#### FORM C/OH CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 59 00067800 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Trenton E. NAME Date Received **ELECTRONICALLY FILED** 07/15/2025 NICKNAME LAST **SUFFIX** Trent Ashby CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** P.O. Box 412 MAILING Amount Receipt # **ADDRESS** Change of Address Lufkin, TX 75902 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. David NAME NICKNAME LAST **SUFFIX** Perkins **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER** 1809 Columbine **ADDRESS** (Residence or Business) Lufkin, TX 75904 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (936) 635-0659 **PHONE** REPORT **TYPE** January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR) July 15 8th day before election Exceeded modified Х

Month

Month

Day

Day

03/02/2027

OFFICE HELD (if any)

**ELECTION DATE** 

State Representative District 9

01/01/2025

**PERIOD** 

10 ELECTION

11 OFFICE

**COVERED** 

**THROUGH** 

χ Primary

General

Year

Year

reporting limit

Month

**ELECTION TYPE** 

Runoff

Special

Day

06/30/2025

12 OFFICE SOUGHT (if known)

State Senator District 3

Year

Other

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM C/OH COVER SHEET PG 2

2 of 59

13 C / OH NAME	Ashby, Trenton E. (T	ne Honorable)	14 Filer ID ( 00067800	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expen These expenditures may have been made witho officeholders are required to report this informa	ut the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
Ш	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME	<u> </u>	
		COMMITTEE CAMPAIGN TREASURER ADDR	ESS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER T ES OF LOANS, OR CONTRIBUTIONS MADE E		\$ 0.00
	2. <b>TOTAL POLITIC</b> (OTHER THAN F	NS)	\$ 9,400.00	
EXPENDITURE TOTALS	3. TOTAL UNITEM		<b>\$</b> 5,134.10	
		<b>\$</b> 136,522.18		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THI RIOD	LAST DAY OF THE	<b>\$</b> 1,080,147.83
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS . TING PERIOD	AS OF THE LAST DAY	\$ 0.00
<b>17</b> AFFIDAVIT		I swear, or affirm, under pen true and correct and include under Title 15, Election Cod	s all information required to	
		The Ho	norable Trenton E. Ash	by
		Signature	of Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL AB	DVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
of	, 20, to ce	rtify which, witness my hand and seal of office.		
Signature of office	er administering	Printed name of officer administering	Title of officer	administering oath

# **SUBTOTALS - C/OH**

# FORM COH **COVER SHEET PG 3**

				3 of 59				
<b>18</b> FILER NAME Ashby, Trentor	<b>19</b> Filer ID 00067800	(Ethics Comm	ission Filers)					
20 SCHEDULE SUI	0 SCHEDULE SUBTOTALS  NAME OF SCHEDULE							
1. X SCH	\$	8,900.00						
2. X SCF	HEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	500.00				
3. SCH	HEDULE B: PLEDGED CONTRIBUTIONS		\$					
4. SCH	HEDULE E: LOANS		\$					
5. X SC	HEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	132,480.64				
6. SCF	HEDULE F2: UNPAID INCURRED OBLIGATIONS		\$					
7. X SCH	HEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	250,000.00				
8. X SCH	HEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	3,603.63				
9. X SC	HEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	437.91				
10. SCH	HEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$					
11. SCF	HEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$					
	HEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F FILER	RETURNED	\$	20,549.71				
			-					

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/59	
2	FILER NAME Ashby, Trent	ton E. (The Honorable)		3	Filer ID (Ethics Commission 00067800	on Filers)
4	Date 06/24/2025			7	Amount of Contribution (\$)	\$300.00
_	Tuscola, TX 79562					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date Full name of contributor out-of-state PAC (ID#:) Curbow, Kelly (Mr.)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00	
Dringinal occu		San Marcos, TX 78666 pation / Job title (See Instructions)	<u> </u>			
	i illicipai occa	pation 7 vob title (oce monucions)	Employer (See Instructions	,		
	Date Full name of contributor out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$5,000.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
Date 06/25/2025		Full name of contributor out-of-state PAC (ID#:_Kirby, Chris (Mr.)  Contributor address; City; State; Zip Code  Austin, TX 78729	)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/25/2025	Full name of contributor out-of-state PAC (ID#:_Lilly, Susan (Ms.)  Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/59	
2	FILER NAME Ashby, Tren	ton E. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00067800	
4	Date  5 Full name of contributor out-of-state PAC (ID#:)  Rogers, Jeff (Mr.)  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$200.00		
	Orange, TX 77630					
8	Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)		5)			
	Date Full name of contributor out-of-state PAC (ID#:)  O6/24/2025 Sanders, Jenny (Ms.)  Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$100.00	
	Dringing agg	Apple Springs, TX 75926	<u></u>			
	Principal occi	pation / Job title (See Instructions)	Employer (See Instructions	·)		
Date Full name of contributor out-of-state PAC (ID#:_ 06/24/2025 Skaggs, Jason (Mr.)  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$) \$1,500.00		
		Fort Worth, TX 76132				
	Principal occu CEO	ipation / Job title (See Instructions)	Employer (See Instructions TSCRA	5)		
	Date  O6/24/2025  Stone, Todd (Mr.)  Contributor address; City; State; Zip Code  Lovelady, TX 75851				Amount of Contribution (\$) \$50.00	
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	SCHEDULE A2	
The Instruction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/1 Rpt: 6/59	
2 FILER NAME Ashby, Trenton E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067800	
TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIB	\$	
5 Date 6 Full name of contributor out-of-state PAC (ID#:	nd	8 Amount of contribution (\$) In-kind contribution (\$) description \$500.00   Campaign Digital Advertising
Austin, TX 78701		Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

### 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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/42 Rpt: 7/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date	5 Payee name
	01/06/2025	404 Rio Grande Apartments
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,483.57	404 Rio Grande
	I	
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  X Check if Austin, TX, officeholder living expense
	l	Rent for political apartment maintained in Austin
	I	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	02/04/2025	404 Rio Grande Apartments
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,487.97	404 Rio Grande
	ψο, ποι ισι	404 Mio Grando
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	1	\times \text{Check if Austin, TX, officeholder living expense}}  Rent for political apartment maintained in Austin
	I	Transfer pointed apartment managers and access
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	03/04/2025	404 Rio Grande Apartments
	Amount (\$) \$3,498.07	Payee address; City; State; Zip Code  404 Rio Grande
	Φ3, <del>43</del> 0.07	404 RIO Granue
	1	Austin, TX 78701
	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	X Check if Austin, TX, officeholder living expense
	l	Rent for political apartment maintained in Austin
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<u> </u>

#### 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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (orders a contens) and listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 2/42 Rpt: 8/59	2 FILER NAME Ashby, Trenton E. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067800
4 Date	
04/04/2025	5 Payee name 404 Rio Grande Apartments
<b>6</b> Amount (\$) \$3,513.53	7 Payee address; City; State; Zip Code 404 Rio Grande  Austin, TX 78701
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Rent for political apartment maintained in Austin
O Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
05/05/2025	404 Rio Grande Apartments
Amount (\$) \$3,501.64	Payee address; City; State; Zip Code 404 Rio Grande
	Austin, TX 78701
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Taxon Complete Schedule T
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  X Check if Austin, TX, officeholder living expense
	Rent for political apartment maintained in Austin
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/04/2025	404 Rio Grande Apartments
Amount (\$)	Payee address; City; State; Zip Code
\$3,525.61	404 Rio Grande
	Austin, TX 78701
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.    X   Check if Austin, TX, officeholder living expense
	Rent for political apartment maintained in Austin
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (E	thics Commission Filers)
Sch: 3/42 Rpt: 9/59	Ashby, Trenton E. (The Honorable)		00067800	
4 Date	5 Payee name			
01/03/2025	AAA Self Storage			
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode		
\$163.50	120 Whitehouse Drive			
	Lufkin, TX 75901			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Fees		outside of Texas. Complete	Schedule T.
EXPENDITORE		. —	, TX, officeholder living exp	
		Campaign sto	orage building ren	I
Complete ONLY if direct	Condidate/Officeholder name Office see	laht.	Office hold	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	igill	Office held	
Dette	T _			
Date	Payee name			
02/03/2025	AAA Self Storage			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$163.50	120 Whitehouse Drive			
	Lufkin, TX 75901			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Fees		outside of Texas. Complete , TX, officeholder living exp	
		. —	orage building ren	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ıght	Office held	
expenditure to benefit C/O	Н			
Date	Payee name			
03/03/2025	AAA Self Storage			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$227.00	120 Whitehouse Drive			
	Lufkin, TX 75901			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF	Fees (See Categories listed at the top of this schedule)	l <u>—</u>	outside of Texas. Complete	e Schedule T.
EXPENDITURE			, TX, officeholder living exp	
		Campaign sto	orage building ren	t
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ight	Office held	
- SAPORGILLIO TO DOTIONE O/O	•			

