. Complete Schedule T. |
| | | | | | Check if Austin, TX, officeholder living expense Supplies for Officeholder's Austin Capital office |
| | | | | | Supplies for Smeetholder 37 tustin Suprial office |
| 9 | Complete ONLY if direct | | Candidate/Officeholder name Office sou | <u>l</u> ıaht | t Office held |
| | expenditure to benefit C/OI | | | | |
| _ | Date | Т | Payee name | | |
| | 01/14/2025 | | IDonatePro | | |
| | Amount (\$) | \vdash | Payee address; City; State; Zip Co | ode | |
| | \$275.00 | | 2033 San Elijo Ave | | |
| | | | Sutie 203 | | |
| | | | Carcliff by the Sea, CA 92007 | | |
| | PURPOSE | (a) | | (b) |) Description |
| | OF | (" | Category (See Categories listed at the top of this schedule) Fees | (2) | Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | | . 666 | | Check if Austin, TX, officeholder living expense |
| | | | | | Campaign data management |
| | | | | <u> </u> | |
| | Complete ONLY if direct expenditure to benefit C/OI | | Candidate/Officeholder name Office sou | ıght | t Office held |
| | | _ | | | |
| | Date | | Payee name | | |
| | 02/14/2025 | | IDonatePro | | |
| | Amount (\$) | | Payee address; City; State; Zip Co | ode | |
| | \$275.00 | | 2033 San Elijo Ave | | |
| | | | Sutie 203 | | |
| | | | Carcliff by the Sea, CA 92007 | | |
| | PURPOSE OF | (a) | Category (See Categories listed at the top of this schedule) | (b) |) Description |
| | EXPENDITURE | | Fees | | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | | | | Campaign data management |
| | | | | | |
| | Complete ONLY if direct | - (| Candidate/Officeholder name Office sou | ıght | t Office held |
| | expenditure to benefit C/OI | | | - | |
| | | | | | |
| | | | | | |
| ı | | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|---|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 26/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 03/16/2025 | IDonatePro |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$275.00 | 2033 San Elijo Ave |
| | | Sutie 203 |
| | | Carcliff by the Sea, CA 92007 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense |
| | | Campaign data management |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| מ | expenditure to benefit C/O | |
| | Date | Payee name |
| | 04/14/2025 | IDonatePro |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$275.00 | 2033 San Elijo Ave |
| | | Sutie 203 |
| | | Carcliff by the Sea, CA 92007 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. |
| | | Campaign data management |
| | | Campaign data management |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | Date | Payee name |
| | 05/14/2025 | IDonatePro |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$275.00 | 2033 San Elijo Ave |
| | | Sutie 203 |
| | | Carcliff by the Sea, CA 92007 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Campaign data management |
| | | |
| H | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| | | |
| | | |
| l | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Cor Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | | mmittee | Legal Services The Instruction Gu | | | ages | /Contract Labor | | OTHER (enter | a category not listed above) | |
|----|--|----------------|-----------------|------------------------------------|-----------------------|----------|------|------------------|-------|--------------------|------------------------------|-----|
| ļ_ | T | _ | | | and explains no | W 10 COI | пріс | te ting form. | _ | E1 15 | (Ethio Occasion Ethi | - > |
| 1 | Total pages Schedule F1: | 2 | | | | | | | 3 | Filer ID | (Ethics Commission Filer | S) |
| | Sch: 27/54 Rpt: | | Texans for k | Kelly Hancock S | SPAC | | | | | 00067719 | | |
| 4 | Date | 5 | Payee name | | | | | | | | | |
| | 06/16/2025 | | IDonatePro | | | | | | | | | |
| Ļ | | - | | City :: | Ctata | 7in Co. | al a | | | | | |
| 6 | Amount (\$) | 7 | Payee address | | State; | Zip Co | ue | | | | | |
| | \$275.00 | | 2033 San E | iijo Ave | | | | | | | | |
| | | | Sutie 203 | | | | | | | | | |
| | | | Carcliff by th | ne Sea, CA 920 | 07 | | | | | | | |
| 8 | PURPOSE | (a) | Category (Se | e Categories listed at t | no ton of this school | ulo) | (b) | Description | | | | |
| | OF | l`´ | Fees | e Calegories listed at t | ie top of this scried | uie) | ` ′ | | outsi | de of Texas. Co | mplete Schedule T. | |
| | EXPENDITURE | | 1 000 | | | | | Check if Austin, | , TX, | officeholder livir | ng expense | |
| | | | | | | | | Campaign da | ıta | manageme | nt | |
| | | | | | | | | | | | | |
| 9 | Complete ONLY if direct | | | ceholder name | Off | ice sou | ght | | | Office h | neld | |
| | expenditure to benefit C/OI | Η | | | | | | | | | | |
| | Date | | Payee name | | | | | | | | | |
| | 04/05/2025 | | JW Marriott | San Antonio | | | | | | | | |
| | Amount (\$) | | Payee addres | ss; City; | State; | Zip Co | de | | | | | |
| | \$430.13 | | 23808 Reso | rt Parkway | | | | | | | | |
| | · | | | , | | | | | | | | |
| | | | Con Antonic | TV 70261 | | | | | | | | |
| | | | San Antonio | 0, 17 78201 | | | | | | | | |
| | PURPOSE OF | (a) | Category (Se | e Categories listed at t | ne top of this schedu | ule) | (b) | Description | | | | |
| | EXPENDITURE | | Travel Out o | of District | | | | = | | | mplete Schedule T. | |
| | | | | | | | | _ | | officeholder livir | attend Night to Honor | Our |
| | | | | | | | | Heroes Prese | | | | Oui |
| | | | | | | | | | | | | |
| | Complete ONLY if direct expenditure to benefit C/O | | Candidate/Offic | ceholder name | Offi | ice sou | ght | | | Office h | neld | |
| | experialitate to bettern over | | | | | | | | | | | |
| | Date | | Payee name | | | | | | | | | |
| | 04/01/2025 | | Jackson, Jo | hn (Mr.) | | | | | | | | |
| | Amount (\$) | \vdash | Payee addres | ss; City; | State; | Zip Co | de | | | | | |
| | \$30,000.00 | | 1237 Gato c | - | Otato, . | p | | | | | | |
| | Ψ30,000.00 | | 1237 0410 0 | ici Soi Ave | | | | | | | | |
| | | | | | | | | | | | | |
| | | | Austin, TX 7 | '8737 | | _ | | | | | | |
| | PURPOSE | (a) | Category (Se | e Categories listed at t | ne top of this schedu | ule) | (b) | Description | | | | |
| | OF EXPENDITURE | | Consulting E | Expense | | | | ш | | | mplete Schedule T. | |
| | EXI ENDITORE | | | | | | | _ | | officeholder livir | | |
| | | | | | | | | Campaign co | nsı | ulting service | ces | |
| | | | | | | | | | | | | |
| | Complete ONLY if direct | | Candidate/Offic | ceholder name | Off | ice sou | ght | | | Office h | neld | |
| | expenditure to benefit C/OI | H | | | | | | | | | | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Cou

