CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to compl	ete this form.	1 Filer ID (Ethics Commi 00067717		2 Total pages filed: 61
3 CANDIDATE /	MS / MRS / MR	FIRST	•	MI	OFFICE USE ONLY
OFFICEHOLDER NAME	The Honorable	Steven H.			Date Received
					ELECTRONICALLY FILED
	NICKNAME	LAST		SUFFIX	07/10/2025
	Steve	Toth			
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postmarked
OFFICEHOLDER MAILING ADDRESS	67 Chestnut Meadow Dr.				Receipt # Amount
l <u>—</u>	Convo. TV 77204				
Change of Address	Conroe, TX 77384				Date Processed
					Date Imaged
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	
TREASURER NAME	Mr.	James P.			
	NICKNAME	LAST		SUFFIX	
		McCann			
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP ⁻	Γ / SUITE #; CITY;	STATE; ZIP CODE
TREASURER ADDRESS	596 Fairway Ct.				
(Residence or Business)	Conroe, TX 77302				
7 CAMPAIGN	AREA CODE PHON	IE NUMBER E	EXTENSION		
TREASURER PHONE	(713) 822-2236				
8 REPORT TYPE	January 15	30th day before	a classian	Runoff	15th day after campaign treasurer
		J Sour day belore	e election	Kulloli	appointment (officeholder only)
	X July 15	8th day before	election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year
COVERED	01/01/2025	TH	IROUGH	06/30/202	5
10 ELECTION	ELECTION DATE			ELECTION TYPE	_
	Month Day Year	l ∐ ^P	rimary	Runoff	Other
		G	Seneral	Special	
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)
	State Representative Distr	rict 15 Montgom	nery	State Represent	
	1			1	
		CO T			
		GOI	O PAGE 2		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 61

13 C / OH NAME	Toth, Steven H. (The	Honorable)	14 Filer ID 00067717	(Ethics Commiss	sion Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendi These expenditures may have been made withou d officeholders are required to report this information	it the candidate's or offic	ceholder's knowled	dge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRE	ESS		
16 CONTRIBUTION TOTALS		I IZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELI		\$	0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	NS)	\$	7,500.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLITIC	CAL EXPENDITURES		\$	64,810.33
CONTRIBUTION BALANCE	5. TOTAL POLITIC. REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE ERIOD	LAST DAY OF THE	\$	58,292.80
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	S OF THE LAST DAY	\$	0.00
17 AFFIDAVIT		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code.	all information required		
		The Ho	norable Steven H. To	oth	
		Signature of	of Candidate or Officeho	older	
AFFIX NO	TARY STAMP / SEAL ABO	OVE			
		aid	, this the	da	ay
of	, 20, to ce	ertify which, witness my hand and seal of office.			
Signature of office	cer administering	Printed name of officer administering	Title of office	er administering o	ath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

CC	OVER SHEET PG 3 3 of 61
18 FILER NAME Toth, Steven H. (The Honorable) 19 Filer ID 00067717	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,500.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. SCHEDULE E: LOANS	\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 64,810.33
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. X SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 2,448.50

	MONET	TARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	_E A1
	The Instru	ction Guide explains how to complete this	1 Total page Sch: 1/1	es Schedule A1: Rpt: 4/61		
2	FILER NAME Toth, Stever	: n H. (The Honorable)		3 Filer ID 0006771	(Ethics Commission	on Filers)
4	Date 06/27/2025 5 Full name of contributor out-of-state PAC (ID#:) TEXANS FOR LAWSUIT REFORM PAC 6 Contributor address; City; State; Zip Code		7 Amount of	Contribution (\$)	\$5,000.00	
		AUSTIN, TX 78701				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 06/28/2025	Full name of contributor out-of-state PAC (ID# Weekley, Richard Contributor address; City; State; Zip Code	:)	Amount of	Contribution (\$)	\$2,500.00
	Principal occu	Houston, TX 77055 upation / Job title (See Instructions)	Employer (See Instructions David Weekley Homes	s)		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe 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 Cobadula F1	,
_	Total pages Schedule F1: Sch: 1/55 Rpt: 5/61	2 FILER NAME Toth, Steven H. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067717
4	Date	5 Payee name
	04/15/2025	40 Days For Life
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	4112 East 29th Street
		Bryan , TX 77803
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/14/2025	40 Days For Life
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	4112 East 29th Street
		Bryan , TX 77803
	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/Onicerioider/Political Committee Donation
		23.1880.1
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y
H	Date	Payee name
	06/16/2025	40 Days For Life
\vdash	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	4112 East 29th Street
	φ100.00	7112 Last 29th Shoot
		Bryan , TX 77803
	DUDDOCE	1
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By
	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
		Donation
	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 Candidate/Officeholder/Political Committee

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 2/55 Rpt: 6/61	Toth, Steven H. (The Honorable)	00067717
4	Date	5 Payee name	
	01/17/2025	AT&T	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$100.00	1900 University Ave	
		Auctin TV 79705	
_	BURDOCE	Austin, TX 78705	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin	n, TX, officeholder living expense
		Campaign W	/IFI Set Up Fee
_	Operation ONLY if allowed	Out title to Office health a result.	Office health
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
_	Data		
	Date 02/19/2025	Payee name AT&T	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$68.31	1900 University Ave	
	,,,,,,		
		Austin, TX 78705	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	autoido of Turro Convoltos Cobadulo T
	EXPENDITURE	Onice Overnead/Nental Expense	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Campaign W	'IFI
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	- CAPCHARATO TO SOTIONE OF CI	·	
	Date	Payee name	
	03/24/2025	AT&T	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$60.57	1900 University Ave	
		Austin, TX 78705	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overficad/Nertical Experise	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Campaign W	· '
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	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 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	plete t	this form.		
1	Total pages Schedule F1:			1	Filer ID	(Ethics Commission Filers)
	Sch: 3/55 Rpt: 7/61	Toth, Steven H. (The Honorable)			00067717	
4	Date	5 Payee name				
_	04/21/2025	AT&T				
6	Amount (\$) \$60.57	7 Payee address; City; State; Zip Code1900 University Ave	е			
	φου.57	1900 University Ave				
		Austin, TX 78705				
8	PURPOSE		b) De	escription		
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outsid		
	LAFENDITORE] Check if Austin, TX, (ampaign WIFI	officeholder living	g expense
			Cc	ampaign wiri		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	ht		Office he	eld
	expenditure to benefit C/OI					
	Date	Payee name				
	05/20/2025	AT&T				
	Amount (\$)	Payee address; City; State; Zip Code	е			
	\$65.63	1900 University Ave				
		Austin, TX 78705				
	PURPOSE OF	, ,	b) De □	escription Check if travel outsid	le of Teyes Com	nlete Schedule T
	EXPENDITURE	Office Overhead/Rental Expense	H	Check if Austin, TX,		
			Ca	ampaign WIFI		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	nt		Office he	eld
	Data					
	Date 06/20/2025	Payee name AT&T				
	Amount (\$)	Payee address; City; State; Zip Code	<u> </u>			
	\$65.63	1900 University Ave	Ü			
		Austin, TX 78705				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	b) De	escription		
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outsid		
			∐ Ca] Check if Austin, TX, (ampaign WIFI	omcenolaer livinç	g expense
				1 5		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	ht		Office he	eld
	expenditure to benefit C/OI	1				