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/42 Rpt: 10/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date	5 Payee name
	04/02/2025	AAA Self Storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$227.00	120 Whitehouse Drive
		Lufkin, TX 75901
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign storage building rent
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	05/02/2025	AAA Self Storage
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$227.00	120 Whitehouse Drive
	Ψ221.00	120 Willefloude Brive
		Lufkin, TX 75901
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign storage building rent
		Campaign storage building rent
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	06/02/2025	AAA Self Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$227.00	120 Whitehouse Drive
		Lufkin, TX 75901
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign storage building rent
		Campaign storage ballating rent
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
$\vdash$		

### SCHEDULE F1

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

	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: 5/42 Rpt: 11/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date	5 Payee name
	06/24/2025	Anedot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$148.66	1340 Poydras Street
		Ste. 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Online contribution processing fees (6/24/2025 -
		6/27/2025)
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/21/2025	Angelina Arts Alliance
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,100.00	3500 South First Street
		Lufkin, TX 75901
	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
		Shahasis ushalish
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
	Date	Payee name
	05/08/2025	Angelina Benefit Rodeo
	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	PO Box 161
		Lufkin, TX 75902
	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
		Political advertising - rodeo program
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
1		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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			Gift/Awards/Memorials Legal Services	Expense	Salaries/V		se s/Contract Labor		OTHER (enter	a category not listed	d above)
	Credit Card Payment		The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Comm	nission Filers)
	Sch: 6/42 Rpt: 12/59		Ashby, Tren	ton E. (The Ho	norable)					00067800		
4	Date	5	Payee name									
	05/08/2025		Angelina Co	unty Fair								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$6,650.00		1615 South	Chestnut Stree	et							
			Lufkin, TX 7	5901								
8	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE	` `		s/Donations M		cudicy			outsi	de of Texas. Co	mplete Schedule T.	
	EXPENDITORE		Candidate/C	Officeholder/Pol	itical Comm	ittee		$\Box$		officeholder livi		
								Charitable do	na	tion - anima	al sponsorshi <sub>l</sub>	ps
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	ceholder name	C	Office sou	ght			Office I	neld	
		_										
	Date		Payee name									
	04/07/2025		Angelina Co	unty Fair								
	Amount (\$)		Payee addres		•	Zip Co	de					
	\$937.50		1615 South	Chestnut Stree	et							
			Lufkin, TX 7	5901								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE			s/Donations M	,			<b>=</b>			mplete Schedule T.	
			Candidate/C	Officeholder/Pol	itical Comm	ittee		Charitable do		officeholder livi		ns
								Chantable de	, i i ca	don annin	ai sporisorsiii	ρ5
	Complete ONLY if direct		Candidate/Offic	ceholder name		Office sou	aht			Office I	neld	
	expenditure to benefit C/OI						5					
_	Date		Payee name									
	01/16/2025		Apple									
_	Amount (\$)		Payee addres	ss; City;	State:	Zip Co	nde					
	\$572.64		One Apple F	-	State,	21p CC	uc					
	Ψ012.04		One Apple 1	an way								
			Cupertino, C	°A 05014								
	DUDDOCE	(2)	-				/l=\	5				
	PURPOSE OF	(a)		e Categories listed at		edule)	(a)	Description  Check if travel	outsi	de of Texas. Co	mplete Schedule T.	
	EXPENDITURE		Office Over	nead/Rental Ex	pense					officeholder livi		
								Computer eq	uip	ment for ca	ampaign office	9
	Complete ONLY if direct		Candidate/Offic	ceholder name	C	Office sou	ght			Office I	neld	
L	expenditure to benefit C/O	H					_		_			

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
_	Sch: 7/42 Rpt: 13/59	Ashby, Trenton E. (The Honorable)	
4	Date	5 Payee name	
	01/06/2025	Ashby, Trent (Mr.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code PO Box 412	
	\$1,482.04	PO BOX 412	
		Lufkin, TX 75902	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Political mileage. Log maintained in the campaign office (2212m*.67).Not reimbursed by the state.	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
⊨	Date	Douge name	_
	01/03/2025	Payee name Assurant Specialty Property	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$242.00	11222 Quail Roost Drive	
		Miami, FL 33157	
	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.	
		\times \text{Check if Austin, TX, officeholder living expense} \text{Renters insurance for political apartment maintaine}	٦
		in Austin	u
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	05/30/2025	Brady, James	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4,000.00	3223 23rd Street	
		Lubbock, TX 79410	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Salaries/Wages/Contract Labor	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Legislative contract labor	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Printing Expense Salaries/Wages/Contract Labor Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 8/42 Rpt: 14/59 Ashby, Trenton E. (The Honorable) 00067800 4 Date Payee name 02/03/2025 Catalyst Advisors Group 6 Amount (\$) Payee address; State; Zip Code \$4,750.00 1108 Lavaca Street Ste. 110-506 Austin, TX 78701 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Digital media production and political advertising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/03/2025 Catalyst Advisors Group Amount (\$) Payee address; City; State; Zip Code \$1,500.00 1108 Lavaca Street Ste. 110-506 Austin, TX 78701 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Digital media production and political advertising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/04/2025 Catalyst Advisors Group Amount (\$) Payee address: City: State; Zip Code \$1,500.00 1108 Lavaca Street Ste. 110-506 Austin, TX 78701 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Advertising Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Digital media production and political advertising 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 Contributions/ Donations Made By -Candidate/Officeholder/Political Cor Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
⊢		-	
1	Total pages Schedule F1: Sch: 9/42 Rpt: 15/59	2 FILER NAME Ashby, Trenton E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067800
4	Date	5 Payee name	
	05/08/2025	Catalyst Advisors Group	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,500.00	1108 Lavaca Street	
		Ste. 110-506	
		Austin, TX 78701	
Ļ	DUDDOCE		
8	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	Advertising Expense	, TX, officeholder living expense
		l —	production and political advertising
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
Г	Date	Payee name	
	06/01/2025	Catalyst Advisors Group	
Н	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,500.00	1108 Lavaca Street	
	, ,	Ste. 110-506	
L		Austin, TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	/ tavertising Expense	outside of Texas. Complete Schedule T. , TX, officeholder living expense
		l	production and political advertising
		2.g	production and political during
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
F	Date	Payee name	
	04/04/2025	Catalyst Advisors Group	
H	Amount (\$)	Payee address; City; State; Zip Code	
	\$460.80	1108 Lavaca Street	
		Ste. 110-506	
		Austin, TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Navertising Expense   L	outside of Texas. Complete Schedule T. , TX, officeholder living expense
			ebsite annual hosting fee
		Sampaign we	
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		555514
$\vdash$			
L			

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services  The Instruction Guide	Salaries	Wages	s/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAMI	Ē				3	Filer ID	(Ethics Commission Filers)
	Sch: 10/42 Rpt: 16/59	Ashby, Tre	nton E. (The Honora	able)				00067800	
4	Date	5 Payee name							
	06/30/2025	Catalyst Ac	lvisors Group						
6	Amount (\$)	<b>7</b> Payee addre	ss; City;	State; Zip C	ode				
	\$1,500.00	1108 Lavad	a Street						
		Ste. 110-50	06						
		Austin, TX	78701						
8	PURPOSE	(a) Category (S	ee Categories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE	Advertising	Expense					de of Texas. Com officeholder living	plete Schedule T.
						<b>—</b>			d political advertising
						Digital inoula	P. V	Jaaolion and	a pontion davortioning
9	Complete ONLY if direct		iceholder name	Office so	ught			Office he	eld
	expenditure to benefit C/OI	1							
	Date	Payee name					_		
	06/30/2025	Catalyst Ac	lvisors Group						
	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode				
	\$5,256.24	1108 Lava	a Street						
		Ste. 110-50	06						
		Austin, TX	78701						
	PURPOSE	(a) Category (S	ee Categories listed at the top	o of this schedule)	(b)	Description			
	OF EXPENDITURE	Advertising	Expense						plete Schedule T.
						_		officeholder living	onic messaging
						1 Onlical adve	ıus	ing - cicciro	mic messaging
	Complete ONLY if direct		iceholder name	Office so	ught			Office he	eld
	expenditure to benefit C/OI	<b>-</b>							
	Date	Payee name							
	01/07/2025	City of Aus	tin Utilities		_				
	Amount (\$)	Payee addre	-	State; Zip C	ode				
	\$76.46	PO Box 22	67						
		Austin, TX	78783-2267		,				
	PURPOSE OF	(a) Category (S	ee Categories listed at the top	o of this schedule)	(b)	Description			
	EXPENDITURE	Fees							plete Schedule T.
						_		officeholder living	nt maintained in Austin
						Summos for pe		cai apai tiiloi	
	Complete ONLY if direct		iceholder name	Office so	ught			Office he	eld
	expenditure to benefit C/OI	H							