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|---|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 28/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 05/01/2025 | Jackson, John (Mr.) |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$7,500.00 | 1237 Gato del Sol Ave |
| | | |
| | | Austin, TX 78737 |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Campaign consulting services |
| | | Campaign concatang correct |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| H | Date | Payee name |
| | 06/01/2025 | Jackson, John (Mr.) |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$7,500.00 | 1237 Gato del Sol Ave |
| | | |
| | | Austin, TX 78737 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Campaign consulting services |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | Date | Payee name |
| | 02/13/2025 | King Florist of Austin |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$189.44 | 1806 W Koening Lane |
| | | |
| | | Austin, TX 78756 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. |
| | - | Check if Austin, TX, officeholder living expense Flowers for Officeholder's staff member |
| | | Flowers for Officeriolical's stati member |
| H | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. | |
|----------|--|---|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) | _ |
| | Sch: 29/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 | |
| 4 | Date | 5 Payee name | |
| | 02/07/2025 | La Griglia | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | _ |
| | \$512.72 | 2817 W Dallas Street | |
| | | | |
| | | Houston, TX 77019 | |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | |
| | | Campaign dinner meeting with grassroots | |
| | | constituents | |
| 9 | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held | |
| | Date | Payee name | _ |
| | 06/23/2025 | Legislative Solutions | |
| | Amount (\$) | Payee address; City; State; Zip Code | _ |
| | \$225.00 | P.O. Box 5643 | |
| | | | |
| | | Austin, TX 78763 | |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | EXPENDITURE | Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | |
| | | Email advertising for fundraising event | |
| | | | |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held | |
| F | Date | Payee name | _ |
| | 05/13/2025 | Lollies Follies Studio | |
| ⊢ | Amount (\$) | Payee address; City; State; Zip Code | _ |
| | \$394.32 | 1309 Broadmoor Ave | |
| | Ψ004.02 | 1000 Brodumour / We | |
| | | Austin, TX 78723 | |
| Ī | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | |
| | | Officeholder staff gifts | |
| I | | Sinceriolaer stain girts | |
| \vdash | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | _ |
| | expenditure to benefit C/O | | |
| | | | |
| | | | |
| | | | |

SCHEDULE F1

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)

| | Credit Card Payment | | The Instruction Guide explains how to o | ompl | ete this form. |
|---|--|-----|--|-----------|--|
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 30/54 Rpt: | | Texans for Kelly Hancock SPAC | | 00067719 |
| 4 | Date | 5 | Payee name | | |
| | 02/04/2025 | | Lonesome Dove | | |
| 6 | Amount (\$) | 7 | Payee address; City; State; Zip C | ode | |
| | \$307.89 | | 123 West 6th Street | | |
| | | | | | |
| | | | Austin, TX 78701 | | |
| 8 | PURPOSE | (a) | Category (See Categories listed at the top of this schedule) | (b) | Description |
| | OF EXPENDITURE | | Food/Beverage Expense | | Check if travel outside of Texas. Complete Schedule T. |
| | EXI ENDITORE | | | | Check if Austin, TX, officeholder living expense Meeting to discuss campaign issues |
| | | | | | Meeting to discuss campaign issues |
| 9 | Complete ONLY if direct | | Candidate/Officeholder name Office so | uaht | Office held |
| Ĭ | expenditure to benefit C/O | | Canadato/Cinceriolael Harie | ,agiit | Office field |
| _ | Date | Т | Payee name | | |
| | 04/14/2025 | | Lowe's | | |
| _ | Amount (\$) | ┝ | Payee address; City; State; Zip C | ode. | |
| | \$207.95 | | 770 Grapevine Highway | Jouc | |
| | Ψ201.30 | | 770 Grapevine riigilway | | |
| | | | North Richland Hills, TX 76180 | | |
| | PURPOSE | (2) | | (h) | - Description |
| | OF | ارم | Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense | (5) | Description Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | | Ont/Awards/Wemonals Expense | | Check if Austin, TX, officeholder living expense |
| | | | | | Officeholder's staff gifts |
| | | | | | |
| | Complete ONLY if direct expenditure to benefit C/O | | Candidate/Officeholder name Office so | ught | Office held |
| | experiantare to benefit 6/61 | | | | |
| | Date | | Payee name | | |
| | 06/23/2025 | | Lowe's | | |
| | Amount (\$) | | Payee address; City; State; Zip C | ode | |
| | \$47.05 | | 770 Grapevine Highway | | |
| | | | | | |
| | | | North Richland Hills, TX 76180 | | |
| | PURPOSE | (a | Category (See Categories listed at the top of this schedule) | (b) | Description |
| | OF EXPENDITURE | | Office Overhead/Rental Expense | | Check if travel outside of Texas. Complete Schedule T. |
| | | | | | Check if Austin, TX, officeholder living expense Campaign supplies |
| | | | | | oampaign supplies |
| _ | Complete ONLY if direct | | Candidate/Officeholder name Office so | l ught | Office held |
| | expenditure to benefit C/O | | - Simon School S | ~gt | 23 |
| | | | | | |
| | | | | | |
| | | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|----------|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 31/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 06/24/2025 | Lowe's |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$216.48 | 770 Grapevine Highway |
| | | |
| | | North Richland Hills, TX 76180 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Supplies for Austin office |
| | | Supplies for Austri office |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| 9 | expenditure to benefit C/OI | - · · · · · · · · · · · · · · · · · · · |
| \vdash | Date | Payee name |
| | 06/25/2025 | Payee name Meat & Bread |
| | | |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$118.23 | 360 Nueches Street |
| | | Unit 20 |
| | | Austin, TX 78701 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Campaign staff luncheon |
| | | Sampaigh stail landleon |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | - · · · · · · · · · · · · · · · · · · · |
| _ | Date | Payee name |
| | 04/21/2025 | Milk & Honey Spa |
| | Amount (\$) | |
| | \$250.00 | Payee address; City; State; Zip Code 100A Guadalupe Street |
| | \$250.00 | 100A Guadalupe Street |
| | | A . (C. TV 70704 |
| | | Austin, TX 78701 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Officeholder's staff gift |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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)

| | Credit Card Payment | The Instruction Guide explains how to complete this | form. |
|---|---|--|---|
| 1 | Total pages Schedule F1: Sch: 32/54 Rpt: | FILER NAME Texans for Kelly Hancock SPAC | 3 Filer ID (Ethics Commission Filers) 00067719 |
| 4 | Date 06/06/2025 | 5 Payee name Pacific Table | • |
| | Amount (\$) \$307.90 | 7 Payee address; City; State; Zip Code 2221 E Soutlake Blvd Suite 360 Southlake, TX 76092 | |
| 8 | PURPOSE OF EXPENDITURE | Che | iption eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense ng to discuss campaign issues |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought | Office held |
| | Date 01/31/2025 | Payee name Paychex Inc. | |
| | Amount (\$) \$326.48 | Payee address; City; State; Zip Code 8605 Freeport Parkway Suite 100 Irving, TX 75063 | |
| | PURPOSE OF EXPENDITURE | Che | iption ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense paign payroll service fee |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought H | Office held |
| | Date 02/28/2025 | Payee name Paychex Inc. | |
| | Amount (\$) \$164.44 | Payee address; City; State; Zip Code 8605 Freeport Parkway Suite 100 Irving, TX 75063 | |
| | PURPOSE OF EXPENDITURE | Che | iption ack if travel outside of Texas. Complete Schedule T. ack if Austin, TX, officeholder living expense paign payroll service |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought H | Office held |
| | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

| Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment | |
|---|---|
| 1 Total pages Schedule F1: Sch: 33/54 Rpt: | 2 FILER NAME Texans for Kelly Hancock SPAC 3 Filer ID (Ethics Commission Filers) 00067719 |
| 4 Date 03/31/2025 | 5 Payee name Paychex Inc. |
| 6 Amount (\$) \$164.44 | 7 Payee address; City; State; Zip Code 8605 Freeport Parkway Suite 100 Irving, TX 75063 |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign payroll service fee |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held H |
| Date 04/30/2025 | Payee name Paychex Inc. |
| Amount (\$) \$183.63 | Payee address; City; State; Zip Code 8605 Freeport Parkway Suite 100 Irving, TX 75063 |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign payroll service fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held H |
| Date 05/31/2025 | Payee name Paychex Inc. |
| Amount (\$) \$177.99 | Payee address; City; State; Zip Code 8605 Freeport Parkway Suite 100 Irving, TX 75063 |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign payroll service fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|---|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 34/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 06/25/2025 | Paychex Inc. |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$177.99 | 8605 Freeport Parkway |
| | | Suite 100 |
| | | Irving, TX 75063 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. |
| | | Campaign payroll service fee |
| | | Campaign payron service ice |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | - |
| | Date | Payee name |
| | 01/16/2025 | Pecan Square Cafe |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$377.85 | 1200 W 6th Street |
| | | Suite B |
| | | Austin, TX 78703 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Meeting to discuss campaign issues |
| | | Meeting to discuss earnpaight issues |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| | Date | Payee name |
| | 05/01/2025 | Prospect Strategic Communications |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$25,761.52 | 531 Main Street |
| | | Suite 330 |
| | | El Segundo, CA 90245 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Consulting Expense Check if travel outside of Texas. Complete Schedule T. |
| | - | Campaign services |
| | | Campaign services |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | | |
| | | |
| ı | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|---|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 35/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 01/13/2025 | Randall's |
| 6 | Amount (\$) \$110.04 | 7 Payee address; City; State; Zip Code 2025 W. Ben White Blvd. |
| _ | DUDDOCE | Austin, TX 78704 |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies for Officeholder's Austin Capital office |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | Date | Payee name |
| | 01/15/2025 | Randall's |
| | Amount (\$) \$83.88 | Payee address; City; State; Zip Code 2025 W. Ben White Blvd. |
| | | Austin, TX 78704 |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies for Officeholder's Austin Capital office |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | Date | Payee name |
| | 01/06/2025 | Reach Strategies LLC |
| | Amount (\$) \$6,000.00 | Payee address; City; State; Zip Code P.O. Box 91282 |
| | | Austin, TX 78709 |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign communications consulting services |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | Committee Legal Services Salaries/Wages/Contract Lat | , |
|---|---|--|--|
| | , | The Instruction Guide explains how to complete this for | n. |
| 1 | Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 36/54 Rpt: | Texans for Kelly Hancock SPAC | 00067719 |
| 4 | Date | 5 Payee name | |
| | 03/24/2025 | Reach Strategies LLC | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | |
| | \$6,000.00 | P.O. Box 91282 | |
| | | | |
| | | Austin, TX 78709 | |
| 8 | PURPOSE | | on. |
| ľ | OF | c , (con amagenee mane up or anno assertation) | travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Consuming Expense | Austin, TX, officeholder living expense |
| | | Campai | gn communications consulting services |
| | | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| | expenditure to benefit C/OF | | |
| | Date | Payee name | |
| | 02/21/2025 | Southwestern Exposition & Livestock | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$3,000.00 | P.O. Box 150 | |
| | Ψ3,000.00 | 1.0. Box 150 | |
| | | F. () W. (b. TV 70404 | |
| | | Fort Worth, TX 76101 | |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | EXPENDITURE | Contributions/Donations wade by | travel outside of Texas. Complete Schedule T. |
| | | Carrandato/ Cintolicati/i Cintolicati Committee | Austin, TX, officeholder living expense Ider's contribution for the 2025 Tarrant |
| | | | Junior Livestock Show exhibitor parking |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| | expenditure to benefit C/O | | Office field |
| | | | |
| | Date | Payee name | |
| | 01/27/2025 | State Farm Insurance | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$9.58 | 2977 Precinct Line Road | |
| | | | |
| | | Hurst, TX 76053 | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | on |
| | OF EXPENDITURE | Office Overhead/Rental Expense | travel outside of Texas. Complete Schedule T. |
| | LAFENDITORE | | Austin, TX, officeholder living expense |
| | | Insuranc | e for Officeholder's Austin apartment |
| | | | |
| | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| | experience to benefit C/Or | | |
| | | | |
| | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|---|--|--|
| Ļ | | <u>_</u> |
| 1 | Total pages Schedule F1: | |
| | Sch: 37/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 02/24/2025 | State Farm Insurance |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| ľ | \$9.58 | 2977 Precinct Line Road |
| | φ9.50 | 2911 Flechic Line Rodu |
| | | |
| | | Hurst, TX 76053 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF | Office Overhead/Rental Expense |
| | EXPENDITURE | X Check if Austin, TX, officeholder living expense |
| | | Insurance for Officeholder's Austin apartment |
| | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| H | Date | Payee name |
| | 03/26/2025 | State Farm Insurance |
| | | |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$9.58 | 2977 Precinct Line Road |
| | | |
| | | Hurst, TX 76053 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Office Overhead/Rental Expense |
| | EXPENDITORE | X Check if Austin, TX, officeholder living expense |
| | | Insurance for Officeholder's Austin apartment |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| | Date | Payee name |
| | 04/28/2025 | State Farm Insurance |
| _ | Amount (\$) | Payee address; City; State; Zip Code |
| | ` ' | |
| | \$9.58 | 2977 Precinct Line Road |
| | | |
| | | Hurst, TX 76053 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Office Overhead/Rental Expense |
| | LAFENDITORE | X Check if Austin, TX, officeholder living expense |
| | | Insurance for Officeholder's Austin apartment |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | |
|-----|--|---|---|
| _ | Total manage Calcadula F1. | · · · · · · · · · · · · · · · · · · · | _ |
| 1 | Total pages Schedule F1: Sch: 38/54 Rpt: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Texans for Kelly Hancock SPAC 00067719 | |
| ļ., | · | i I | _ |
| 4 | Date | 5 Payee name | |
| | 05/28/2025 | State Farm Insurance | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | |
| | \$9.58 | 2977 Precinct Line Road | |
| | | | |
| | | Huret TV 760E2 | |
| | | Hurst, TX 76053 | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF EXPENDITURE | Office Overhead/Rental Expense | |
| | | X Check if Austin, TX, officeholder living expense | |
| | | Insurance for Officeholder's Austin apartment | |
| | | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | |
| | expenditure to benefit C/OI | H . | |
| | Date | Payee name | = |
| | 06/25/2025 | State Farm Insurance | |
| | | | _ |
| | Amount (\$) | | |
| | \$9.58 | 2977 Precinct Line Road | |
| | | | |
| | | Hurst, TX 76053 | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF | Office Overhead/Rental Expense | |
| | EXPENDITURE | X Check if Austin, TX, officeholder living expense | |
| | | Insurance for Officeholder's Austin apartment | |
| | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | |
| | expenditure to benefit C/OI | H | |
| H | Date | Payee name | = |
| | 06/17/2025 | Swedish Hill Bakery | |
| | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$371.20 | 1128 W 6th Street | |
| | | | |
| | | Austin, TX 78703 | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | _ |
| | OF | Food/Beverage Expense | |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense | |
| | | Meeting to discuss campaign issues | |
| | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | _ |
| | expenditure to benefit C/OI | | |
| _ | | | _ |
| | | | |
| | | | |