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 Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/55 Rpt: 8/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	02/24/2025	Amazon.com
6	Amount (\$) \$119.93	7 Payee address; City; State; Zip Code 410 Terry Ave
		Seattle, WA 98109
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 Campaign Policy books for constituents
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/23/2025	Amazon.com
	Amount (\$) \$43.09	Payee address; City; State; Zip Code 410 Terry Ave
		Seattle, WA 98109
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Studio Backdrop
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/02/2025	Anchora Properties
	Amount (\$) \$3,337.50	Payee address; City; State; Zip Code 1212 Guadalupe St
		Austin, TX 77477
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) January Rent and Security Deposit (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense January Rent and security deposit
	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 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	<u></u>
-	Sch: 5/55 Rpt: 9/61	Toth, Steven H. (The Honorable)	')
4	Date	5 Payee name	
	02/03/2025	Anchora Properties	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,747.50	1212 Guadalupe St	
		Austin, TX 77477	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Apartment Rental Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		February rental for officeholder living expense	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
9	expenditure to benefit C/OI		
	Date	Payee name	
	03/03/2025	Anchora Properties	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,712.50	1212 Guadalupe St	
		Austin, TX 77477	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Monthly Apartment Rental Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		March Rental for officeholder living expense	
		Indian Nemaa for onlocational living expense	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	04/01/2025	Anchora Properties	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,712.50	1212 Guadalupe St	
		Austin, TX 77477	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Rental Check if travel outside of Texas. Complete Schedule T.	
	-	Check if Austin, TX, officeholder living expense	
		April Apartment Rental for officeholder living expe	nse
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
pense 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/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/55 Rpt: 10/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	05/01/2025	Anchora Properties
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,712.50	1212 Guadalupe St
		Austin, TX 77477
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Rent Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		May apartment rental for officeholder living expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	01/06/2025	Apple Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.76	9600 Lake Robbins Dr
		The Woodlands, TX 77380
	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
		App Storage for campaign
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/08/2025	Apple Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.14	9600 Lake Robbins Dr
		The Woodlands, TX 77380
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Pental Expanse (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
		Campaign App monthly fee
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experientale to beliefft C/O	•

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

	Contributions/ Donations Made By 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: 7/55 Rpt: 11/61	Toth, Steven H. (The Honorable) 00067717	
4	Date	5 Payee name	
	01/08/2025	Apple Store	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$2.16	9600 Lake Robbins Dr	
		The Woodlands, TX 77380	
8	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	
		Campaign app monthly fee	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
"	expenditure to benefit C/OI		
_			_
	Date	Payee name	
	01/09/2025	Apple Store	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$150.84	9600 Lake Robbins Dr	
		The Woodlands, TX 77380	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense	
		Campaign App annual fee	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	- CAPOTICITO TO BOTTOTIC GAOT		
	Date	Payee name	
	01/10/2025	Apple Store	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$37.70	9600 Lake Robbins Dr	
		The Woodlands, TX 77380	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	$\overline{}$
	OF	Office Overhead/Rental Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Campaign app fee	
L			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	n	
l			

SCHEDULE F1

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

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

	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: 8/55 Rpt: 12/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	01/10/2025	Apple Store
6	Amount (\$) \$37.70	7 Payee address; City; State; Zip Code 9600 Lake Robbins Dr The Woodlands, TX 77380
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 App fee
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/21/2025	Apple Store
	Amount (\$) \$9.99	Payee address; City; State; Zip Code 9600 Lake Robbins Dr
		The Woodlands, TX 77380
	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 Campaign App fee
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/29/2025	Apple Store
	Amount (\$) \$4.31	Payee address; City; State; Zip Code 9600 Lake Robbins Dr
		The Woodlands, TX 77380
	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 Campaign app fee
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

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

	Credit Card Payment	The Instruction Guide explains how to complete this	· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 9/55 Rpt: 13/61	Toth, Steven H. (The Honorable)	00067717
4	Date	5 Payee name	·
	02/04/2025	Apple Store	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$10.76	9600 Lake Robbins Dr	
		The Woodlands, TX 77380	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descri	ption
	OF EXPENDITURE	Office Overhead/Rental Expense	ck if travel outside of Texas. Complete Schedule T.
	_/	,	ck if Austin, TX, officeholder living expense paign App fee
		Camp	aigii App lee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	expenditure to benefit C/OI		Office field
	Date	Payee name	
	02/10/2025	Apple Store	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4.30	9600 Lake Robbins Dr	
		The Woodlands, TX 77380	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descri	ption
	OF EXPENDITURE	The office of the track of the	ck if travel outside of Texas. Complete Schedule T.
		·	ck if Austin, TX, officeholder living expense aign App fee
		Camp	aign / pp icc
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	02/13/2025	Apple Store	
	Amount (\$)		
	\$25.85	Payee address; City; State; Zip Code 9600 Lake Robbins Dr	
	φ25.65	9000 Lake Robbins Di	
		The Weedlands TV 77900	
		The Woodlands, TX 77380	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descri	ption ck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Onice Overnead/Nental Expense	ck if Austin, TX, officeholder living expense
			aign App Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	Н	

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			egal Services		s/Wage	es/Contract Labor		OTHER (enter a	strict category not listed above)	
				The Instruction Gu	ide explains how to	comp	lete this form.				
1	Total pages Schedule F1:	2 F	ILER NAME					3	Filer ID	(Ethics Commission Fil	lers)
	Sch: 10/55 Rpt: 14/61	Т	oth, Steven	H. (The Honor	able)				00067717		
4	Date	5 P	ayee name								
	02/20/2025	A	Apple Store								
6	Amount (\$)	7 P	ayee addres	s; City;	State; Zip	Code					
	\$9.99	9	600 Lake R	obbins Dr							
		т	he Woodlaı	nds, TX 77380							
8	PURPOSE			Categories listed at th	o top of this schodule)	(b)	Description				
	OF			ead/Rental Exp		``		outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITURE						Check if Austin	, TX,	officeholder livin	g expense	
							Campaign Ap	op f	ee		
9	Complete ONLY if direct expenditure to benefit C/OI		indidate/Offic	eholder name	Office s	ought			Office h	eld	
	experiulture to beliefit C/Oi	1									
	Date	Р	ayee name								
	03/03/2025	A	apple Store								
	Amount (\$)	Р	ayee addres	s; City;	State; Zip	Code					
	\$10.76	9	600 Lake R	obbins Dr							
		Т	he Woodla	nds, TX 77380							
	PURPOSE	(a) C	Category (See	Categories listed at th	e top of this schedule)	(b)	Description				
	OF EXPENDITURE	ı		ead/Rental Exp			<u> </u>			plete Schedule T.	
	LA LIBITORE						ш		officeholder livin	g expense	
							Campaign ap	рт	ee		
_	Complete ONLY if direct		andidate (Office		Office				Office b	ald	
	Complete ONLY if direct expenditure to benefit C/OI		indidate/Offic	eholder name	Office s	ougnt			Office h	eia	
	· 	1									
	Date	l	ayee name								
	03/03/2025	А	Apple Store								
	Amount (\$)	l	ayee addres		State; Zip	Code					
	\$20.46	9	600 Lake R	obbins Dr							
		Т	he Woodlai	nds, TX 77380							
	PURPOSE	(a) C	Category (See	Categories listed at th	e top of this schedule)	(b)	Description				
	OF EXPENDITURE	c	Office Overh	ead/Rental Exp	ense					plete Schedule T.	
							Campaign ap		officeholder livin	g expense	
							Sampaign ap	יף ין			
_	Complete ONLY if direct	Ca	ndidate/Offic	eholder name	Office s	Oliapi			Office h	eld he	
	expenditure to benefit C/OI		a laidate/Offic	Choider Haine	Office 3	ougill			Office II	O.U	
\vdash											
1											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: 11/55 Rpt: 15/61	Toth, Steven H. (The Honorable) 00067717
4 Date	5 Payee name
03/10/2025	Apple Store
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$126.04	9600 Lake Robbins Dr
	The Woodlands, TX 77380
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.
	Campaign app fee
	Campaign app ice
O Complete ONLY if alling -4	Condidate/Officeholder name Office cought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
03/12/2025	Apple Store
Amount (\$)	Payee address; City; State; Zip Code
\$16.16	9600 Lake Robbins Dr
	The Woodlands, TX 77380
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
	Campaign app fee
	Sampaigh applies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
<u> </u>	T _
Date	Payee name
03/17/2025	Apple Store
Amount (\$)	Payee address; City; State; Zip Code
\$24.85	9600 Lake Robbins Dr
	The Woodlands, TX 77380
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	Campaign app fee
Complete ONLY Stalling	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