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/42 Rpt: 17/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date	5 Payee name
	02/11/2025	City of Austin Utilities
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$119.50	PO Box 2267
		A .:: TV TOTO 0007
L		Austin, TX 78783-2267
8	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.    X   Check if Austin, TX, officeholder living expense
		Utilities for political apartment maintained in Austin
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientare to benefit 6/61	·
	Date	Payee name
	03/11/2025	City of Austin Utilities
	Amount (\$)	Payee address; City; State; Zip Code
	\$154.75	PO Box 2267
		A . ('. TV 70700 0007
		Austin, TX 78783-2267
	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 1.   X   Check if Austin, TX, officeholder living expense
		Utilities for political apartment maintained in Austin
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Dete	
	Date 04/08/2025	Payee name City of Austin Utilities
		-
	Amount (\$) \$118.29	Payee address; City; State; Zip Code PO Box 2267
	Ψ110.23	1 O BOX 2201
		Austin, TX 78783-2267
	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.  X Check if Austin, TX, officeholder living expense
		Utilities for political apartment maintained in Austin
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	onponditure to beliefft G/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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Cor	mmittee	Legal Service				/ages	/Contract Labor		Travel Out OTHER (e		strict category not listed above)
		_			iction Guid	e expiains	HOW TO CO	inple	ete this form.	_			
1	Total pages Schedule F1:	2								3			(Ethics Commission Filers)
	Sch: 12/42 Rpt: 18/59		Ashby, Trer	nton E. (1	he Hono	rable)					000678	800	
4	Date	5	Payee name										
L	05/09/2025	L	City of Aust	in Utilitie	S								
6	Amount (\$)	7	Payee addre	ss; Ci	ty;	State	; Zip Co	de					
	\$107.20		PO Box 226	67									
			Austin, TX	78783-22	:67								
8	PURPOSE	(a)	Category (S	ee Categories	s listed at the	top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Fees						=				plete Schedule T.
									X Check if Austin				
									ounces for po	JIIII	cai apan	uner	nt maintained in Austin
L													
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder ı	name	C	Office sou	ght			Offic	ce he	eld
	Date		Payee name										
	06/09/2025		City of Aust	in Utilitie	S								
	Amount (\$)		Payee addre	ss; Ci	ty;	State;	; Zip Co	de					
	\$124.05		PO Box 226	67									
			Austin, TX	78783-22	:67								
	PURPOSE OF	(a)	Category (S	ee Categories	s listed at the	top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Fees						=				plete Schedule T.
									_				nt maintained in Austin
									ounties for po	JIILI	cui apai	unci	it maintained in Austill
$\vdash$	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder i	name	(	Office sou	aht			Offic	ce he	eld
	expenditure to benefit C/OI		Carialadio OIII	Jonoldol I	·ano		J.1100 000	ar			Oille		
$\vdash$	Date	Г	Doves non-										
	Date		Payee name	angler Dh	otograph	nie Decier	,						
	04/10/2025		Clayton Spa										
	Amount (\$)		Payee addre	•	ty;	State;	; Zip Co	de					
	\$429.00		235 Point L	ick Drive									
		L	Charleston,	WV 253	06								
	PURPOSE	(a)	Category (S				edule)	(b)	Description				
	OF EXPENDITURE		Office Over	head/Re	ntal Expe	nse			ш				plete Schedule T.
									Check if Austin				e for capitol office decor
									FIIULU UI LIIE (	บฮเ	ii Legisla	aluit	tor capitor office decor
	Complete ONLY if direct	Ц,	Candidate/Offi	ceholdor :	name		Office sou	aht			Offic	ce he	ald
	expenditure to benefit C/OI		Januluale/OIII	cenoluel l	iaiiie		JIIICE SUU	yııı			Oili	JE IIE	สน

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Expense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/42 Rpt: 19/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date	5 Payee name
	03/02/2025	Constant Contact
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$121.85	1601 Trapelo Road
		Waltham, MA 02451
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 email distribution service
		Sampaign on an alean active
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	04/04/2025	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$121.85	1601 Trapelo Road
		Waltham, MA 02451
	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 email distribution service
		Sampaign on an alean sea nee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	05/08/2025	Payee name  Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$121.85	1601 Trapelo Road
		Waltham, MA 02451
	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 email distribution service
	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
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

/Reimbursement
Rental Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
Ontract Labor