SCHEDULE F1

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)

| Tarry House 6 Amount (\$) \$2,368.07 7 Payee address; City; State; Zip Code \$2,368.07 3006 Bowman Ave Austin, TX 78703 8 PURPOSE OF (a) Category (See Categories listed at the top of this schedule) Event Expense | Filers) |
|--|---------|
| 4 Date 03/05/2025 5 Payee name Tarry House 6 Amount (\$) \$2,368.07 7 Payee address; City; State; Zip Code 3006 Bowman Ave Austin, TX 78703 8 PURPOSE OF (a) Category (See Categories listed at the top of this schedule) Event Expense | |
| Tarry House 6 Amount (\$) \$2,368.07 7 Payee address; City; State; Zip Code \$2,368.07 Austin, TX 78703 8 PURPOSE OF (a) Category (See Categories listed at the top of this schedule) Fivent Expense | |
| Tarry House 6 Amount (\$) \$2,368.07 7 Payee address; City; State; Zip Code \$2,368.07 Austin, TX 78703 8 PURPOSE OF (a) Category (See Categories listed at the top of this schedule) Fivent Expense | |
| \$2,368.07 3006 Bowman Ave Austin, TX 78703 8 PURPOSE OF (See Categories listed at the top of this schedule) (b) Description Fivent Expense | |
| Austin, TX 78703 8 PURPOSE (a) Category (See Categories listed at the top of this schedule) Fivent Expense (b) Description Check if travel outside of Texas. Complete Schedule T. | |
| 8 PURPOSE OF (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. | |
| 8 PURPOSE OF (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. | |
| OF Figure 5 (See Categories instead at the top of this scriedule) Check if travel outside of Texas. Complete Schedule T. | |
| OF Event Expense Check if travel outside of Texas. Complete Schedule T. | |
| EXPENDITURE Liverit Expense Head of the first term Head of the fi | |
| Check if Austin, 1X, officeholder living expense | |
| Campaign event with grassroots constituents | |
| O Complete ONLY if direct Condidate/Officeholder name Office cought Office hold | |
| 9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH | |
| · | |
| Date Payee name | |
| 01/27/2025 Texas Conservative Coalition Research Insitute | |
| Amount (\$) Payee address; City; State; Zip Code | |
| \$2,000.00 P.O. Box 2659 | |
| | |
| Austin, TX 78768 | |
| PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| OF EXPENDITURE Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | |
| Officeholder's annual membership dues | |
| Constitution of samual monasticing also | |
| Complete ONLY if direct Candidate/Officeholder name Office sought Office held | |
| expenditure to benefit C/OH | |
| Date Payee name | |
| 03/01/2025 Texas Federation of Republican Women | |
| | |
| | |
| Amount (\$) Payee address; City; State; Zip Code | |
| Amount (\$) Payee address; City; State; Zip Code \$5,000.00 13740 N Hwy 183 | |
| Amount (\$) Payee address; City; State; Zip Code \$5,000.00 13740 N Hwy 183 Suite J4 | |
| Amount (\$) Payee address; City; State; Zip Code \$5,000.00 13740 N Hwy 183 Suite J4 Austin, TX 78750 | |
| Amount (\$) Payee address; City; State; Zip Code \$5,000.00 13740 N Hwy 183 Suite J4 Austin, TX 78750 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| Amount (\$) Payee address; City; State; Zip Code 13740 N Hwy 183 Suite J4 Austin, TX 78750 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| Amount (\$) Payee address; City; State; Zip Code \$5,000.00 13740 N Hwy 183 Suite J4 Austin, TX 78750 PURPOSE OF CONTRIBUTINE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T. | event |
| Amount (\$) Payee address; City; State; Zip Code 13740 N Hwy 183 Suite J4 Austin, TX 78750 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | event |
| Amount (\$) Payee address; City; State; Zip Code \$5,000.00 13740 N Hwy 183 Suite J4 Austin, TX 78750 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Complete ONLY if direct Candidate/Officeholder name Complete ONLY if direct Candidate/Officeholder name City; State; Zip Code (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Officeholder's sponsorship of Legislative Day | event |
| Amount (\$) Payee address; City; State; Zip Code \$5,000.00 13740 N Hwy 183 Suite J4 Austin, TX 78750 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Officeholder's sponsorship of Legislative Day | event |
| Amount (\$) Payee address; City; State; Zip Code \$5,000.00 13740 N Hwy 183 Suite J4 Austin, TX 78750 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Complete ONLY if direct Candidate/Officeholder name Office sought Office held | event |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|---|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| • | Sch: 40/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 05/30/2025 | Texas Federation of Republican Women |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$18,000.00 | 13740 N Hwy 183 |
| | | Suite J4 |
| | | Austin, TX 78750 |
| _ | DUDDOOF | |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Candidate/Officeholder/Political Committee |
| | | Campaigh sponsorship of 11 TOW annual convention |
| | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | Date | Payee name |
| | 01/17/2025 | Texas Senate SPAW |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$1,100.00 | 1100 Congress Ave |
| | Ψ1,100.00 | 1100 Colligiess Ave |
| | | |
| | | Ausitn, TX 78701 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF | Fees Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | | Officeholder's Senate lounge fee |
| | | |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| H | Date | Payoo namo |
| | | Payee name Texas Senate SPAW |
| | 04/30/2025 | |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$165.00 | 1100 Congress Ave |
| | | |
| | | Ausitn, TX 78701 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Gift/Awards/Memorials Expense |
| | ZA ZHOHOKZ | Check if Austin, TX, officeholder living expense |
| | | Officeholder's share for the Lt. Governors gift from the Texas Senate |
| | | uic Texas Schale |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onto a category not listed above)