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: 12/55 Rpt: 16/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	03/20/2025	Apple Store
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$9.99	9600 Lake Robbins Dr
		The Woodlands, TX 77380
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 app fee
		Campaign app icc
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	03/28/2025	Apple Store
H	Amount (\$)	Payee address; City; State; Zip Code
	\$10.76	9600 Lake Robbins Dr
		The Woodlands, TX 77380
	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 app fee
		Campaign app 100
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	04/04/2025	Apple Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.76	9600 Lake Robbins Dr
		The Woodlands, TX 77380
	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 app monthly fee
		Campaign app monthly lee
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		
l		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services			se s/Contract Labor		OTHER (enter a	strict a category not listed above)	
			The Instruction Gu	ide explains how to co	mple	ete this form.				
1	Total pages Schedule F1:	2 FILER NA	AME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 13/55 Rpt: 17/61	Toth, Ste	even H. (The Honor	able)				00067717		
4	Date	5 Payee na	me							
	04/07/2025	Apple St	ore							
6	Amount (\$)	7 Payee ad	dress; City;	State; Zip Co	ode					_
	\$8.62	9600 La	ke Robbins Dr							
		The Wo	odlands, TX 77380							
8	PURPOSE				(b)	Description				_
ľ	OF		(See Categories listed at th verhead/Rental Exp		(5)		outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE	Office O	verneau/rtentai Exp	Clisc				officeholder living		
						campaign app	p m	onthly fee		
9	Complete ONLY if direct		Officeholder name	Office sou	ight			Office h	eld	
	expenditure to benefit C/OI	1								
	Date	Payee na	me							=
	04/07/2025	Apple St	ore							
	Amount (\$)	Payee ad	dress; City;	State; Zip Co	ode					_
	\$217.63	9600 La	ke Robbins Dr							
		The Wo	odlands, TX 77380							
	PURPOSE				(h)	Description				-
	OF		(See Categories listed at th		(6)	Description Check if travel of	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE	Office O	verhead/Rental Exp	ense				officeholder livin		
						Campaign Ap	р у	early fee		
	Complete ONLY if direct		Officeholder name	Office sou	ıght			Office h	eld	Ī
	expenditure to benefit C/OI	-								
	Date	Payee na	me							=
	04/16/2025	Apple St	ore							
	Amount (\$)	Payee ad	dress; City;	State; Zip Co	ode					_
	\$16.16	9600 La	ke Robbins Dr							
		The Woo	odlands, TX 77380							
	PURPOSE		(See Categories listed at th	a tan of this paleadula)	(b)	Description				-
	OF		verhead/Rental Exp		(~)		outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE	000	70oa,			Check if Austin,	, TX,	officeholder living	g expense	
						Campaign ap	p fe	ee		
	Complete ONLY if direct		Officeholder name	Office sou	ıght			Office h	eld	
	expenditure to benefit C/OH									

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

	Contributions/ Donations Made By 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:	
	Sch: 14/55 Rpt: 18/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	04/14/2025	Apple Store
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$25.85	9600 Lake Robbins Dr
	+ 20.00	
		The Manual and TV 77000
		The Woodlands, TX 77380
8	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 Campaign app fee
		Cumpaign applied
<u>_</u>	Complete ONLY !! -!!	Condidate/Officeholder name Office county
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/17/2025	Apple Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$18.31	9600 Lake Robbins Dr
		The Woodlands, TX 77380
_	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	Check if Austin, TX, officeholder living expense
		Campaign app fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	04/21/2025	Apple Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.99	9600 Lake Robbins Dr
		The Woodlands, TX 77380
	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.
	ZA ZIIDII GIAZ	Check if Austin, TX, officeholder living expense
		Campaign monthly app
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to beliefft C/OI	•

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 Salaries (Contract Labor,

Credit Card Payment	The Instruction Guide explains how to co	omplete	this form.	t listed above)
1 Total pages Schedule F1:	-			Commission Filers)
Sch: 15/55 Rpt: 19/61	Toth, Steven H. (The Honorable)	00067717		
4 Date	5 Payee name		· ·	
04/23/2025	Apple Store			
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode		
\$32.31	9600 Lake Robbins Dr			
	The Woodlands, TX 77380			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) De	escription	
OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Sched	ule T.
EXI ENDITORE			Check if Austin, TX, officeholder living expense	
			ampaign app fee	
O Compulate ONII V if direct	Condidate/Officeholder name		Office held	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ugnt	Office held	
D-t-				
Date	Payee name			
04/29/2025	Apple Store			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$4.31	9600 Lake Robbins Dr			
	The Woodlands, TX 77380			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) De	escription	
OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Sched Check if Austin, TX, officeholder living expense	ule T.
			ampaign app monthly fee	
			ampaign app memin, rec	
Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ught	Office held	
expenditure to benefit C/OI		J		
Date	Payee name			
05/05/2025	Apple Store			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$46.31	9600 Lake Robbins Dr	ouc		
7.0.02	2000 2000 10000000			
	The Woodlands, TX 77380			
PURPOSE		(h) D	no ovinting	
OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		escription Check if travel outside of Texas. Complete Schedo	ule T.
EXPENDITURE	Onice Overneau/Nerital Expense		Check if Austin, TX, officeholder living expense	
		С	ampaign App yearly fee	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught	Office held	
expenditure to benefit C/OI	1			

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By 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/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: 16/55 Rpt: 20/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	05/09/2025	Apple Store
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4.30	9600 Lake Robbins Dr
		The Woodlands, TX 77380
8	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
		Campaign app fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/16/2025	Apple Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.85	9600 Lake Robbins Dr
		The Woodlands, TX 77380
	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
		Campaign app fee
		Gampaigh app 100
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Date	Payee name
	05/20/2025	Apple Store
	Amount (\$) \$9.99	Payee address; City; State; Zip Code 9600 Lake Robbins Dr
	Ф9.99	9000 Lake Robbins Di
		The Woodlands, TX 77380
	DUDDOCE	
	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	Check if Austin, TX, officeholder living expense
		Campaign app fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H

SCHEDULE F1

Advertising Expense Event Exp Accounting/Banking Fees Consulting Expense Food/Bev Contributions/ Donations Made By - Gift/Award

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica		Legal Services			se s/Contract Labor		OTHER (enter a	category not listed abo	ve)
	Credit Card Payment		The Instruction Guide	explains how to co	mple	ete this form.				
1	Total pages Schedule F1:	2 FILER NAME	1				3	Filer ID	(Ethics Commission	on Filers)
	Sch: 17/55 Rpt: 21/61	Toth, Steve	n H. (The Honorabl	e)				00067717		
4	Date	5 Payee name								
	05/28/2025	Apple Store	?							
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	de					
	\$4.31	9600 Lake	Robbins Dr							
		The Woodla	ands, TX 77380							
8	PURPOSE		ee Categories listed at the to		(b)	Description				
	OF		ee Categories listed at the to head/Rental Expen		(~)		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE	J55 5 7 5.				Check if Austin,	, TX,	officeholder living	g expense	
						Campaign ap	p f	ee		
9	Complete ONLY if direct expenditure to benefit C/OI		ceholder name	Office sou	ght			Office he	eld	
	experiorare to benefit C/O									
	Date	Payee name								
	06/04/2025	Apple Store)							
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	de					
	\$4.31	9600 Lake	Robbins Dr							
		The Woodla	ands, TX 77380							
	PURPOSE	(a) Category (S	ee Categories listed at the to	p of this schedule)	(b)	Description				
	OF EXPENDITURE		head/Rental Expen			<u></u>			plete Schedule T.	
	ZAI ZABITORZ					ш		officeholder living	g expense	
						Campaign ap	ıp ı	ee		
	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	aht			Office he	ald	
	expenditure to benefit C/OI		cenoider name	Office sou	grit			Office fit	siu	
	Data									
	Date 06/09/2025	Payee name								
		Apple Store								
	Amount (\$)	Payee addre		State; Zip Co	ae					
	\$4.30	9600 Lake	RODDINS DI							
		TI - 147 II	TV 77000							
			ands, TX 77380							
	PURPOSE OF		ee Categories listed at the to		(b)	Description	outci	do of Toyas Com	plete Schedule T.	
	EXPENDITURE	Office Over	head/Rental Expen	se		ш		officeholder living	•	
						Campaign ap				
	Complete ONLY if direct		ceholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI	4								
ı										