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

06/01/2025 Constant Contact  6 Amount (\$)  \$121.85  7 Payee address; City; State; Zip Code 1601 Trapelo Road  Waltham, MA 02451		Credit Card Payment	The Instruction Guide explains how to com	plet	te this form.		
4 Date 08/07/2025 5 Payee and Contact Constant Contact 5 Amount (\$) 5 121.85 7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451 8 PURPOSE OF EXPENDITURE  (a) Category (See Categories loaded at the top of this schedule) Office Overhead/Rental Expense  Date 02/03/2025 Candidate/Officeholder name 02/03/2025 Constant Contact Amount (\$) Purpose (a) Category (See Categories loaded at the top of this schedule) Office Sought Office beld  Date 02/03/2025 Constant Contact Amount (\$) Purpose (a) Category (See Categories loaded at the top of this schedule) Office Overhead/Rental Expense  Office Overhead/Rental Expense  Campaign email distribution service  Date 06/07 Office Overhead/Rental Expense  Complete QNLY if direct expenditure to benefit C/OH  Date 06/30/2025 Complete QNLY if direct expenditure to benefit C/OH  Date 06/30/2025 Constant Contact  Amount (\$) Payee name 06/30/2025 Constant Contact  Amount (\$) Payee address; City; State; Zip Code  Complete QNLY if direct expenditure to benefit C/OH  Date 06/30/2025 Constant Contact  Amount (\$) Payee address; City; State; Zip Code  Constant Contact  Complete QNLY if direct Constant Contact  Amount (\$) Payee address; City; State; Zip Code  Constant Contact  Confice Overhead/Rental Expense  (b) Description  Office held  Waltham, MA 02451  PURPOSE OF EXPENDITURE  (a) Category (See Categories issed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Office Areas IX, Indicated of Texas, Complete Schedule IX, Conficer Areas IX, Indicated of Texas, Complete Schedule IX, Conficer Areas IX, IX, Indicated free prepares Categories Schedule IX, IX, INdicated free prepares Categories IX, IX, INDicated free IX, IX, IX, INDICATED IX	1	Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
Constant Contact  7 Payee address; City; State; Zip Code  8 PURPOSE Office Overhead/Rental Expense  9 Complete QNLY if direct expenditure to benefit C/OH  Date		Sch: 14/42 Rpt: 20/59	Ashby, Trenton E. (The Honorable)			00067800	
Constant Contact  7 Payee address; City; State; Zip Code  8 PURPOSE Office Overhead/Rental Expense  9 Complete QNLY if direct expenditure to benefit C/OH  Date	4	Date	5 Payee name		<u> </u>		
Size		06/01/2025					
Waitham, MA 02451  8  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if award outside of Texas. Complete Schedule T. Check if Austin, T.X. officiohober himing opporase Campaign email distribution service  9  Complete ONLY if direct expenditure to benefit C/OH  Date O2/03/2025  Amount (\$) Payee name C2/03/2025  Constant Contact  Amount (\$) PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if Texas Complete Schedule T. Check if Austin, TX, officeholder living opporate Campaign email distribution service  Complete ONLY if direct expenditure to benefit C/OH  Date O6/30/2025  Constant Contact  Amount (\$) Payee name Constant Contact  Amount (\$) Payee name Constant Contact  Amount (\$) Payee address; City; State; Zip Code  Office North and Contact  Amount (\$)  Date O6/30/2025  Constant Contact  Amount (\$) Payee address; City; State; Zip Code  O6/30/2025  O7 EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Office North and the Contact  O7 EXPENDITURE  (b) Description Office held  Description Office held  Date O6/30/2025  O7 EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Office Verhead/Rental Expense  (b) Description Office North if avail outside of Texas. Complete Schedule T. Carter of Austin, TX, officeholder Schedule T. Carter of Austin, TX, officeholder of Texas. Complete Schedule T. Carter of Austin, TX, officeholder of Texas. Complete Schedule T. Carter of Austin, TX, officeholder of Texas. Complete Schedule T. Carter of Austin, TX, officeholder of Texas. Complete Schedule T. Carter of Austin, TX, officeholder of Texas. Complete Schedule T. Carter	6	Amount (\$)	7 Payee address; City; State; Zip Code	le			
Complete ONLY if direct expenditure to benefit C/OH   Candidate/Officeholder name   Office sought   Office held		\$121.85	1601 Trapelo Road				
Complete ONLY if direct expenditure to benefit C/OH   Candidate/Officeholder name   Office sought   Office held							
Office Overhead/Rental Expense			Waltham, MA 02451				
Office Overhead/Rental Expense	8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
9 Complete ONLY if direct expenditure to benefit C/OH  Date			, , ,	[	Check if travel outsid		
9 Complete QNLY if direct expenditure to benefit C/OH  Date		EXPENDITORE		[	_		
Date				(	Campaign email	distribution	service
Date	_	Complete ONLY if direct	Condidate/Officeholder name	la 4		Office he	N. A.
Date 02/03/2025  Amount (\$) Payee address; City; State; Zip Code \$243.70 \$243.70 \$243.70 \$243.70  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description   Check if Austin, TX, officeholder living expense   Campaign email distribution service  Complete ONLY if direct expenditure to benefit C/OH  Date 06/30/2025  Amount (\$) Payee name Constant Contact  Amount (\$) Payee address; City; State; Zip Code \$\$121.85 \$\$121.85    Category (see Categories listed at the top of this schedule)   Check if Austin, TX, officeholder living expense   Campaign email distribution service    Complete ONLY if direct expenditure to benefit C/OH    Candidate/Officeholder name of this schedule of Texas. Complete Schedule T.	y			H		Office he	eiu
Date							
Amount (\$)							
### S243.70  ### S243.70  ### S243.70  ### Waltham, MA 02451  ### PURPOSE OF EXPENDITURE  ### Candidate/Office Overhead/Rental Expense  ### Candidate/Office Name Office Sought Office Name Office Sought Office Name Office N							
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.		• • •	, ,,	le			
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.		\$243.70	1601 Trapelo Road				
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.							
Office Overhead/Rental Expense    Check if travel outside of Texas. Complete Schedule T.			Waltham, MA 02451				
Complete ONLY if direct expenditure to benefit C/OH  Date Office name Office sought Office held  Date Office name Office sought Office held  Constant Contact  Amount (\$) Payee address; City; State; Zip Code  \$121.85 1601 Trapelo Road  Waltham, MA 02451  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Complete ONLY if direct Candidate/Officeholder name Office sought Office ought Office held  Complete ONLY if direct Candidate/Officeholder name Office sought Office held			(a) Category (See Categories listed at the top of this schedule)	(b)			
Campaign email distribution service  Campaign email distribution service  Campaign email distribution service  Campaign email distribution service  Office held  Campaign email distribution service  Office held  Office held  Date  O6/30/2025  Payee name Constant Contact  Amount (\$)  Payee address; City; State; Zip Code  \$121.85  1601 Trapelo Road  Waltham, MA 02451  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Campaign email distribution service  (b) Description    Check if travel outside of Texas. Complete Schedule T.			Office Overhead/Rental Expense	ļ	<b>—</b>		
Complete ONLY if direct expenditure to benefit C/OH  Date				L			
Date							
Date		Complete ONLY if direct	Candidate/Officeholder name Office sough	ht		Office he	eld
O6/30/2025  Constant Contact  Amount (\$)			<del>1</del>				
O6/30/2025  Constant Contact  Amount (\$)		Date	Pavee name				
\$121.85							
\$121.85		Amount (\$)	Pavee address: City: State: Zin Code	le.			
Waltham, MA 02451  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Campaign email distribution service  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Obscription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign email distribution service							
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Campaign email distribution service  Complete ONLY if direct  Candidate/Officeholder name  Office sought  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign email distribution service		,	2002				
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Campaign email distribution service  Complete ONLY if direct  Candidate/Officeholder name  Office sought  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign email distribution service			Waltham MA 02451				
OF EXPENDITURE  Office Overhead/Rental Expense  Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign email distribution service  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held		DUDDOSE		'h)	Description		
Complete ONLY if direct  Candidate/Officeholder name  Check if Austin, TX, officeholder living expense  Campaign email distribution service  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held		OF	,	ָּי (ט. ]		e of Texas. Com	plete Schedule T.
Complete ONLY if direct Candidate/Officeholder name Office sought Office held		EXPENDITURE	Office Overflead/Nerital Expense	į			•
				(	Campaign email	distribution	service
experiulture to beliefit C/Off				ht		Office he	eld
		experiorure 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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 15/42 Rpt: 21/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date	5 Payee name
	03/31/2025	Cooper, Madison
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,178.75	3709 Garden Villa Lane
		#B
		Austin, TX 78704
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITORL	Check if Austin, TX, officeholder living expense
		Legislative contract labor
	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OH	
$\vdash$	Date	
	04/30/2025	Payee name Cooper, Madison
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,178.75	3709 Garden Villa Lane
		#B
		Austin, TX 78704
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Legislative contract labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	<del>-</del>
	Date	Payee name
	05/30/2025	Cooper, Madison
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	3709 Garden Villa Lane
		#B
		Austin, TX 78704
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Legislative contract labor
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experiditure to benefit C/Or	7

### 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: 16/42 Rpt: 22/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date	5 Payee name
	05/29/2025	Cooper, Madison
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,178.75	3709 Garden Villa Lane
		#B
		Austin, TX 78704
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  Legislative contract labor
		Legisiative contract labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
3	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	04/24/2025	Corrigan Camden Buyer's Group
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	504 South Home Street
		Corrigan, TX 75939
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		Chanasis denaisin
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/21/2025	Crown and Anchor
	Amount (\$)	Payee address; City; State; Zip Code
	\$426.30	2911 San Jacinto Boulevard
		Austin, TX 78705
	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  OH dinner meeting
		On diffile theeting
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Credit Card Payment	The Instruction Guide explains how to comp	plete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)
	Sch: 17/42 Rpt: 23/59	Ashby, Trenton E. (The Honorable)	00067800
4	Date	5 Payee name	•
	04/04/2025	D&D Rental Limited	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,800.00	PO Box 1365	
		Lufkin, TX 75902	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	D) Description
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense  Annual rental for district office
			Allinear remainer district office
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	office held
	expenditure to benefit C/O		. Cinos nou
-	Date	Payee name	
	06/17/2025	Payee name Go Rentals	
_			
	Amount (\$)	Payee address; City; State; Zip Code	;
	\$290.23	300 Skypark Drive	
		Markaran OA 00040	
		Monterey, CA 93940	
	PURPOSE OF	, ,	D) Description
	EXPENDITURE	Travel Out of District	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Rental car while attending AGC Conference as a
			panelist
	Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
	expenditure to benefit C/O	1	
H	Date	Payee name	
	01/10/2025	Google Fiber	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$70.00	701 S Lamar Blvd	
	,		
		Austin, TX 78704	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	D) Description
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
			X Check if Austin, TX, officeholder living expense WIFI and internet for political apartment maintained
			in Austin
	Complete ONLY if direct	Candidate/Officeholder name Office sough	office held
	expenditure to benefit C/O	9	office field

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission File	ers)
	Sch: 18/42 Rpt: 24/59	Ashby, Trenton E. (The Honorable)  00067800	
4	Date	5 Payee name	
	02/10/2025	Google Fiber	
6	Amount (\$) \$70.00	7 Payee address; City; State; Zip Code 701 S Lamar Blvd Austin, TX 78704	
8	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	X Check if Austin, TX, officeholder living expense	
		WIFI and internet for political apartment maintain in Austin	ned
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	03/14/2025	Google Fiber	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$70.00	701 S Lamar Blvd	
		Austin, TX 78704	
	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.    X   Check if Austin, TX, officeholder living expense	
		WIFI and internet for political apartment maintain in Austin	ned
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	04/10/2025	Google Fiber	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$70.00	701 S Lamar Blvd	
		Austin, TX 78704	
	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.    X   Check if Austin, TX, officeholder living expense	
		WIFI and internet for political apartment maintain	ned
		in Austin	iieu
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 19/42 Rpt: 25/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date	5 Payee name
	05/12/2025	Google Fiber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$70.00	701 S Lamar Blvd
		Austin, TX 78704
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  WIFI and internet for political apartment maintained
		in Austin
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davies same
	06/10/2025	Payee name  Google Fiber
	Amount (\$)	Payee address; City; State; Zip Code
	\$70.00	701 S Lamar Blvd
		Austin, TX 78704
	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  WIFI and internet for political apartment maintained
		in Austin
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<b>o</b>
	Date	Payee name
	01/03/2025	Hill Country Springs
	Amount (\$)	Payee address; City; State; Zip Code
	\$7.99	10019 Interstate 35
		Austin, TX 78747
	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  Water - capitol office
		water - capitor office
	Complete ONLY if direct	Condidate/Office holder name Office county
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political 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: 20/42 Rpt: 26/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date	5 Payee name
	02/04/2025	Hill Country Springs
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$31.99	10019 Interstate 35
		Austin, TX 78747
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
		Water - capitol office
<u>_</u>	Commission ONU V if allows	Condidate/Officeholder name
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
_		
	Date	Payee name
	03/04/2025	Hill Country Springs
	Amount (\$)	Payee address; City; State; Zip Code
	\$68.99	10019 Interstate 35
		Austin, TX 78747
	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
		Water - capitol office
		Traite. Suprier smoo
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	04/02/2025	Hill Country Springs
$\vdash$		Payee address; City; State; Zip Code
	Amount (\$) \$36.99	10019 Interstate 35
	\$30.99	TOOTS HIGHSTONE 30
		Aughin TV 70747
		Austin, TX 78747
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Tayon Complete Schedule T
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Water - capitol office
	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 -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