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | |
|----------|--|---|--|
| 1 | Total pages Schedule F1: | | |
| | Sch: 41/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 | |
| 4 | Date | 5 Payee name | |
| ľ | 05/21/2025 | Texas Senate SPAW | |
| | | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | |
| | \$361.25 | 1100 Congress Ave | |
| | | | |
| | | Ausitn, TX 78701 | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. | |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense | |
| | | End of session gifts for Senate staff | |
| | | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | |
| | expenditure to benefit C/O | | |
| \vdash | Date | Davisa nama | |
| | | Payee name Toyon Sonato SDAW | |
| | 04/30/2025 | Texas Senate SPAW | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$165.00 | 1100 Congress Ave | |
| | | | |
| | | Ausitn, TX 78701 | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. | |
| | LAFLINDITURE | Check if Austin, TX, officeholder living expense | |
| | | Officeholder's Senate lounge fee | |
| L | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | |
| | expenditure to benefit C/O | 1 | |
| | Date | Payee name | |
| | 01/27/2025 | Texas Senate | |
| \vdash | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$40.00 | Capitol Station | |
| | φ40.00 | σαριτοί στατίστι | |
| | | | |
| | | Austin, TX 78711 | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF EXPENDITURE | Advertising Expense Check if travel outside of Texas. Complete Schedule T. | |
| | | Check if Austin, TX, officeholder living expense | |
| | | Photos for campaign advertising | |
| | | | |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held | |
| | oxponuncio to pononi Orom | | |
| | | | |
| | | | |
| | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee | Legal Services | Salaries/V | | Contract Labor OTHER (enter a category not listed above) | | | | |
|---|--|----------------------|---|-------------|----------|--|----------|---|-------------------|-------------|
| | Credit Card Payment | | The Instruction Guide explain | s how to co | mple | ete this form. | | | | |
| 1 | Total pages Schedule F1: | 2 FILER NAMI | ≣ | | | | 3 | Filer ID | (Ethics Commiss | ion Filers) |
| | Sch: 42/54 Rpt: | Texans for | Kelly Hancock SPAC | | | | | 00067719 | | |
| 4 | Date | 5 Payee name | | | | | | | | |
| | 02/11/2025 | Texas You | ng Republican Foundation | | | | | | | |
| 6 | Amount (\$) | 7 Payee addre | ss; City; Stat | e; Zip Co | de | | | | | |
| | \$2,500.00 | 2604 Brigh | Rock Lane | | | | | | | |
| | | | | | | | | | | |
| | | Conroe, TX | 77304 | | | | | | | |
| 8 | PURPOSE | (a) Category (s | ee Categories listed at the top of this so | rhedule) | (b) | Description | | | | |
| | OF EXPENDITURE | | ns/Donations Made By | oricuaic) | | _ : | outsi | ide of Texas. Comp | plete Schedule T. | |
| | EXPENDITURE | Candidate/ | Officeholder/Political Com | mittee | | _ | | , officeholder living | | |
| | | | | | | Officeholder's Republican's | | | f Texas Young | ļ |
| _ | | | | | <u> </u> | rtopublicario | <u> </u> | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | | iceholder name | Office sou | ght | | | Office he | eld | |
| | <u>'</u> | | | | | | | | | |
| | Date | Payee name | | | | | | | | |
| | 01/03/2025 | The Bowie | | | | | | | | |
| | Amount (\$) | Payee addre | , | e; Zip Co | ode | | | | | |
| | \$5,011.03 | 311 Bowie | Street | | | | | | | |
| | | | | | | | | | | |
| | | Austin, TX | 78703 | | | | | | | |
| | PURPOSE | (a) Category (S | ee Categories listed at the top of this so | chedule) | (b) | Description | | | | |
| | OF EXPENDITURE | Office Over | head/Rental Expense | | | — | | ide of Texas. Comp , officeholder living | | |
| | | | | | | Rent for Offic | | | | |
| | | | | | | | | | | |
| | Complete ONLY if direct | Candidate/Off | iceholder name | Office sou | l aht | | | Office he | eld | |
| | expenditure to benefit C/OI | | | | 5 | | | | | |
| | Date | Payee name | | | | | | | | |
| | 02/02/2025 | The Bowie | | | | | | | | |
| | Amount (\$) | Payee addre | ss; City; Stat | e; Zip Co | nde | | | | | |
| | \$5,241.91 | 311 Bowie | , | o, 2.p oc | , a c | | | | | |
| | , -, - | | | | | | | | | |
| | | Austin, TX | 78703 | | | | | | | |
| | PURPOSE | | | | (h) | Description | | | | |
| | OF | | ee Categories listed at the top of this so head/Rental Expense | chedule) | (6) | Description Check if travel | outsi | ide of Texas. Com | olete Schedule T. | |
| | EXPENDITURE | Office Over | nead/Nental Expense | | | | | , officeholder living | | |
| | | | | | | Rent for Offic | eh | older's Austii | n apartment | |
| | | | | | | | | | | |
| | Complete ONLY if direct | | iceholder name | Office sou | ght | | | Office he | eld | |
| | expenditure to benefit C/OI | ¬ | | | | | | | | |
| | | | | | | | | | | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | | Legal Services | Salaries/ | Wages | s/Contract Labor | | OTHER (enter a | strict category not listed abov | re) |
|----------|--|----------------|---|---------------------------|-------|------------------|-------|---|------------------------------------|-----------|
| | · | | | uide explains how to c | omple | ete this form. | | | | |
| 1 | Total pages Schedule F1: | 2 FILER | NAME | | | | 3 | Filer ID | (Ethics Commissio | n Filers) |
| | Sch: 43/54 Rpt: | Texan | ns for Kelly Hancock S | SPAC | | | | 00067719 | | |
| 4 | Date | 5 Payee | name | | | | | | | |
| | 03/04/2025 | The B | owie | | | | | | | |
| 6 | Amount (\$) | 7 Payee | address; City; | State; Zip C | ode | | | | | |
| | \$5,040.96 | 311 B | owie Street | | | | | | | |
| | · | | | | | | | | | |
| | | A | TV 70700 | | | | | | | |
| | | | ı, TX 78703 | | | | | | | |
| 8 | PURPOSE OF | (a) Catego | Ory (See Categories listed at t | the top of this schedule) | (b) | Description | | | | |
| | EXPENDITURE | Office | Overhead/Rental Ex | pense | | _ | | | plete Schedule T. | |
| | | | | | | _ | | officeholder living | | |
| | | | | | | Rent for Offic | en | Jiuei S Ausi | п араппен | |
| | | | | | | | | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OH | | ate/Officeholder name | Office so | ught | | | Office h | eld | |
| | experiulture to benefit C/Oi | 1 | | | | | | | | |
| | Date | Payee | name | | | | | | | |
| | 04/01/2025 | The B | owie | | | | | | | |
| | Amount (\$) | Payee | address; City; | State; Zip C | ode | | | | | |
| | \$5,064.26 | 311 B | owie Street | | | | | | | |
| | | | | | | | | | | |
| | | Auctin | ı, TX 78703 | | | | | | | |
| | | | | | T | | | | | |
| | PURPOSE OF | | Ory (See Categories listed at t | | (b) | Description | | | | |
| | EXPENDITURE | Office | Overhead/Rental Ex | pense | | = | | de of Texas. Com officeholder living | plete Schedule T. | |
| | | | | | | Rent for Offic | | | | |
| | | | | | | rentior one | CIII | Jidei 3 Aust | параппеп | |
| _ | Commission ONII V if alice at | Condido | to Office belgler records | Office | | | | Office le | -1 <i>a</i> l | |
| | Complete ONLY if direct expenditure to benefit C/O | | ate/Officeholder name | Office so | ugnı | | | Office h | eia | |
| | <u>'</u> | | | | | | | | | |
| | Date | Payee | name | | | | | | | |
| | 05/04/2025 | The B | owie | | | | | | | |
| | Amount (\$) | Payee | address; City; | State; Zip C | ode | | | | | |
| | \$5,060.09 | 311 B | owie Street | | | | | | | |
| | | | | | | | | | | |
| | | l Austin | n, TX 78703 | | | | | | | |
| | PURPOSE | | | | (h) | Description | | | | |
| | OF | | Ory (See Categories listed at to Overhead/Rental Ex | | (5) | | outsi | de of Texas. Com | plete Schedule T. | |
| | EXPENDITURE | Office | Overneau/Nentai Lx | perise | | ш | | officeholder living | • | |
| | | | | | | Rent for Offic | | | | |
| | | | | | | | | | | |
| \vdash | Complete ONLY if direct | Candida | ate/Officeholder name | Office so | ught | | | Office h | eld | |
| | expenditure to benefit C/O | | | 233 00 | - g | | | 200 11 | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|-----|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| 1 | Sch: 44/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| ļ., | · | <u> </u> |
| 4 | Date | 5 Payee name |
| | 06/03/2025 | The Bowie |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$5,070.71 | 311 Bowie Street |
| | , | |
| | | |
| | | Austin, TX 78703 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF | Office Overhead/Rental Expense |
| | EXPENDITURE | X Check if Austin, TX, officeholder living expense |
| | | Rent for Officeholder's Austin apartment |
| | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| ⊨ | Data | Para series |
| | Date | Payee name |
| | 01/03/2025 | The Grammer Group |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$9,914.66 | P.O. Box 161152 |
| | | |
| | | Austin TV 70716 |
| | | Austin, TX 78716 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Consulting Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense |
| | | Campaign Consulting services |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| F | Date | Payee name |
| | 02/01/2025 | The Grammer Group |
| _ | | · |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$5,000.00 | P.O. Box 161152 |
| | | |
| | | Austin, TX 78716 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF | Consulting Expense Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Consulting Expense Check if Austin, TX, officeholder living expense |
| | | Campaign consulting services |
| | | |
| H | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | Complete ONLY if direct expenditure to benefit C/OI | |
| | | |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee 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