SCHEDULE F1

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

Contributions/ Donations Made By -

Loan Repayment/Reimbursement Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials 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: 18/55 Rpt: 22/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	06/16/2025	Apple Store
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$25.85	9600 Lake Robbins Dr
		The Woodlands, TX 77380
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 app fee
		Campaign app ice
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
⊨	Data	
	Date	Payee name
L	06/20/2025	Apple Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.99	9600 Lake Robbins Dr
		The Woodlands, TX 77380
	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 App
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	D-4-	
	Date	Payee name
	06/30/2025	Apple Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.31	9600 Lake Robbins Dr
		The Woodlands, TX 77380
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Campaign App fee
		Campaign Applies
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		
l		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

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: 19/55 Rpt: 23/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	01/13/2025	BEST BUY Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$43.29	1201 Barbara Jordan
		AUSTIN, TX 78701
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 Bracket for Capitol office monitor
		Bracket for Supitor office monitor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	01/13/2025	BEST BUY
H	Amount (\$)	Payee address; City; State; Zip Code
	\$43.29	1550 Lake Woodlands Dr
		Spring, TX 77380
	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
		Wifi App for Austin Capitol office
		Tim typ to the capitor of the
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	01/13/2025	BEST BUY
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$162.36	1550 Lake Woodlands Dr
		Spring, TX 77380
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Wireless microphone for Campaign videos in Capitol office
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	
\vdash		
ı		

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 Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 20/55 Rpt: 24/61	Toth, Steven H. (The Honorable)	00067717
4	Date	5 Payee name	·
	01/29/2025	CAZ Consulting	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$2,923.47	7720 Laura Lake Lane	
		Ft Worth, TX 76126	
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
			Campaign consulting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Cilide Held
_	Date	Payee name	
	06/02/2025	CAZ Consulting	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,434.79	7720 Laura Lake Lane	
	Ψ1,434.79	1120 Laura Lane Lane	
		Fort Worth, TX 76126	
	DUDD 0.5		
	PURPOSE OF	,	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Consulting Expense	Check if Austin, TX, officeholder living expense
			Consulting work
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Ol	7	
	Date	Payee name	
	06/23/2025	CAZ Consulting	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,869.37	7720 Laura Lake Lane	
		Fort Worth, TX 76126	
	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 Text in to district
			Toxe in to district
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		555 Nota

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

l	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)
l	Sch: 21/55 Rpt: 25/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	06/25/2025	CAZ Consulting
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$2,521.65	7720 Laura Lake Lane
		Fort Worth, TX 76126
8	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	Check if Austin, TX, officeholder living expense
		Consulting
L		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	'	
	Date	Payee name
L	03/03/2025	CHS Operation Graduation
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	320 W Davis St
		Conroe, TX 77304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if Austin TV officeholder living suppose
		Candidate/Officeholder/Political Committee Contribution for CISD Graduation celebration
		Continuation for Gred Chadadaidh conostation
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	05/07/2025	Cabo Bobs
\vdash	Amount (\$)	Payee address; City; State; Zip Code
	\$454.03	500 E Ben White Blvd
l		Austin, TX 78701
H	PURPOSE	
	OF	(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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Lunch for Woodlands Township Directors
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experientale to beliefft G/OI	·

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 Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 22/55 Rpt: 26/61	Toth, Steven H. (The Honorable)	00067717
4	Date	5 Payee name	•
l	01/23/2025	Capitol Gift Shop	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
l	\$533.67	1400 Congress Ave	
l			
l		Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
l	OF EXPENDITURE	Gift/Awards/Memorials Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	·	Check if Austin, TX, officeholder living expense
			Gifts for Constituents
Ļ	0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0:		000
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
┡	·		
	Date	Payee name	
	06/02/2025	Cavenders	
l	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.00	2025 W SW Loop 323	
l			
		Tyler, TX 75701	
	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
l			Gift to staffer
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
F	Date	Payee name	
	03/17/2025	Chevron	
⊢	Amount (\$)	Payee address; City; State; Zip Code	
	\$57.70	2520 FM 1488	
l			
		Conroe, TX 77384	
⊢	PURPOSE		Description
l	OF	(a) Category (See Categories listed at the top of this schedule) Gas	Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Gas for staffer's car
L			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	experience to beliefit 6/01	•	

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: 23/55 Rpt: 27/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	01/24/2025	Crowe, Cassandra
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	5812 Woodstock Ln
		Conroe, TX 77386
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 contract labor
		Campaigh contract labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Davisa nama
	03/24/2025	Payee name
		Crowe, Cassandra
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	5812 Woodstock Ln
		Conroe, TX 77386
	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 contract labor March, April, May
		Campaigh contract labor watch, April, way
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Device same
	06/17/2025	Payee name Crown Cassandra
		Crowe, Cassandra
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,682.02	5812 Woodstock Ln
		Conroe, TX 77386
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Campaign contract labor
		Campaigh contract labor
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)
L	Sch: 24/55 Rpt: 28/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
L	02/03/2025	Deckard, Braden
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$500.00	30206 Old Hockley Rd
l		
		Magnolia, TX 77355
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Salaries/Wages/Contract Labor
l		Campaign contract labor Jan, Feb
l		- · · · · · · · · · · · · · · · · · · ·
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
⊨	Date	Dougo nama
l	06/13/2025	Payee name Deckard, Braden
┡		
l	Amount (\$)	Payee address; City; State; Zip Code
l	\$1,750.00	30206 Old Hockley Rd
		Magnolia, TX 77355
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l		campaign contract labor
l		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
l	03/15/2025	Deckard, Braden
Г	Amount (\$)	Payee address; City; State; Zip Code
l	\$750.00	30206 Old Hockley Rd
		Magnolia, TX 77355
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	EXPENDITURE	Salaries/Wages/Contract Labor
l		Campaign contract labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

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: 25/55 Rpt: 29/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	06/26/2025	Deckard, Braden
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$4,200.00	30206 Old Hockley Rd
l		
		Magnolia, TX 77355
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Campaign Contract Labor
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
l	01/22/2025	Delanoye Strategies
⊢	Amount (\$)	Payee address; City; State; Zip Code
l	\$150.00	1415 S VOSS RD 110-329
	Ψ100.00	1410 0 VOOD ND 110 023
		Houston, TX 77057
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Media placement
		Wedia placement
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
⊨	Date	Payee name
	02/18/2025	Delanoye Strategies
┡		
l	Amount (\$)	Payee address; City; State; Zip Code
l	\$100.00	1415 S VOSS RD 110-329
		Houston, TX 77057
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Advertising Expense
l	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign Media placement
dash	0 1. 0	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	Ondition to bonion 0/01	

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 Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
l	Sch: 26/55 Rpt: 30/61	Toth, Steven H. (The Honorable) 00067717	
4	Date	5 Payee name	_
l	03/28/2025	Delanoye Strategies	
6	Amount (\$) \$75.00	7 Payee address; City; State; Zip Code 1415 S VOSS RD 110-329	
Ļ		Houston, TX 77057	_
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign media placement	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
l	06/02/2025	Dromgooles	
	Amount (\$) \$389.70	Payee address; City; State; Zip Code 2515 Rice Boulevard	
		Houston, TX 77005	
	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 Gift for Chief of Staff	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
l	01/22/2025	Eckhart, Jennifer	
	Amount (\$) \$1,166.57	Payee address; City; State; Zip Code 6611 Ranch Park Dr	
		Magnolia, TX 77354	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense January and February contact labor	
	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