	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: 21/42 Rpt: 27/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date	5 Payee name
	05/02/2025	Hill Country Springs
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$73.98	10019 Interstate 35
		Austin, TX 78747
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  Water - capitol office
		vvater - capitor office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
$\vdash$	Data	Para a same
	Date	Payee name
	06/03/2025	Hill Country Springs
	Amount (\$)	Payee address; City; State; Zip Code
	\$44.99	10019 Interstate 35
		Austin, TX 78747
	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  Water - capitol office
		water - capitor office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	06/30/2025	Hole In One Cafe
	Amount (\$)	Payee address; City; State; Zip Code
	\$305.27	4306 S. First Street
		Lufkin, TX 75901
	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  OH dinner meeting
		Of Fullifier meeting
_	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 -

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 22/42 Rpt: 28/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date	5 Payee name
	06/13/2025	Hyatt Regency Monterey
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$414.89	1 Old Golf Course Road
		Monterey, CA 93940
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Meals while attending AGC Conference as a panelist
		modio milo diconding / too comorono de a parione.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiulture to beliefit C/OI	1
	Date	Payee name
	02/03/2025	KIVY
	Amount (\$)	Payee address; City; State; Zip Code
	\$99.00	102 South 5th Street
		Crockett, TX 75835
	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
		Political advertising - radio
		Total davertising Tadio
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	5 .	
	Date	Payee name
	02/16/2025	KIVY
	Amount (\$)	Payee address; City; State; Zip Code
	\$99.00	102 South 5th Street
		Crockett, TX 75835
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Political advertising - radio
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	onponditure to belieff 6/01	•

## 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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 23/42 Rpt: 29/59	2 FILER NAME Ashby, Trenton E. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067800
4	·	5 Payee name KIVY
6	Amount (\$) \$16.00	7 Payee address; City; State; Zip Code 102 South 5th Street
8	PURPOSE OF EXPENDITURE	Crockett, TX 75835  (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 Political advertising - radio
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 04/15/2025	Payee name KIVY
	Amount (\$) \$199.00	Payee address; City; State; Zip Code  102 South 5th Street  Crockett, TX 75835
	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  Political advertising - radio
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 06/17/2025	Payee name KIVY
	Amount (\$) \$250.00	Payee address; City; State; Zip Code  102 South 5th Street
		Crockett, TX 75835
	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  Political advertising - radio
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	, ( t
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 24/42 Rpt: 30/59	Ashby, Trenton E. (The Honorable)	00067800
4	Date	5 Payee name	
	01/09/2025	Kalin's Center	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,350.00	PO Box 901	
		Crockett, TX 75835	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE		el outside of Texas. Complete Schedule T.
		Charitable o	tin, TX, officeholder living expense
		Situation	ionation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	expenditure to benefit C/O		Office field
	Date	Payee name	
	02/22/2025	Lovelady FFA	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	PO Box 280	
		Lovelady, TX 75851	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Donations Made By	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense
			donation - animal sponsorships
			a mai oponoone
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Office field
_	D-t-	T _	
	Date	Payee name	
	06/17/2025	Lufkin Coca-Cola	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,995.00	704 Webber Street	
		Lufkin, TX 75904	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	el outside of Texas. Complete Schedule T.
	LA LIBITORE		tin, TX, officeholder living expense
		Department	donated to local Volunteer Fire
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	experialitate to betterit 6/01	''	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 25/42 Rpt: 31/59	2 FILER NAME Ashby, Trenton E. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067800
4	Date 01/06/2025	5 Payee name Lufkin Host Lions Club
6	Amount (\$) \$515.00	7 Payee address; City; State; Zip Code PO Box 161  Lufkin, TX 75902
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  Annual campaign membership dues
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 05/23/2025	Payee name Mastercard
	Amount (\$) \$1,081.42	Payee address; City; State; Zip Code P.O. Box 94014  Palatine, IL 60094-4014
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Credit Card Payment  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Credit card payment for items properly reported on Sch F4 of current report
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
	Date 02/03/2025	Payee name Messenger
	Amount (\$) \$180.00	Payee address; City; State; Zip Code PO Box 99
		Grapeland, TX 75844
	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  Political advertising - newspaper
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 26/42 Rpt: 32/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date	5 Payee name
	02/08/2025	Messenger
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$80.00	PO Box 99
		Grapeland, TX 75844
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Political advertising - newspaper
		Tollideal advertising Thewspaper
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	03/13/2025	Messenger
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$40.00	PO Box 99
		Grapeland, TX 75844
	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 Political advertising - newspaper
		Tollideal advertising Thewspaper
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	04/15/2025	Messenger
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$240.00	PO Box 99
		Grapeland, TX 75844
	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
		Political advertising - newspaper
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		
ı		

### 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: 27/42 Rpt: 33/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date	5 Payee name
	05/08/2025	Messenger
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$160.00	PO Box 99
		Grapeland, TX 75844
8	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
		Political advertising - newspaper
		Tolliton davordoning Horropapol
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/07/2025	Messenger
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	PO Box 99
		Grapeland, TX 75844
	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 Political advertising - newspaper
		Tollibal davertising newspaper
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Date	Payee name
	02/17/2025	Museum of East Texas
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	503 N Second Street
	φ500.00	303 N Second Street
		Lufkin, TX 75901
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By  Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Annual campaign membership dues
	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
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 28/42 Rpt: 34/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date	5 Payee name
	06/02/2025	Nordstrom Visa
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$914.10	PO Box 79137
		Phoenix, AZ 85062
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	_	Check if Austin, TX, officeholder living expense  Credit card payment for items properly reported on
		Sch F4 of current report
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	06/26/2025	Office Depot
	Amount (\$)	Payee address; City; State; Zip Code
	\$279.47	4210 S Medford Drive
	,	
		Lufkin, TX 75901
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Supplies for campaign office
	Operation ONLY if discort	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	
	Date 05/30/2025	Payee name Parker, Linda (Mrs.)
	Amount (\$) \$7,500.00	Payee address; City; State; Zip Code PO Box 154206
	\$7,500.00	PO BOX 154200
		Luflin TV 75015
		Lufkin, TX 75915
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Legislative contract labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	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 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 Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1	Sch: 29/42 Rpt: 35/59	Ashby, Trenton E. (The Honorable)  00067800
4	Date	5 Payee name
	06/17/2025	Pineywoods Living Magazine
6	Amount (\$) \$600.00	7 Payee address; City; State; Zip Code PO Box 99  Grapeland, TX 75844
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ľ	OF	
	EXPENDITURE	Advertising Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Political advertising - magazine
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/29/2025	Polk County 4-H Shotgun Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	602 E Church Street
		Ste. 127
		Livingston, TX 77351
	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
		Chantable donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/07/2025	Polk County Cares
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	300 N Washington Street
		Livingston, TX 77351
	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.
		Candidate/Officeholder/Political Committee
		Charitable donation
	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 -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

	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: 30/42 Rpt: 36/59	Ashby, Trenton E. (The Honorable) 00067800	
4	Date	5 Payee name	
	05/05/2025	Qi Austin	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$206.10	835 W 6th Street	
		Ste. 114	
		Austin, TX 78703	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  OH dinner meeting	
		Of Fullifier meeting	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
	Date	Payee name	
	05/06/2025	Qi Austin	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$289.77	835 W 6th Street	
		Ste. 114	
		Austin, TX 78703	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  OH dinner meeting	
		Of Fullifier meeting	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OH		
	Date	Payee name	
	01/06/2025	Real Graphics	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$454.52	417 East Lufkin Avenue	
		Lufkin, TX 75901	
	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  Annual campaign website hosting	
		Annual campaign website nosting	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		