rsement Solicitation/Fundraising Expense
Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
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 3 Filer ID (Ethics Commission Filers) |
| | Sch: 45/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 03/01/2025 | The Grammer Group |
| 6 | Amount (\$) \$5,224.36 | 7 Payee address; City; State; Zip Code P.O. Box 161152 Austin, TX 78716 |
| 8 | PURPOSE | |
| 0 | OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign consulting services |
| 9 | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | Date | Payee name |
| | 04/01/2025 | The Grammer Group |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$5,000.00 | P.O. Box 161152 |
| | | Austin, TX 78716 |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign consulting services |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/Oh | Candidate/Officeholder name Office sought Office held |
| | Date | Payee name |
| | 01/03/2025 | The Herries Group LLC |
| | Amount (\$) \$9,883.48 | Payee address; City; State; Zip Code 3 Cottondale Road |
| | | The Hills, TX 78738 |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Consulting Services |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|---|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 46/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 02/01/2025 | The Herries Group LLC |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$5,000.00 | 3 Cottondale Road |
| | | |
| | | The Hills, TX 78738 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Consulting Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Campaign consulting services |
| | | Campaign consulting services |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| • | expenditure to benefit C/Ol | |
| | Date | Payee name |
| | 03/01/2025 | The Herries Group LLC |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$5,000.00 | 3 Cottondale Road |
| | | |
| | | The Hills, TX 78738 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Consulting Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Campaign consulting services |
| | | Campaign consulting services |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/Ol | |
| | Date | Payee name |
| | 04/01/2025 | The Herries Group LLC |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$5,000.00 | 3 Cottondale Road |
| | | |
| | | The Hills, TX 78738 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Consulting Expense Check if travel outside of Texas. Complete Schedule T. |
| | LAFENDITORE | Check if Austin, TX, officeholder living expense |
| | | Campaign consulting services |
| | Operation ONE VIII II | Open districts (Office health as a second se |
| | Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|---|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 47/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 05/01/2025 | The Herries Group LLC |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$7,500.00 | 3 Cottondale Road |
| | | |
| | | The Hills, TX 78738 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Consulting Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Campaign consulting services |
| | | Campaigh consulting services |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| 9 | expenditure to benefit C/O | |
| _ | _ | |
| | Date | Payee name |
| | 06/01/2025 | The Herries Group LLC |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$7,500.00 | 3 Cottondale Road |
| | | |
| | | The Hills, TX 78738 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Consulting Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Campaign consulting services |
| | | Campaign consulting services |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | - · · · · · · · · · · · · · · · · · · · |
| | Data | David and the second se |
| | Date 02/07/2025 | Payee name Thomas Graphics Inc. |
| | | Thomas Graphics, Inc |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$6,710.04 | P.O. Box 14226 |
| | | |
| | | Austin, TX 78714 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Advertising Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense |
| | | Printing and mailing of campaign materials |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| _ | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

/Reimbursement Solicitation/Fundraising Expense
Rental Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|---|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 48/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 03/20/2025 | Thomas Graphics, Inc |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$376.73 | P.O. Box 14226 |
| | | |
| | | Austin, TX 78714 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Advertising Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Campaign printing and mailing of advertising |
| | | Campaign printing and maining of advertising |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| | Date | Payee name |
| | 04/28/2025 | Tom Thumb |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$205.40 | 612 Grapevine Hwy |
| | Ψ200.10 | old Grapovino riny |
| | | Hurst, TX 76054 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Officeholder's staff gifts |
| | | Cincertolder e etail gine |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | - · · · · · · · · · · · · · · · · · · · |
| _ | Date | Payee name |
| | 03/01/2025 | United States Postal Service/NRH |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$234.00 | 6051 Davis Blvd |
| | Ψ234.00 | 0001 Davis Bivu |
| | | North Richand Hills, TX 76180 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. |
| | EXI ENDITORE | Check if Austin, TX, officeholder living expense |
| | | Campaign post office box annual rental fee |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | Complete ONLY if direct expenditure to benefit C/OH | |
| | | |
| | | |
| | | |