	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: 27/55 Rpt: 31/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	03/18/2025	Eckhart, Jennifer
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,632.58	6611 Ranch Park Dr
		Magnolia, TX 77354
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
		March, April, May campaign contract labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
-	Date	Payee name
	06/24/2025	Eckhart, Jennifer
_	Amount (\$)	Payee address; City; State; Zip Code
	\$3,500.00	6611 Ranch Park Dr
	φ3,500.00	OUI RAICH FAIR DI
		Magnelia TV 77254
		Magnolia, TX 77354
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign contract labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/13/2025	FACEBOOK
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	1 HACKER WAY
		MENLO PARK, CA 94025
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	_/	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	

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	l 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: 28/55 Rpt: 32/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	01/29/2025	Featherstone, Patrick
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	501 E Oltorf St
		Austin, TX 78704
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Campaign contract labor January, February
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Г	Date	Payee name
	03/19/2025	Featherstone, Patrick
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	501 E Oltorf St
		Austin, TX 78704
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		March, April, May Campaign contract labor
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
⊨		
	Date	Payee name
	01/14/2025	Fiesta Mart
	Amount (\$)	Payee address; City; State; Zip Code
	\$11.36	3909 N I-35 Service Rd
		Austin, TX 78722
	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
		beverages for capitol office
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 29/55 Rpt: 33/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	06/02/2025	Framebridge
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$150.00	655 15th St NW
		Washington, DC 20005
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 Gift for Leg Director
		Sitt for Eeg Director
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	Payee name
	03/24/2025	HEB Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.90	2400 S Congress
		Austin, TX 78701
	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 Beverages for capitol office
		beverages for capitor office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	02/13/2025	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.96	10777 KUYKENDAHL ROAD
		SPRING, TX 77382
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense
		Beverages for capitol office
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiantare to benefit Great	·

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	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 T	otal pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
S	Sch: 30/55 Rpt: 34/61	Toth, Steven H. (The Honorable) 00067717
4 D	ate	5 Payee name
0	3/03/2025	HEB
6 A	mount (\$)	7 Payee address; City; State; Zip Code
	\$24.66	10777 KUYKENDAHL ROAD
		SPRING, TX 77382
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
		Beverages for capitol office
9 C	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	xpenditure to benefit C/OI	
_	Pate	Payee name
	1/22/2025	HOME SLICE PIZZA
A	mount (\$)	Payee address; City; State; Zip Code
	\$52.29	1415 S CONGRESS
		AUSTIN, TX 78704
	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 Dinner with constituent
		Diffier with Constituent
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	xpenditure to benefit C/OI	
_		
	ate	Payee name
	6/03/2025	HOME SLICE PIZZA
A	mount (\$)	Payee address; City; State; Zip Code
	\$128.53	1415 S CONGRESS
		AUSTIN, TX 78704
	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
		Dinner for staff
	Complete ONLY if direct	Condidate/Officeholder name Office cought
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OI	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 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 complete this fo	orm.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 31/55 Rpt: 35/61	Toth, Steven H. (The Honorable)	00067717
4	Date	5 Payee name	
	06/06/2025	Harris County GOP	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,200.00	8588 Katy Fwy	
		Spring Valley Village, TX 77024	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	otion
	OF EXPENDITURE	1665	k if travel outside of Texas. Complete Schedule T.
		l	k if Austin, TX, officeholder living expense n Reagan dinner tickets
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
_	Date	Payee name	
	01/15/2025	Jason's Deli	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$223.29	9600 I 35 South	
	,		
		Austin , TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	ntion
	OF		k if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Chec	k if Austin, TX, officeholder living expense
		Lunch	for staff and constituents
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	01/06/2025	Kingwood Tea Party	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.00	2261 Northpark Dr	
		Kingwood, TX 77339	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	
	EXPENDITURE	Continuations/Donations Wade By	k if travel outside of Texas. Complete Schedule T. k if Austin, TX, officeholder living expense
		Contrib	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
1			

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	
Ļ		<u> </u>
1	Total pages Schedule F1: Sch: 32/55 Rpt: 36/61	2 FILER NAME Toth, Steven H. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067717
4	Date	5 Payee name
	04/08/2025	Lake Conroe Chamber of Commerce
6	Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 505 105 E Conroe , TX 77301
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ľ	OF	(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.
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Sponsor Austin event
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/08/2025	Law Offices of Kevin Stewart
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	6801 Yaupon Drive
		Austin, TX 78759
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		auditing of Texas Ethics reports
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/16/2025	Love Heals Youth
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	212 Conroe Drive
		Conroe, TX 77301
	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
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

Vertising Expense Event Expense Loan Repayment/Reimbur

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

Fees Office C
Food/Beverage Expense Polling I
Gift/Awards/Memorials Expense Printing
Legal Services Salaries

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

Contributions/ Donations Made By - Candidate/Officeholder/Political (Credit Card Payment	Gift/Awards/Memorials Expense Printing Expense Travel Out of District 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	
Sch: 33/55 Rpt: 37/61	Toth, Steven H. (The Honorable) 00067717
4 Date	5 Payee name
01/08/2025	MARRIOTT PARKING GARAGE
6 Amount (\$) \$46.98	7 Payee address; City; State; Zip Code 1601 LAKE ROBBINS
Ţ 10.00	
	THE WOODLANDS, TX 77380
8 PURPOSE ((a) Category (See Categories listed at the top of this schedule)
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Parking
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OH	
Date	Payee name
06/25/2025	MARRIOTT PARKING GARAGE
Amount (\$)	Payee address; City; State; Zip Code
\$10.00	1601 LAKE ROBBINS
	THE WOODLANDS, TX 77380
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 Parking
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OH	
Date	Payee name
01/08/2025	Madame Brioche Bistro
Amount (\$)	Payee address; City; State; Zip Code
\$40.56	2400 FM 1488
	Suite 10
	Conroe, TX 77384
PURPOSE ((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
	Breakfast with constituent
Complete ONLY 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

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	/ - Il Coi	mmittee	Gift/Awards/Mer Legal Services		Salari	_	ense ges/Contract Labor plete this form.		Travel Out o OTHER (en		rict category not listed above)
Ļ	-	<u> </u>		ine manucu	on Guide exp	nama muw lu	COM	piete tina IUIIII.	1-	- 4 /-		/EII.
1	Total pages Schedule F1:	2							3	Filer ID	_	(Ethics Commission Filers)
	Sch: 34/55 Rpt: 38/61		Toth, Stever	n H. (The H	onorable)					0006771	L /	
4	Date	5	Payee name									
	01/13/2025		Madame Bri	oche Bistro)							
6	Amount (\$)	7	Payee addres	s; City;	:	State; Zip	Code	е				
	\$45.95		2400 FM 14	188								
			Suite 10									
			Conroe, TX	77384								
8	PURPOSE	(a)				Maria and Control	1/1	Description				
ľ	OF	(۳)	Category _{(Se} Food/Bevera			tnis schedule)	,`		outs	ide of Texas. (Compl	lete Schedule T.
	EXPENDITURE		. Journeyer	Ago Experis	,,			Check if Austin				
								Breakfast wit	th c	onstituen	t	
9	Complete ONLY if direct		Candidate/Offic	eholder nar	ne	Office s	sough	nt		Office	e hel	ld
L	expenditure to benefit C/O	Η										
	Date		Payee name					-				
	01/13/2025		Madame Bri	oche Bistro)							
	Amount (\$)		Payee addres	s; City;		State; Zip	Code	е				
	\$65.13		2400 FM 14	188								
			Suite 10									
			Conroe, TX	77384								
_	PURPOSE	(a)	Category (Se		ad at the ten of	this cohedula	[(t	Description				
	OF	`¨	Food/Bevera			uns scriedule)	``		outs	ide of Texas. (Comp	lete Schedule T.
	EXPENDITURE		. 000,00000	-ac -vbcii				Check if Austin	n, TX	, officeholder I	iving e	expense
								Lunch with C	on	stituent		
L												
	Complete ONLY if direct		Candidate/Offic	eholder nan	ne	Office s	sough	nt		Office	e hel	ld
	expenditure to benefit C/OI	1										
	Date		Payee name									
	02/03/2025		Madame Bri	oche Bistro)							
	Amount (\$)		Payee addres	s; City;	:	State; Zip	Code	е				
	\$115.27		2400 FM 14	188								
			Suite 10									
			Conroe, TX	77384								
	PURPOSE	(a)	Category (Se		ed at the top of t	this schedule)	(k	Description				
	OF	`	Food/Bevera	-	•	ans soneuule)	`		outs	ide of Texas. (Comp	elete Schedule T.
	EXPENDITURE			J =P011				Check if Austin	n, TX	, officeholder I	iving e	expense
								Breakfast wit	th c	onstituen	t	
	Complete ONLY if direct		Candidate/Offic	eholder nan	ne	Office s	sough	nt		Office	e hel	ld
	expenditure to benefit C/OI	1										
					-							