## SCHEDULE F1

Vertising Expense Event Expense Loan Repayment/Reimbu

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 31/42 Rpt: 37/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date	5 Payee name
	06/17/2025	Republican Women of Trinity County
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	PO Box 805
		Trinity, TX 75862
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Political dollation
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_		
	Date	Payee name
	05/29/2025	Rodriguez, Maia (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	2412 Tom Miller Street
		Austin, TX 78723
	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  Legislative contract labor
		Legislative contract labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	Daniel and a second
	Date 01/08/2025	Payee name Sardis Baptist Church
		<u> </u>
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	13174 County Road 4187S
		Henderson, TX 75654
	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
		Donation in memory of Doris Jordan
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
Ļ	Sch: 32/42 Rpt: 38/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date 05/30/2025	5 Payee name Seeber, Joseph (Mr.)
6	Amount (\$) \$7,500.00	7 Payee address; City; State; Zip Code 2305 Westover Road
		Austin, TX 78703
8	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 Legislative contract labor
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/12/2025	Standing with Crockett
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 401 S. 7th Street
		Crockett, TX 75835
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description  Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Charitable donation
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 04/04/2025	Payee name Texas A&M Foundation
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 401 George Bush Drive
		College Station, TX 77840
	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  Annual campaign membership dues
	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 -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
Legal Services Salaries/Wangs/Contract Labor

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

	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: 33/42 Rpt: 39/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date	5 Payee name
L	02/28/2025	Texas Chili Parlor
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$75.79	1409 Lavaca
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  OH lunch meeting
		Or function incoming
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
F	Date	Payee name
	04/14/2025	Texas Chili Parlor
H	Amount (\$)	Payee address; City; State; Zip Code
	\$67.59	1409 Lavaca
	*******	<del>- 111 - 111</del>
		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  OH lunch meeting
		Cititation incoming
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	05/23/2025	Texas Chili Parlor
	Amount (\$)	Payee address; City; State; Zip Code
	\$71.97	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  OH lunch meeting
		On landi meeting
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
I		

### 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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 34/42 Rpt: 40/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date	5 Payee name
	06/02/2025	Texas Chili Parlor
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$55.74	1409 Lavaca
L		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
		OH lunch meeting
		Critation modaling
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
H	Date	Payee name
	05/02/2025	Texas Correctional Industries
L	Amount (\$)	Payee address; City; State; Zip Code
	\$883.32	8801 South First Street
	ψ003.32	
		Suite 100
		Austin, TX 78748
	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
		items demands to help profit for furnaration
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
H	Date	Payee name
	03/13/2025	Texas House IT Caucus
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	1108 Lavaca Street
	φ250.00	
		Ste. 110
		Austin, TX 78701
	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
		Annual membership dues
		7 till dat membership daes
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
l		

## 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 comple	ete this form.
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 35/42 Rpt: 41/59	Ashby, Trenton E. (The Honorable)	00067800
4	Date	5 Payee name	
Ļ	01/22/2025	Texas House Republican Caucus	
6	Amount (\$) \$1,000.00	<b>7</b> Payee address; City; State; Zip Code PO Box 13305	
	\$1,000.00	FO BOX 13303	
		Austin, TX 78711	
8	PURPOSE		Description
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Annual membership dues
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
F	Date	Payee name	
	01/24/2025	The Home Depot - Lufkin	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$591.25	4211 S Medford Drive	
		Lufkin, TX 75901	
	PURPOSE OF	, -	Description
	EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Shelves and supplies for district office
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	02/03/2025	The Lufkin Daily News	
	Amount (\$) \$234.00	Payee address; City; State; Zip Code 300 Ellis	
	Ψ204.00	300 Lins	
		Lufkin, TX 75904	
	PURPOSE		Description
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
	LXI LIIDITORE		Check if Austin, TX, officeholder living expense Annual subscription for campaign office
			Airida subscription for campaign office
H	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 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			Gift/Awar Legal Ser		xpense	Printing Salarie	-			Travel in Disi Travel Out of OTHER (ente	f Distr	ict ategory not listed above)
1	Total pages Schedule F1:	2	FILER NAME							3	Filer ID		(Ethics Commission Filers)
L	Sch: 36/42 Rpt: 42/59		Ashby, Tren	iton E.	(The Hono	orable)					0006780	0	
4	Date	5	Payee name										
	03/15/2025		Trinity Coun	ıty Fair	& Youth L	ivestock S	Show						
6	Amount (\$)	7	Payee addres	ss;	City;	State;	Zip (	Code					
	\$3,950.00		PO Box 506	i									
			Groveton, T	X 7584	45								
8	PURPOSE	(a)	Category (Se	e Catego	ries listed at the	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Contribution	s/Don	ations Mad	le By							ete Schedule T.
	EXI ENDITORE		Candidate/C	Officeh	older/Politi	cal Comm	ittee		Check if Austin				
									Charitable do	ma	uon - ann	ııaı :	sponsorsnips
9	Complete ONLY if direct	<u> </u>	andidata/Offic	coholda	yr name		office of				Office	hol	d
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	Lenoide	ame		office so	Jugnt			Office	: riel	u
	Date		Payee name										
	06/18/2025		Trinity Coun	ıty Fair	& Youth L	ivestock S	Show						
	Amount (\$)		Payee addres	ss;	City;	State;	Zip (	Code					
	\$125.00		PO Box 506	<b>5</b>									
			Groveton, T	X 7584	45								
	PURPOSE	(a)	Category (Se	e Catego	ries listed at the	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Advertising						<b></b>				ete Schedule T.
									Check if Austin				expense
									1 Ontical dave	, 1 (13	ing cata	iog	
-	Complete ONLY if direct		andidate/Offic	ceholde	er name		Office so	 ought			Office	hel	d
	expenditure to benefit C/OI				· <del>-</del>			- 3*			230		
H	Date	Π	Payee name										
	04/07/2025		True Food k	Kitchen	1								
	Amount (\$)		Payee addres		City;	State:	Zip (	Code					
	\$119.87		222 West Av	-	- 1-51	5.0.0,	\r <b>`</b>						
	,,		22.7.										
			Austin, TX 7	'8701									
	PURPOSE OF	(a)	Category (Se			top of this sche	edule)	(b)	Description				
	EXPENDITURE		Food/Bevera	age Ex	pense				Check if travel Check if Austin				ete Schedule T. expense
									OH dinner m			9 \	- p - 27
											-		
	Complete ONLY if direct		Candidate/Offic	ceholde	er name	С	office so	ought			Office	hel	d
	expenditure to benefit C/OI	Н											

## SCHEDULE F1

Advertising Expense E Accounting/Banking F Consulting Expense F 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: 37/42 Rpt: 43/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date	5 Payee name
l	04/15/2025	True Food Kitchen
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$120.62	222 West Avenue
l		
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		OH dinner meeting
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiantare to benefit 6/61	'
	Date	Payee name
	01/30/2025	Tyler County Booster
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$475.00	205 W Bluff Street
		Woodville, TX 75979
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Political advertising - magazine
		1 ontical advertising - magazine
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<b>o</b>
⊨	Date	Payee name
l	05/08/2025	Tyler County Booster
⊢	Amount (\$)	
	\$331.00	Payee address; City; State; Zip Code  205 W Bluff Street
l	Ψ001.00	200 W Bidii Offeet
l		Woodville, TX 75979
	DUDDOOF	<u> </u>
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expanse  (b) Description  Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
l		Political advertising - newspaper
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/Ol	<u> </u>

## 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: 38/42 Rpt: 44/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date	5 Payee name
	02/10/2025	U.S. Lege AI
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,700.00	1900 David Street
		Austin, TX 78705
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  Software subscription for capitol office
		Continue custom for custom continue
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	02/28/2025	US Treasury
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,610.00	Internal Revenue Service Center
	•	
		Ogden, TX 84201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Taxes Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Balance due on campaign tax return
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<b>y</b>
_	Date	Payee name
	04/11/2025	US Treasury
	Amount (\$)	Payee address; City; State; Zip Code
	\$512.50	Internal Revenue Service Center
	7-2	
		Ogden, TX 84201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Taxes    Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign payroll taxes
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

## SCHEDULE F1

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Transport in District Travel in District Travel Out of District

	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: 39/42 Rpt: 45/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date	5 Payee name
	04/11/2025	US Treasury
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15.00	Internal Revenue Service Center
		Ogden, TX 84201
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Taxes Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign payroll taxes
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	05/13/2025	US Treasury
	Amount (\$)	Payee address; City; State; Zip Code
	\$512.50	Internal Revenue Service Center
		Ogden, TX 84201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Taxes Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign payroll taxes
		Campaign payron taxes
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<b>y</b>
	Date	Payee name
	05/13/2025	US Treasury
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.00	Internal Revenue Service Center
	Ψ10.00	internal Nevertae Service Service
		Ogden, TX 84201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Taxes Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign payroll taxes
	Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
	Complete ONLY if direct expenditure to benefit C/OH	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 Comm