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|---|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 49/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 06/17/2025 | United States Postal Service/NRH |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$43.80 | 6051 Davis Blvd |
| | | |
| | | North Richand Hills, TX 76180 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Campaign office supplies |
| | | Campaign office Supplies |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| , | expenditure to benefit C/O | |
| | Date | |
| | 01/31/2025 | Payee name |
| | | United States Treasury |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$332.64 | P.O. Box 1214 |
| | | |
| | | Charlotte, NC 28201 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Salaries/Wages/Contract Labor |
| | | Campaign staff payroll taxes |
| | | Campaight stall payfoll taxes |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| | Data | Programme |
| | Date 02/28/2025 | Payee name |
| | | United States Treasury |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$332.63 | P.O. Box 1214 |
| | | |
| | | Charlotte, NC 28201 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Salaries/Wages/Contract Labor |
| | | Campaign staff payroll taxes |
| | | Sampaigh stan payron taxes |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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)

| | Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|---|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 50/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 03/31/2025 | United States Treasury |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$332.64 | P.O. Box 1214 |
| | | |
| | | Charlotte, NC 28201 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Salaries/Wages/Contract Labor |
| | | Check if Austin, TX, officeholder living expense Campaign staff payroll taxes |
| | | Campaign stail payroll taxes |
| _ | Complete ONL V if direct | Candidate/Officeholder name Office sought Office held |
| 9 | Complete ONLY if direct expenditure to benefit C/Oł | |
| | | |
| | Date | Payee name |
| | 04/01/2025 | United States Treasury |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$44,383.00 | P.O. Box 1214 |
| | | |
| | | Charlotte, NC 28201 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Federal Income Tax Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense SPAC's payment of 2024 Federal income tax to the |
| | | IRS |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| _ | D-4- | |
| | Date | Payee name |
| | 04/30/2025 | United States Treasury |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$462.63 | P.O. Box 1214 |
| | | |
| | | Charlotte, NC 28201 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Campaign staff payroll taxes |
| | | Campaign stail payroll taxes |
| | Complete ONL V if direct | Candidate/Officeholder name Office sought Office held |
| | Complete ONLY if direct expenditure to benefit C/O | |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political C

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Candidate/Officeholder/Politica Credit Card Payment | al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|----------|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 51/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 05/31/2025 | United States Treasury |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$452.14 | P.O. Box 1214 |
| | | |
| | | Charlotte, NC 28201 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Salaries/Wages/Contract Labor |
| | | Check if Austin, TX, officeholder living expense Campaign staff payroll taxes |
| | | Campaign stan payron taxes |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| ľ | expenditure to benefit C/OI | the state of the s |
| F | Date | Payee name |
| | 06/30/2025 | United States Treasury |
| H | Amount (\$) | Payee address; City; State; Zip Code |
| | \$448.38 | P.O. Box 1214 |
| | | |
| | | Charlotte, NC 28201 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Salaries/Wages/Contract Labor |
| | | Check if Austin, TX, officeholder living expense Campaign staff payroll taxes |
| | | Campaign stan payron taxes |
| ⊢ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| F | Date | Payee name |
| | 06/17/2025 | Wal-Mart Val-Mart |
| Н | Amount (\$) | Payee address; City; State; Zip Code |
| | \$18.09 | 6401 NE Loop 820 |
| | | |
| | | North Richland Hills, TX 76180 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense |
| | | Campaign office supplies |
| \vdash | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| 1 | expenditure to benefit C/OI | · · · · · · · · · · · · · · · · · · · |
| \vdash | | |
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| ı | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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)

| | Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|---|---|
| 1 | Total pages Schedule F1: Sch: 52/54 Rpt: | 2 FILER NAME Texans for Kelly Hancock SPAC 3 Filer ID (Ethics Commission Filers) 00067719 |
| 4 | Date 04/19/2025 | 5 Payee name Warwick Melrose Hotel |
| 6 | Amount (\$) \$2,000.00 | 7 Payee address; City; State; Zip Code 3015 Oak Lawn Ave |
| 8 | PURPOSE OF EXPENDITURE | Dallas, TX 75219 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Deposit for future Campaign fundraising event |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | Date 05/01/2025 | Payee name Whole Foods Market |
| | Amount (\$) \$213.90 | Payee address; City; State; Zip Code 525 N Lamar Blvd |
| | PURPOSE OF EXPENDITURE | Austin, TX 78703 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies for Officeholder's Austin Capital office |
| | Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| | Date 03/28/2025 | Payee name William Sonoma |
| | Amount (\$) \$216.45 | Payee address; City; State; Zip Code 4001 N Lamar Suitie 310 Austin, TX 78756 |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies for Officeholder's Austin Capital office |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

| | Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|---|---|
| 1 | Total pages Schedule F1: | |
| | Sch: 53/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 |
| 4 | Date | 5 Payee name |
| | 01/16/2025 | Zoom Video Communications Inc |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$17.06 | 55 Almaden Blvd |
| | | 6th Floor |
| | | San Jose, CA 95113 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Officeholder's video conferencing fee |
| | | Officeriolder's video conferencing fee |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| 5 | expenditure to benefit C/O | |
| _ | Date | Payee name |
| | 02/18/2025 | Zoom Video Communications Inc |
| | Amount (\$) | |
| | \$17.06 | Payee address; City; State; Zip Code 55 Almaden Blvd |
| | Φ17.00 | |
| | | 6th Floor |
| | | San Jose, CA 95113 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | Officeholder's video conferencing fee |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 4 |
| | Date | Payee name |
| | 03/15/2025 | Zoom Video Communications Inc |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$17.06 | 55 Almaden Blvd |
| | | 6th Floor |
| | | San Jose, CA 95113 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF | Fees Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | | Officeholder's video conferencing fee |
| | | |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | experientare to benefit 6/61 | <u> </u> |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | | | | |
|---|--|--|------|--|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission File | ers) | | | |
| • | Sch: 54/54 Rpt: | Texans for Kelly Hancock SPAC 00067719 | c13) | | | |
| 4 | Date 04/16/2025 | 5 Payee name Zoom Video Communications Inc | | | | |
| | Amount (\$) \$17.06 | 7 Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113 | | | | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Officeholder's video conferencing fee | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held OH | | | | |
| | Date | Payee name | | | | |
| | 05/16/2025 | Zoom Video Communications Inc | | | | |
| | Amount (\$) \$17.06 | Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113 | | | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Officeholder's video conferencing fee | | | | |
| Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH | | | | | | |
| | Date | Payee name | | | | |
| | 06/17/2025 | Zoom Video Communications Inc | | | | |
| | Amount (\$) \$18.12 | Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113 | | | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Officeholder's video conferencing fee | | | | |
| Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH | | | | | | |
| | | | | | | |