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:)
	Sch: 35/55 Rpt: 39/61	Toth, Steven H. (The Honorable) 00067717	
4	Date	5 Payee name	
	02/18/2025	Madame Brioche Bistro	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$66.55	2400 FM 1488	
		Suite 10	
L		Conroe, TX 77384	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if top of Toy of Complete Schedule T	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		breakfast with constituents	
L			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	02/24/2025	Madame Brioche Bistro	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$23.79	2400 FM 1488	
		Suite 10	
		Conroe, TX 77384	
	PURPOSE OF	(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	
		Breakfast with constituent	
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	03/17/2025	Madame Brioche Bistro	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$222.88	2400 FM 1488	
		Suite 10	
		Conroe, TX 77384	
	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	
		Breakfast meeting Q & A for constituents	
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held H	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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	/ - ıl Coı		Gift/Awards/Memori Legal Services	·		/ages	/Contract Labor		Travel Out of OTHER (ente		ory not listed above)
_				The Instruction	Guiue expiains	HOW LO COL	iiibie	ic uns ioim.	1			
1	Total pages Schedule F1:	2							3	Filer ID	•	ics Commission Filers)
	Sch: 36/55 Rpt: 40/61		Foth, Steve	n H. (The Hor	orable)					0006771	1	
4	Date	5	Payee name					<u> </u>				
	03/24/2025		Madame Br	oche Bistro								
6	Amount (\$)	7	Payee addres	ss; City;	State	; Zip Co	de					
	\$47.98		2400 FM 14	188								
			Suite 10									
			Conroe, TX	77384								
8	PURPOSE	(2)	·				(h)	Description				
0	OF	الما		e Categories listed	at the top of this sch	nedule)	(D)	Check if travel	outsi	de of Texas. C	omplete S	chedule T.
	EXPENDITURE		i oou/bevel	age Expense				Check if Austin				
								Breakfast wit	h c	onstituent		
9	Complete ONLY if direct		Candidate/Offic	ceholder name	(Office sou	ght			Office	held	
L	expenditure to benefit C/O	Η										
	Date		Payee name									
	04/21/2025		Madame Br	oche Bistro								
	Amount (\$)		Payee addres	ss; City;	State	; Zip Co	de					
	\$367.67		2400 FM 14	188								
			Suite 10									
			Conroe, TX	77384								
\vdash	PURPOSE	(a)					(h)	Description				
	OF	(")		e Categories listed a	at the top of this sch	neaule)	(~)	Check if travel	outsi	de of Texas. C	omplete S	chedule T.
	EXPENDITURE		i oou/Devel	age Expense				Check if Austin				
								Breakfast me	etir	ng with co	nstitue	nts
L												
	Complete ONLY if direct		Candidate/Offic	eholder name	(Office sou	ght			Office	held	
	expenditure to benefit C/O	Η										
	Date		Payee name									
	01/30/2025		Mailchimp									
	Amount (\$)		Payee addres	ss; City;	State	; Zip Co	de					
	\$140.18		675 Ponce I									
			Atlanta, GA	30308								
	PURPOSE	(a)	Category (Se	e Categories listed a	at the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Office Overl	nead/Rental E	xpense			Check if travel				
								Campaign Er				
								Campaign El	ııal	เ อนมอนเป	uon se	IVICE
	Complete ONLY if direct	Ц,	Candidate/Offi	ceholder name		Office sou	abt			Office	hold	
	expenditure to benefit C/O		Canuluale/OIII	choluel Hallie	,	Onice Soul	yııl			Office	HEIU	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 37/55 Rpt: 41/61	Toth, Steven H. (The Honorable) 00067717
4 Date	5 Payee name
02/06/2025	Mailchimp
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$140.18	675 Ponce De Leon
	Atlanta, GA 30308
8 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
	Campaign monthly email service provider
	Campaign monthly chian service provider
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
5 .	Г
Date	Payee name
03/06/2025	Mailchimp
Amount (\$)	Payee address; City; State; Zip Code
\$140.18	675 Ponce De Leon
	Atlanta, GA 30308
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
	Campaign monthly email service
	Campaign monthly email service
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
04/07/2025	Mailchimp
Amount (\$)	Payee address; City; State; Zip Code
\$140.18	675 Ponce De Leon
	Atlanta, GA 30308
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.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Campaign material storage
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to benefit even	··

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/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 38/55 Rpt: 42/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	05/06/2025	Mailchimp
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$140.18	675 Ponce De Leon
		Atlanta, GA 30308
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 email service provider
		Campaign oman corvice provider
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/21/2025	Montgomery County Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$86.10	PO Box 1766
	700.20	. 6 <u>- 5 </u>
		Conroe, TX 77305
	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
		Lunch for staff
	Operation ONLY if disease	Open Helder (Office helder manner)
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name Montgomony County Popublican Woman
	02/20/2025	Montgomery County Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$33.01	PO Box 1766
		Convey TV 7720F
		Conroe, TX 77305
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Monthly luncheon
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
_		

SCHEDULE F1

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

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

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: 39/55 Rpt: 43/61	Toth, Steven H. (The Honorable) 00067717
4 Date	5 Payee name
03/24/2025	Montgomery County Republican Women
6 Amount (\$) \$66.02	7 Payee address; City; State; Zip Code PO Box 1766 Conroe, TX 77305
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 Monthly luncheon for staff
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
05/23/2025	Montgomery County Republican Women
Amount (\$) \$63.00	Payee address; City; State; Zip Code PO Box 1766 Conroe, TX 77305
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense Monthly event with staff
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
06/23/2025	Montgomery County Republican Women
Amount (\$) \$99.03	Payee address; City; State; Zip Code PO Box 1766
	Conroe, TX 77305
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 Monthly lunch with staff
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)

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: 40/55 Rpt: 44/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	06/27/2025	Montgomery County Republican Women
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$31.25	PO Box 1766
		Conroe, TX 77305
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.
		Check if Austin, TX, officeholder living expense Monthly Luncheon for staff
		Monthly Europeon for Stan
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Date	Davies same
		Payee name
	01/07/2025	Olive Garden
	Amount (\$)	Payee address; City; State; Zip Code
	\$105.61	26715 I-45
		Spring, TX 77380
	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 Thank you lunch for Donor team
		Thank you fuller for Bollot team
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date	Payee name
	02/12/2025	Papa Johns Pizza Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$94.11	2030 E. Oltorf St,
		Austin, TX 78741
	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 Dinner for staff
		Diffici for stall
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Finding Expense
Salaries/Mangs/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:	<u> </u>
	Sch: 41/55 Rpt: 45/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	03/19/2025	Parking Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15.00	823 S Congress
		Austin, TX 78751
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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Parking Parking
_		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/25/2025	Pit Masters
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.84	343 Sawdust Rd
		Spring, TX 77380
	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
		Lunch with constituent
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	<u> </u>	_
	Date	Payee name
	01/29/2025	ROARING FORK
	Amount (\$)	Payee address; City; State; Zip Code
	\$84.28	701 NORTH CONGRESS AVE
		AUSTIN, TX 78752
	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
		Dinner with Constituent
	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 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 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	3)
	Sch: 42/55 Rpt: 46/61	Toth, Steven H. (The Honorable) 00067717	
4	Date	5 Payee name	
	01/28/2025	Republican House Caucus PAC	
6	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 1400 Lavaca S Austin, TX 78701	
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 Membership fee	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	01/06/2025	Smart Stop Self Storage	
	Amount (\$) \$102.90	Payee address; City; State; Zip Code 3750 Farm to Market Rd 1488	
		Conroe, TX 77384	
	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 Storage of campaign materials	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	02/03/2025	Smart Stop Self Storage	
	Amount (\$) \$102.90	Payee address; City; State; Zip Code 3750 Farm to Market Rd 1488	
		Conroe, TX 77384	
	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 Campaign rental for materials	
	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)