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

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

	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: 40/42 Rpt: 46/59	Ashby, Trenton E. (The Honorable) 00067800
4	Date	5 Payee name
	06/13/2025	US Treasury
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$7,114.40	Internal Revenue Service Center
L		Ogden, TX 84201
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Taxes Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign payroll taxes
		Campaign payron axes
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/13/2025	US Treasury
	Amount (\$)	Payee address; City; State; Zip Code
	\$124.60	Internal Revenue Service Center
		Ogden, TX 84201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Taxes Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign payroll taxes
		Campaign payron taxes
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	01/08/2025	United States Postal Service
	Amount (\$) \$74.77	Payee address; City; State; Zip Code 800 S. John Redditt Drive
	Φ14.11	600 S. John Redditt Drive
		Ludii TV 75004
		Lufkin, TX 75901
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Pental 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
		Postage for campaign office
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/O	
H		
1		
l		

### SCHEDULE F1

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:		_
ľ	Sch: 41/42 Rpt: 47/59	Ashby, Trenton E. (The Honorable)	
4	Date	5 Payee name	_
	04/14/2025	United States Postal Service	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$226.00	800 S. John Redditt Drive	
		Lufkin, TX 75901	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Office Overhead/Rental Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Annual renewal of campaign post office box	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L	- CAPONIGRATIO TO BOTTONIC GAOT		_
	Date	Payee name	
	01/13/2025	Walmart - Austin	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$274.06	5017 W Hwy 290	
		Austin, TX 78735	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Supplies for capitol office	
		Supplies for capitor office	
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	•	
⊨	Date	Davis same	-
	06/05/2025	Payee name Williams Sonoma	
L			
	Amount (\$) \$286.15	Payee address; City; State; Zip Code 4001 North Lamar	
	Φ200.15	4001 Notti Lamai	
		Auglia TV 707EC	
		Austin, TX 78756	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Cift/Awards/Memorials Expense  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Constituent gift	
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	1	
Г			_
ı			

## 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		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide ex	Salaries	Expense s/Wages/Contract Labor	-	Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1:					- 1	iler ID	(Ethics Commission Filers)
	Sch: 42/42 Rpt: 48/59		nton E. (The Honorabl	e)		(	00067800	
4	Date	5 Payee name						
	02/03/2025	Woodville I						
6	Amount (\$)	7 Payee addre		State; Zip C	Code			
	\$2,500.00	201 Sutton	Street					
		Woodville,	TX 75979					
8	PURPOSE OF		See Categories listed at the top of		(b) Description			
	EXPENDITURE		ns/Donations Made By Officeholder/Political O		<u> </u>		e of Texas. Comp officeholder living	olete Schedule T.
		Candidate/	Onicendiden/Political C	Jonninillee	Charitable of			скрепас
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office so	pught		Office he	eld

# **PURCHASE OF INVESTMENTS FROM POLITICAL** SCHEDULE F3 **CONTRIBUTIONS** 1 Total pages Schedule F3: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 49/59 (Ethics Commission Filers) FILER NAME 3 Filer ID Ashby, Trenton E. (The Honorable) 00067800 5 Name of person from whom investment is purchased 01/07/2025 VeraBank 6 Address of person from whom investment is purchased; City; State; Zip Code 201 W Main Street Henderson, TX 75652 Description of investment Purchase of campaign certificate of deposit 8 Amount of investment (\$) 250,000.00

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4: 2 FILER NAME				3 Filer ID (Ethics Commission Filers)			
Sch: 1/5 Rpt: 50/59	Ashby, Trenton E. (The Honorable)			00067800			
4 CREDIT CARD ISSUER		ncial institution ercard	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	103.3	31	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$191.96	06/12/2025					
7 PAYEE	(a) Payee name  Hyatt Regency Mor	nterey	(b) Payee address; 1 Old Golf Course Road	City,	State,	Zip Code	
			Monterey, CA 93940				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	0.00		. P i	
X Political	Food/Beverage Expe		Meals while attending AG	C Conference a	s a pane	elist	
Non-Political	(a) Charle if traval autoida	of Toyon, Complete Cabadyla T	Check if Austin TV	#			
9 Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	officeholder living exper	ise		
expenditure to benefit C/OH			o ooug.it	Ccc 1.c.u			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$72.97	01/24/2025	02/19/2025				
PAYEE	PAYEE (a) Payee name (b) Payee address;		(b) Payee address;	City,	State,	Zip Code	
	AT&T Mobility		PO Box 537104				
			Atlanta, GA 30353-7104				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description  Payment of campaign telephone				
X Political	Office Overhead/Rent		Payment of campaign tele	priorie			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exper	nse		
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH			_				
PAYMENT	(a) Amount Charged \$73.00	(b) Date of Charge 02/24/2025	(c) Date(s) Credit Card Issuer 03/21/2025	r Paid			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	AT&T Mobility		PO Box 537104				
			Atlanta, GA 30353-7104				
PURPOSE OF			(b) Description				
EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Payment of campaign tele	ephone				
X Political	200 0.101110007110111						
Non-Political	(*) <b>—</b>	of Texas. Complete Schedule T.		officeholder living exper	nse		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
	l						

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District
OTHER (enter a category not listed above) Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.				
1	1 Total pages Schedule F4: 2 FILER NAME				3 Filer ID (E	3 Filer ID (Ethics Commission Filers)			
	Sch: 2/5 Rpt: 51/59	Ashby, Trenton E. (The Honorable)			00067800				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZI IDITURES GED TO A CRE	\$	103.3	31	
6	PAYMENT	(a) Amount Charged \$73.00	(b) Date of Charge 03/24/2025	(c) Date(s 04/27/20	) Credit Card Is: 125	suer Paid			
7	PAYEE	(a) Payee name  AT&T Mobility		(b) Payee PO Box		City,	State,	Zip Code	
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	•	(b) Descri					
L	Non-Political		of Texas. Complete Schedule T.		Check if Austin	, TX, officeholder living	expense		
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
	PAYMENT	(a) Amount Charged \$73.00	(b) Date of Charge 04/24/2025	(c) Date(s 05/23/20	) Credit Card Is: 025	suer Paid			
	PAYEE	(a) Payee name  AT&T Mobility		(b) Payee PO Box		City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin	, TX, officeholder living	, officeholder living expense		
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
	PAYMENT	(a) Amount Charged \$73.00	(b) Date of Charge 05/24/2025	(c) Date(s 06/23/20	) Credit Card Is: 025	suer Paid			
	PAYEE	(a) Payee name  AT&T Mobility		(b) Payee PO Box Atlanta,		City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Descri Payment	of campaign				
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin	, TX, officeholder living	expense		
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
ı									

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

	Candidate/Officerolder/Folitica		ruction Guide explains how	•	THEN (enter a category not listed a	bove)		
┰	Total pages Schedule F4:				3 Filer ID (Ethics Commiss	sion Filers)		
ľ	Sch: 3/5 Rpt: 52/59	Ashby, Trenton E. (	The Honorable)		00067800	310111 11013)		
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 103.3	31		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
		\$73.00	06/24/2025					
7	PAYEE	(a) Payee name  AT&T Mobility		(b) Payee address; PO Box 537104	City, State,	Zip Code		
L		4.) -		Atlanta, GA 30353-7104				
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Reni		(b) Description Payment of campaign tele	ephone			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
е	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$1,081.42	(b) Date of Charge 04/25/2025	(c) Date(s) Credit Card Issuer 05/23/2025	r Paid			
	PAYEE	(a) Payee name	•	(b) Payee address;	City, State,	Zip Code		
		Intuit		2700 Coast Avenue				
L				Mountain View, CA 94043				
	PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Office Overhead/Reni		(b) Description Software for campaign office				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin TX	officeholder living expense			
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	<u>'</u>	e sought	Office held			
	PAYMENT	(a) Amount Charged \$928.18	(b) Date of Charge 06/13/2025	(c) Date(s) Credit Card Issuel	r Paid			
	PAYEE	(a) Payee name United Airlines		(b) Payee address; PO Box 66100	City, State,	Zip Code		
				Chicago, IL 60666				
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Airfare to attend AGC Cor	nference as a panelist			
L	Non-Political	(c) X Check if travel outside	·	_	officeholder living expense			
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Öffice	e sought	Office held			
l								

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 4/5 Rpt: 53/59	Ashby, Trenton E. (The Honorable)			00067800			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	103.3	31	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid			
	\$50.00	06/13/2025					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	United Airlines		PO Box 66100				
0 PURPOSE OF	(a) Catagony		Chicago, IL 60666				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description  Airfare baggage fees to at	ttend AGC Conf	erence :	as a	
X Political	Fees		panelist	mend AGC Conference as a			
Non-Political	`	of Texas. Complete Schedule T.		C, officeholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH  PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Daid			
PATMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card issuer	i Faiu			
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
	(**************************************	,					
Political							
Non-Political	(*) <b>–</b>	of Texas. Complete Schedule T.		O#:   -			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid			
TAIMEN!	(d) / tillount Onlarged	(b) Date of charge	(c) Date(s) Great Guid 155ach	. r ald			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.					
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							

## SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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	/ - Gift/Award Il Committee Legal Ser	ls/Memorials Expense vices		avel Out of District THER (enter a category	not listed above)
		The Inst	ruction Guide explains h	ow to complete this form.		
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics	s Commission Filers)
	Sch: 5/5 Rpt: 54/59	Ashby, Trenton E.	(The Honorable)		00067800	
4	CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZED		100.01
	ISSUER	Nordst	rom Visa	EXPENDITURES CHARGED TO A CREDIT	\$	103.31
				CARD		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid	
		\$810.79	05/08/2025	06/02/2025		
7	PAYEE	(a) Payee name		(b) Payee address;	City,	State, Zip Code
		Intuit		2700 Coast Avenue		
8	PURPOSE OF	(a) Category		Mountain View, CA 94043 (b) Description	<u>;</u>	
o	EXPENDITURE	(See Categories listed at the top	of this schedule)	Software for campaign off	ire	
	X Political	Office Overhead/Ren	tal Expense	Contivate for campaign on	100	
	Non-Political	(2) D 01 + 171 + + + + +	(7. 0. 1. 0.1.1.			
9	Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholde	of Texas. Complete Schedule	ffice sought	officeholder living expe	ense
	xpenditure to benefit C/OH	Carialaato, Ciniconolac		moo oodgiit	Omoc noid	

## POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Food/Beverage Expense Gift/Awards/Memorials Expense	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)
		·	ow to complete this form	1
1	Total pages Schedule G: Sch: 1/2 Rpt: 55/59	2 FILER NAME Ashby, Trenton E. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067800
_	·	, ,		
4	Date	5 Payee name		
	01/22/2025	Mastercard		
6	Amount (\$)	7 Payee address; City; State;	Zip Code	
	\$72.94	P.O. Box 94014		
	Reimbursement from political contributions intended	Palatine, IL 60094-4014		
8	PURPOSE	(a) Category (See Categories listed at the top of this sched	lule) (b) Description	Check if travel outside of Texas. Complete Schedule T.
Ū	OF			Check if Austin, TX, officeholder living expense
	EXPENDITURE	Credit Card Payment	Cradit card nave	_
			F4 of prior repor	nent for items properly reported on Sch
			174 of prior repor	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date	Payee name		
	02/19/2025	Mastercard		
	Amount (\$)	Payee address; City; State;	Zip Code	
	\$72.97	P.O. Box 94014	p	
	Ψ12.31	F.O. BOX 94014		
	X Reimbursement from political contributions intended	Palatine, IL 60094-4014		
	PURPOSE	Category (See Categories listed at the top of this sched	lule) Description	Check if travel outside of Texas. Complete Schedule T.
	OF	Credit Card Payment		Check if Austin, TX, officeholder living expense
	EXPENDITURE	,	Credit card payn F4 of current rep	nent for items properly reported on Sch oort
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date	Payee name		
	03/21/2025	Mastercard		
	Amount (\$)	Payee address; City; State;	Zip Code	
	\$73.00	P.O. Box 94014		
	X Reimbursement from political contributions intended	Palatine, IL 60094-4014		
	PURPOSE	Category (See Categories listed at the top of this sched	lule) Description	Check if travel outside of Texas. Complete Schedule T.
	OF	Credit Card Payment	l Ē	Check if Austin, TX, officeholder living expense
	EXPENDITURE	Great Gara rayment	Credit card payn	nent for items properly reported on Sch
			F4 of current rep	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	rmo provided by Toygo F	thice Commission was athice et		Version V4.1.0 edec@bb6

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS

#### SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 2/2 Rpt: 56/59 Ashby, Trenton E. (The Honorable) 00067800 Date Payee name 04/27/2025 Mastercard 6 Amount (\$) Payee address; City; State; Zip Code P.O. Box 94014 \$73.00 Reimbursement from political contributions intended Х Palatine, IL 60094-4014 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense Credit Card Payment **EXPENDITURE** Credit card payment for items properly reported on Sch F4 of current report Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/23/2025 Mastercard

Amount (\$)	Payee address; City; State; Zip C	ode
\$73.00	P.O. Box 94014	
Reimbursement from political contributions intended	Palatine, IL 60094-4014	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Credit Card Payment	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Credit card payment for items properly reported on Sch F4 of current report
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date	Payee name	
06/23/2025	Mastercard	
Amount (\$)	Payee address; City; State; Zip C	ode
\$73.00	P.O. Box 94014	
Reimbursement from political contributions intended	Palatine, IL 60094-4014	
PURPOSE OF	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Credit Card Payment	Check if Austin, TX, officeholder living expense
		Credit card payment for items properly reported on Sch F4 of current report
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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

## SCHEDULE K

	The Instru	cti	on Guide explains how to complete this form.	1		pages Schedule K: 1/2 Rpt: 57/59	
2	FILER NAME			3		D (Ethics Commission Filers	s)
	Ashby, Trent	ton	E. (The Honorable)		0006	7800	
4	Date	5	Name of person from whom amount is received			8 Amount (\$)	
	02/03/2025		VeraBank			\$17,860	0.38
		6	Address of person from whom amount is received; City; State; Zip Code			"]	
			Henderson, TX 75653-1009				
		7	Purpose for which amount is received Check if p	olitio	cal cor	ntribution returned to filer	
			Interest earned on campaign certificate of deposit				
	Date		Name of person from whom amount is received			Amount (\$)	
	04/07/2025		VeraBank			\$2,558	3.21
		ļ	Address of person from whom amount is received; City; State; Zip Code				
			The state of person from the state of the state, and the state of the				
			Henderson, TX 75653-1009				
			Purpose for which amount is received	olitio	cal cor	ntribution returned to filer	
			Interest earned on campaign certificate of deposit				
	Date		Name of person from whom amount is received			Amount (\$)	
	01/10/2025		VeraBank			\$41	1.79
			Address of person from whom amount is received; City; State; Zip Code				
		L	Henderson, TX 75653-1009				
			<del></del>	olitio	cal cor	tribution returned to filer	
			Interest earned on campaign bank account				
	Date		Name of person from whom amount is received			Amount (\$)	
	02/11/2025	<u> </u>	VeraBank			\$20	0.93
			Address of person from whom amount is received; City; State; Zip Code				
			Henderson, TX 75653-1009				
		H		oliti	cal cor	Intribution returned to filer	
			Interest earned on campaign bank account	Onti	oui ooi	ansation retarned to mer	
_	Date	$\vdash$	Name of person from whom amount is received			Amount (\$)	
	03/11/2025		VeraBank				3.05
		ļ	Address of person from whom amount is received; City; State; Zip Code				
			, address of person from whom amount is received, Oily, State, 21p Sode				
			Henderson, TX 75653-1009				
		Г	Purpose for which amount is received	olitio	cal cor	ntribution returned to filer	
			Interest earned on campaign bank account				
		•					

## INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 2/2 Rpt: 58/59 2 FILER NAME Filer ID (Ethics Commission Filers) Ashby, Trenton E. (The Honorable) 00067800 Date 8 Amount (\$) 5 Name of person from whom amount is received 04/09/2025 VeraBank \$17.70 6 Address of person from whom amount is received; City; State; Zip Code Henderson, TX 75653-1009 Purpose for which amount is received ☐ Check if political contribution returned to filer Interest earned on campaign bank account Name of person from whom amount is received Amount (\$) Date 05/09/2025 VeraBank \$18.01 Address of person from whom amount is received; City; State; Zip Code Henderson, TX 75653-1009 Purpose for which amount is received Check if political contribution returned to filer Interest earned on campaign bank account Date Name of person from whom amount is received Amount (\$) 06/10/2025 VeraBank \$14.64 Address of person from whom amount is received; City; State; Zip Code Henderson, TX 75653-1009 Purpose for which amount is received Check if political contribution returned to filer Interest earned on campaign bank account

## IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES SCHEDULE T FOR TRAVEL OUTSIDE OF TEXAS 1 Total pages Schedule T: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 59/59 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Ashby, Trenton E. (The Honorable) 00067800 4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee **United Airlines** 5 Contribution / Expenditure reported on: Schedule A2 Schedule B Schedule D Schedule F1 Schedule B(J) Schedule C2 Schedule F4 Schedule COH-UC Schedule F2 Schedule G Schedule H 6 Dates of Travel 7 Name of person(s) traveling Ashby, Trent 8 Departure city or name of departure location 06/14/2025 Monterey, CA 9 Destination city or name of destination location 06/14/2025 Houston, TX 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event) Airfare to attend AGC Conference as a panelist Commercial Airplane