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

| The Instruction Guide explains how to complete this form. | 1 Total pages Schedule K: Sch: 1/4 Rpt: 98/101 | | | |
|---|---|--|--|--|
| 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) | | | |
| Texans for Kelly Hancock SPAC | 00067719 | | | |
| 4 Date 5 Name of person from whom amount is received | 8 Amount (\$) | | | |
| 01/06/2025 Frost Bank | \$16,804.63 | | | |
| | \$10,604.03 | | | |
| 6 Address of person from whom amount is received; City; State; Zip Code | | | | |
| | | | | |
| | | | | |
| Hurst, TX 76137 | | | | |
| 7 Purpose for which amount is received | olitical contribution returned to filer | | | |
| Interest income | | | | |
| Date Name of person from whom amount is received | Amount (\$) | | | |
| 01/31/2025 Frost Bank | \$20.55 | | | |
| | Ψ20.33 | | | |
| Address of person from whom amount is received; City; State; Zip Code | | | | |
| | | | | |
| | | | | |
| Hurst, TX 76137 | | | | |
| Purpose for which amount is received | olitical contribution returned to filer | | | |
| Interest income | | | | |
| Date Name of person from whom amount is received | Amount (\$) | | | |
| 02/28/2025 Frost Bank | \$23.03 | | | |
| | | | | |
| Address of person from whom amount is received; City; State; Zip Code | | | | |
| | | | | |
| Hurst, TX 76137 | | | | |
| | | | | |
| | olitical contribution returned to filer | | | |
| Interest income | | | | |
| Date Name of person from whom amount is received | Amount (\$) | | | |
| 03/31/2025 Frost Bank | \$25.52 | | | |
| Address of person from whom amount is received; City; State; Zip Code | | | | |
| | | | | |
| | | | | |
| Hurst, TX 76137 | | | | |
| Purpose for which amount is received Check if p | olitical contribution returned to filer | | | |
| Interest income | ontical contribution retarried to mer | | | |
| | | | | |
| Date Name of person from whom amount is received | Amount (\$) | | | |
| 04/06/2025 Frost Bank | \$16,417.92 | | | |
| Address of person from whom amount is received; City; State; Zip Code | | | | |
| | | | | |
| | | | | |
| Hurst, TX 76137 | | | | |
| Purpose for which amount is received Check if p | political contribution returned to filer | | | |
| Interest income | | | | |
| | | | | |
| | | | | |

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

| | The Instruction Guide explains how to complete this form. | | | ages Schedule K: 2/4 Rpt: 99/101 | | |
|----------|---|--|---------------|-------------------------------------|-----------------------------|-------------|
| 2 | | | | Filer ID | (Ethics Commiss | ion Filers) |
| | | | | 00067 | 719 | |
| 4 | Date | | | | | |
| - | 04/30/2025 | Frost Bank | | | 8 Amount (\$) | \$24.71 |
| | 0 1/00/2020 | | | | | |
| | | 6 Address of person from whom amount is received; City; State; Zip Code | | | | |
| | | | | | | |
| | | Hurst, TX 76137 | | | | |
| | | | | | <u>.</u> | |
| | | | c if polition | cal conti | ribution returned to f | iler |
| | | Interest income | | | | |
| | Date | Name of person from whom amount is received | | | Amount (\$) | |
| | 05/31/2025 | Frost Bank | | | | \$25.56 |
| | | Address of person from whom amount is received; City; State; Zip Code | | | • | |
| | | | | | | |
| | | | | | | |
| | | Hurst, TX 76137 | | | | |
| | <u> </u> | | | | ı ribution returned to f | iler |
| | | Interest income | | | | |
| | | | | | | |
| | Date | Name of person from whom amount is received | | | Amount (\$) | + |
| | 06/30/2025 Frost Bank | | | | | \$25.60 |
| | | Address of person from whom amount is received; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Hurst, TX 76137 | | | | |
| | | _ | c if polition | cal conti | ribution returned to f | iler |
| | | Interest income | | | | |
| | Date | Name of person from whom amount is received | | | Amount (\$) | |
| | 01/31/2025 | Independent Bank | | | | \$2,461.38 |
| | | Address of person from whom amount is received; City; State; Zip Code | | | 1 | |
| | | , wantees of person ment amount to receiving the country of the co | | | | |
| | | | | | | |
| | | McKinney, TX 75070 | | | | |
| | | Purpose for which amount is received Check | c if politic | cal conti | I ribution returned to f | iler |
| | | Interest income | t ii poiitit | Jan 001111 | | |
| \vdash | | | | | 1 | |
| | Date | Name of person from whom amount is received | | | Amount (\$) | ** *** ** |
| | 02/28/2025 | Independent Bank | | | | \$2,213.27 |
| | | Address of person from whom amount is received; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | McKinney, TX 75070 | | | | |
| | | Purpose for which amount is received | c if polition | cal conti | ribution returned to f | iler |
| | | Interest income | | | | |
| | | | | | | |
| | | | | | | |

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

| | The Instruction Guide explains how to complete this form. | | | l pages Schedule K: : 3/4 Rpt: 100/101 | | |
|-----------------|---|----------|---|---|------------|-------------------------------|
| 2 | | | | ID (Ethics Commission Filers) | | |
| | Texans for Kelly Hancock SPAC 0006 | | | | 67719 | |
| 4 | Date 03/15/2025 | | | | | 8 Amount (\$) \$26,978.44 |
| | | | McKinney, TX 75070 | | | |
| | | 7 | Purpose for which amount is received | ck if polition | cal co | ontribution returned to filer |
| | | | Interest income | | | |
| | Date | | Name of person from whom amount is received | | | Amount (\$) |
| | 03/31/2025 Independent Bank | | | | \$2,051.96 | |
| | | | Address of person from whom amount is received; City; State; Zip Code | | | |
| | | | | | | |
| | | | McKinney, TX 75070 | | | |
| | | | | | | |
| | | | Interest income | ok ii politik | Jul 00 | mandadir rotarriod to mor |
| | Date | <u> </u> | Name of person from whom amount is received | | | Amount (\$) |
| | 04/30/2025 Independent Bank | | | \$1,728.92 | | |
| | | ļ | Address of person from whom amount is received; City; State; Zip Code | | | |
| | Address of person from whom amount is received, Oily, State, Zip Code | | | | | |
| | | | Mal/Survey TV 75070 | | | |
| | | L | McKinney, TX 75070 Purpose for which amount is received Chec | 1 16 111 | | |
| | | | Interest income | ск іт роііці | cai co | ontribution returned to filer |
| | Date | \vdash | Name of person from whom amount is received | | | Amount (\$) |
| | 05/23/2025 | | Independent Bank | | | \$1,383.36 |
| | | | | | | |
| | Address of person from whom amount is received; City; State; Zip Code | | | | | |
| | | | | | | |
| | | L | McKinney, TX 75070 | | | |
| | | | Purpose for which amount is received Check Interest income | ck if polition | cal co | ontribution returned to filer |
| | | L | | | | <u> </u> |
| | Date | | Name of person from whom amount is received | | | Amount (\$) |
| | 05/31/2025 SouthState Bank N. A. | | | | \$186.16 | |
| | Address of person from whom amount is received; City; State; Zip Code | | | | | |
| | | | | | | |
| | | | Charleston, SC 29423 | | | |
| | | Г | Purpose for which amount is received | ck if polition | cal co | ntribution returned to filer |
| Interest income | | | | | | |
| | | | | | | |

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 4/4 Rpt: 101/101 2 FILER NAME Filer ID (Ethics Commission Filers) Texans for Kelly Hancock SPAC 00067719 8 Amount (\$) Date 5 Name of person from whom amount is received 06/12/2025 SouthState Bank N. A. \$18,930.75 6 Address of person from whom amount is received; City; State; Zip Code Charleston, SC 29423 Purpose for which amount is received Check if political contribution returned to filer Interest income Amount (\$) Date Name of person from whom amount is received 06/30/2025 SouthState Bank N. A. \$1,353.64 Address of person from whom amount is received; City; State; Zip Code Charleston, SC 29423 Purpose for which amount is received Check if political contribution returned to filer Interest income