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

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: 43/55 Rpt: 47/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	03/03/2025	Smart Stop Self Storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$102.90	3750 Farm to Market Rd 1488
		Conroe, TX 77384
8	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.
		Campaign materials storage
		Campaign materials storage
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash	Date	Payee name
	04/02/2025	Smart Stop Self Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$102.90	3750 Farm to Market Rd 1488
		Conroe, TX 77384
	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.
		Campaign material storage
		Campaign material storage
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davies same
	05/02/2025	Payee name
		Smart Stop Self Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$102.90	3750 Farm to Market Rd 1488
		Conroe, TX 77384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Compaign material storage
		Campaign material storage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

The straining Expense Event Expense Event Expense Loan Repayment/Reimbur Community Com

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 44/55 Rpt: 48/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	06/02/2025	Smart Stop Self Storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$102.90	3750 Farm to Market Rd 1488
		Conroe, TX 77384
8	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
		Campaign material storage
		Campaign material storage
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
	02/10/2025	Snarfs
⊢	Amount (\$)	Payee address; City; State; Zip Code
	\$49.48	1404 S 1st St
	φ-1010	1404 0 130 00
		Austin, TX 78704
	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 Lunch with staff
		Lunch with Stan
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	01/07/2025	TDCJ
H	Amount (\$)	Payee address; City; State; Zip Code
	\$2,649.96	8712 Shoal Creek Blvd
	Ψ2,040.00	6712 Global Greek Blyd
		Austin, TX 78757
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Contributions/Donations Made By
	LXI LINDITORL	Candidate/Officeholder/Political Committee
		Chairs for Love Heals Youth Gala
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
_		· · · · · · · · · · · · · · · · · · ·	
1	Total pages Schedule F1: Sch: 45/55 Rpt: 49/61	2 FILER NAME Toth, Steven H. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067717	s)
4	Date	5 Payee name	
•	05/02/2025	TDCJ	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,766.64	8712 Shoal Creek Blvd	
		Austin, TX 78757	
8	DUDDOCE		
O	PURPOSE OF	(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.	
	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	
		Chairs donated to Mighty Oaks gala	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	Н	
H	Date	Payee name	_
	05/02/2025	TDCJ	
	Amount (\$)		
	\$883.32	8712 Shoal Creek Blvd	
		Austin, TX 78757	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
	LAI LINDITORE	Candidate/Officeholder/Political Committee	
		Chair donated to Love Heals Youth	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experialitate to beliefit C/O	·	
	Date	Payee name	
	01/06/2025	TEZ Parking	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$16.80	1950 Hughes Landing	
		Spring Texas , TX 77380	
-	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	
		Parking	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	

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 E Candidate/Officeholder/Politic Credit Card Payment			
1	Total pages Schedule F1:		·)
Ĺ	Sch: 46/55 Rpt: 50/61	Toth, Steven H. (The Honorable)	,
4	Date	5 Payee name	
	01/13/2025	TEZ Parking	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$16.80	1950 Hughes Landing	
		Spring Toyos, TV 77290	
8	PURPOSE	Spring Texas , TX 77380 (a) Category (See Categories listed at the top of this schedule) (b) Description	
Ü	OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Parking	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	01/13/2025	TEZ Parking	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$16.80	1950 Hughes Landing	
		Spring Texas , TX 77380	
	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 Parking	
		T and g	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·	
H	Date	Pavee name	
	01/21/2025	THE WOODLANDS REPUBLICAN WOMEN	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$184.52	1212 LAKE ROBBINS DRIVE	
	Ψ104.32	TELE DIVICE HODDING DIVIVE	
		THE WOODLANDS, TX 77380	
	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	
		Monthly luncheon for staff	
		monenty terroritori ottain	
	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 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	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
L		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 47/55 Rpt: 51/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	03/17/2025	THE WOODLANDS REPUBLICAN WOMEN
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$82.00	1212 LAKE ROBBINS DRIVE
		THE WOODLANDS, TX 77380
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.
		Check if Austin, TX, officeholder living expense
		Monthly event fee for staff lunches
Ļ		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
		•
	Date	Payee name
	04/14/2025	THE WOODLANDS REPUBLICAN WOMEN
	Amount (\$)	Payee address; City; State; Zip Code
	\$92.26	1212 LAKE ROBBINS DRIVE
		THE WOODLANDS, TX 77380
	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
		Monthly luncheon for staff
		Monthly function for stan
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	•
	Date	Payee name
	05/19/2025	THE WOODLANDS REPUBLICAN WOMEN
\vdash		
	Amount (\$)	
	\$92.26	1212 LAKE ROBBINS DRIVE
		THE WOODLANDS, TX 77380
	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
		Monthly luncheon with staff
		ivioriting function with stan
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	•

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 Salaries (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.	OTTER (enter a category not isseet above)			
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	Filer ID (Ethics Commission Filers)			
_	Sch: 48/55 Rpt: 52/61		00067717			
4	Date	5 Payee name				
	01/15/2025	Taco Deli				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$99.07	301 Congress Ave				
		Austin, TX 78701				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	1 Course verage Expense	side of Texas. Complete Schedule T.			
		Dinner for staff	c, officeholder living expense			
		Diffici for staff				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
9	expenditure to benefit C/OI		Office field			
_	Data	T -				
	Date	Payee name				
	04/28/2025	Target.com				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$7.13	7000 Target Parkway				
		Brooklyn Park, MN 55428				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	T Office Overhead/Nertial Expense	side of Texas. Complete Schedule T.			
		Check if Austin, TX Paper for capito	K, officeholder living expense			
		ι αρει τοι εαριτο	on onice			
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/OI		Cinice field			
H	Data	T -				
	Date	Payee name Texas Chili Parlor				
	01/14/2025					
	Amount (\$)	Payee address; City; State; Zip Code				
	\$112.84	1409 Lavaca				
		Austin, TX 78701				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	1 Ood/Beverage Expense	side of Texas. Complete Schedule T.			
		Dinner for staff	K, officeholder living expense			
		Diffici for stall				
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/OI	•	Silice field			
l						

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: 49/55 Rpt: 53/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	03/04/2025	Texas Chili Parlor
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$52.95	1409 Lavaca
		Austin, TX 78701
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
		Dinner with staff
		Billion Wall Stall
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
F	Date	Payee name
	03/25/2025	Texas Chili Parlor
H	Amount (\$)	Payee address; City; State; Zip Code
	\$75.33	1409 Lavaca
		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.
		Check if Austin, TX, officeholder living expense Dinner with staff
		Diffici Wat Stati
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	04/08/2025	Texas Chili Parlor
H	Amount (\$)	Payee address; City; State; Zip Code
	\$85.91	1409 Lavaca
		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.
		Check if Austin, TX, officeholder living expense Dinner with staff
		Diffiel with staff
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

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 B Candidate/Officeholder/Politic Credit Card Payment			
1	Total pages Schedule F1:		_
	Sch: 50/55 Rpt: 54/61	Toth, Steven H. (The Honorable) 00067717	
4	Date	5 Payee name	
	06/17/2025	Texas Values Action	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$250.00	900 Congress Ave	
		Suite 220	
_	DUDDOG	Austin , TX 78701	
8	PURPOSE OF	(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.	
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
		Donation	
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	01/27/2025	The Woodlands Resort	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$56.00	2301 North Millbend Drive	
L		Spring, TX 77380	
	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	
		Dinner with constituent	
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	01/06/2025	Verizon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$141.47	1335 Lake Woodlands Dr	
		The Woodlands, TX 77380	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
		Check if Austin, TX, officeholder living expense Campaign phone monthly service	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/Oh		
			- 1

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 Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category and Find of a)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
_	Sch: 51/55 Rpt: 55/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	02/13/2025	Verizon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$297.70	1335 Lake Woodlands Dr
		The Woodlands, TX 77380
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign monthly cell service
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experientare to benefit G/O	<u>'</u>
	Date	Payee name
	04/14/2025	Verizon
	Amount (\$)	Payee address; City; State; Zip Code
	\$141.75	1335 Lake Woodlands Dr
		The Woodlands, TX 77380
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Campaign cellular service
		Campaign ceilulai service
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	y
	Date	Davida dama
	05/05/2025	Payee name Verizon
	Amount (\$)	Payee address; City; State; Zip Code
	\$148.74	1335 Lake Woodlands Dr
		The Woodlands, TX 77380
	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
		Campaign mobile phone service provider
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Filers)

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

ordan dara raymoni	The Instruction Guide explains how to co	mplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 53/55 Rpt: 57/61	Toth, Steven H. (The Honorable)		00067717	
4 Date	5 Payee name		•	
05/27/2025	WALMART			
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode		
\$17.93	1025 SAWDUST RD			
	CONROE, TX 77380			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Office Overhead/Rental Expense	ı <u>—</u>	avel outside of Texas. Com austin, TX, officeholder living	
		. —	thank you notes	
			•	•
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ıght	Office h	eld
expenditure to benefit C/O	H			
Date	Payee name			
05/23/2025	Webbs Uniforms			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$434.29	25275 Budde Rd			
	Spring, TX 77380			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	1	
OF EXPENDITURE	Advertising Expense		avel outside of Texas. Com austin, TX, officeholder living	
		Campaigr		g expense
Complete ONLY if direct	Candidate/Officeholder name Office sou	ıght	Office h	eld
expenditure to benefit C/O	H			
Date	Payee name			
02/18/2025	White Rose Resistance			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$72.10	1120 S. Rackham Way			
	Suite 300			
	Meridian, ID 83642			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Contributions/Donations Made By		avel outside of Texas. Com austin, TX, officeholder living	•
	Candidate/Officeholder/Political Committee		ontribution	g expense
Complete ONLY if direct	Candidate/Officeholder name Office sou	ı <u> </u>	Office h	eld
expenditure to benefit C/O	Н			

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	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)
L	Sch: 54/55 Rpt: 58/61	Toth, Steven H. (The Honorable) 00067717	
4	Date	5 Payee name	
	03/17/2025	White Rose Resistance	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$72.10	1120 S. Rackham Way	
		Suite 300	
		Meridian, ID 83642	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
	EXPENDITORE	Candidate/Officeholder/Political Committee	
		Monthly contribution	
_	Complete ONII V if allows:	Condidate/Officeholder name	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held Office held	
	Date	Payee name	
	04/17/2025	White Rose Resistance	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$72.10	1120 S. Rackham Way	
		Suite 300	
		Meridian, ID 83642	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
	ZA ZABITORZ	Candidate/Officeholder/Political Committee	
		Monthly contribution	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
	Date	Payee name	
	05/19/2025	White Rose Resistance	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$72.10	1120 S. Rackham Way	
		Suite 300	
		Meridian, ID 83642	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Conation	
		Donation	
	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

	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: 55/55 Rpt: 59/61	Toth, Steven H. (The Honorable) 00067717
4	Date	5 Payee name
	06/17/2025	White Rose Resistance
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$72.10	1120 S. Rackham Way
		Suite 300
		Meridian, ID 83642
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By
	EXPENDITURE	Candidate/Officeholder/Political Committee
		monthly donation
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/31/2025	WinRed
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1776 Wilson Blvd
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Suite 503
		Arlington, VA 22209
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Tot True Texas Troject
_	Complete ONLY if direct	Condidate/Officeholder name Office sought Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/09/2025	Woodsons
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.92	2330 FM 1488
		Conroe, TX 77384
	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 Lunch with constituent
		Eurion with constituent
	Operation Children	On didn't 10 ff a halden name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	onponditure to benefit 0/01	
1		

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

SCHEDULE K

	The Instruction Guide explains how to complete this form			ages Schedule K: ./2 Rpt: 60/61			
2						ilore)	
_	Toth, Steven H. (The Honorable)			3	00067	•	ileis)
_				00007			
4	Date	5	Name of person from whom amount is received			8 Amount (\$)	COE 00
	06/10/2025	ļ	Anchora Properties			\$1,	625.00
		6	Address of person from whom amount is received; City; State; Zip Code				
			Austin, TX 77477				
		Ļ					
		7		politi	cal conti	ribution returned to filer	
			Refund of security deposit				
	Date		Name of person from whom amount is received			Amount (\$)	
	06/24/2025		Simmons Bank				\$6.63
		ļ	Address of person from whom amount is received; City; State; Zip Code				
			Pine Bluff, AR 71611				
				fpoliti	cal conti	ribution returned to filer	
			Interest on deposit				
	Date		Name of person from whom amount is received			Amount (\$)	
	05/26/2025 Simmons Bank					\$13.08	
		ļ	Address of person from whom amount is received; City; State; Zip Code				
			Pine Bluff, AR 71611				
			Purpose for which amount is received	f politi	cal conti	ribution returned to filer	
			Interest deposit				
	Date		Name of person from whom amount is received			Amount (\$)	
	04/24/2025		Simmons Bank				\$13.67
		ļ	Address of person from whom amount is received; City; State; Zip Code				
			Pine Bluff, AR 71611				
			Purpose for which amount is received	politi	cal conti	ribution returned to filer	
			Interest Deposit				
	Date		Name of person from whom amount is received			Amount (\$)	
	03/24/2025		Simmons Bank				\$13.45
	Address of person from whom amount is received; City; State; Zip Code						
	radioce of potential animal animal of the control o						
			Pine Bluff, AR 71611				
		Г	Purpose for which amount is received	f politi	cal conti	ribution returned to filer	
Interest Deposit							

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

SCHEDULE K

_							
The Instruction Guide explains how to complete this form.						pages Schedule K: 2/2 Rpt: 61/61	
2	FILER NAME			3	Filer II	C (Ethics Commission F	-ilers)
	Toth, Steven H. (The Honorable)				0006	7717	
4	Date	5	Name of person from whom amount is received	<u> </u>		8 Amount (\$)	
	02/24/2025	ľ	Simmons Bank			(+)	\$14.88
	02/2 1/2020		Address of person from whom amount is received; City; State; Zip Code				+-0
		ľ	Address of person from whom amount is received, City, State, Zip Code				
			Pine Bluff, AR 71611				
		7		- 1141			
		 ′	<u> </u>	OIITIO	cai con	ribution returned to filer	
L		<u> </u>	Interest Deposit				
	Date		Name of person from whom amount is received			Amount (\$)	
	02/26/2025		Simmons Bank				\$18.69
		ļ	Address of person from whom amount is received; City; State; Zip Code				
			Pine Bluff, AR 71611				
			Purpose for which amount is received	olitio	cal con	ribution returned to filer	
			Interest Deposit				
H	Date		Name of person from whom amount is received			Amount (\$)	
	01/10/2025		United Airlines				\$328.48
	01/10/2023	ļ					p320.40
		Address of person from whom amount is received; City; State; Zip Code					
			Chicago , IL 06649				
						ribution returned to filer	
		Purpose for which amount is received					
⊨							
	Date		Name of person from whom amount is received	ved .			
	01/10/2025	<u> </u>	United Airlines]	\$414.62
	Address of person from whom amount is received; City; State; Zip Code						
			Chicago , IL 06649				
			Purpose for which amount is received	olitio	cal con	ribution returned to filer	
			Travel reimbursement for travel problems with Republican convention				