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) 00051339 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mr. Josh B. NAME Date Received **ELECTRONICALLY FILED** 07/05/2025 NICKNAME LAST **SUFFIX** Flynn CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** P. O. Box 431158 MAILING Amount Receipt # **ADDRESS** Houston, TX 77243 Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Butch NAME NICKNAME LAST **SUFFIX** Davis STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 2751 Durban Dr. **ADDRESS** (Residence or Business) Houston, TX 77043 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (281) 597-8868 **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 reporting limit **PERIOD** Month Day Year Month Day Year **COVERED** 01/01/2025 **THROUGH** 06/30/2025 10 ELECTION **ELECTION DATE ELECTION TYPE**

11 OFFICE

Month

Day

OFFICE HELD (if any)

Year

Primary

General

Runoff

Special

12 OFFICE SOUGHT (if known)

Other

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 8

13 C / OH NAME	Flynn, Josh B. (Mr.)		14 Filer ID (00051339	(Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.					
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS			
16 CONTRIBUTION	1 TOTAL LINITEM	IZED DOLITICAL CONTRIBUTIONS (OTHER THA	N DI EDGES I DANS			
16 CONTRIBUTION TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OT CONTRIBUTIONS MADE ELECTRONICALLY)			\$ 0.00			
	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			\$ 0.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$ 0.00		
		CAL EXPENDITURES		\$ 2,655.54		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 2,016.37		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS ITING PERIOD	OF THE LAST DAY	\$ 0.00		
17 AFFIDAVIT						
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.				
		Mr	. Josh B. Flynn			
		Signature of	Candidate or Officehol	der		
AFFIX NOTARY STAMP / SEAL ABOVE						
Sworn to and subscribed before me, by the said day						
	of, 20, to certify which, witness my hand and seal of office.					
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath		

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 8 19 Filer ID 18 FILER NAME (Ethics Commission Filers) 00051339 Flynn, Josh B. (Mr.) **20 SCHEDULE SUBTOTALS** SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 3. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 2,290.00 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 365.54 SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

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

Travel in District
Travel Out of District

Solicitation/Fundraising Expense Transportation Equipment & Related 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: 1/4 Rpt: 4/8	Flynn, Josh B. (Mr.) 00051339			
4	Date	5 Payee name			
	04/10/2025	Cypress Republican PAC			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$25.00	8190 Barker Cypress Road #51			
		Cypress, TX 77433			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Candidate/Officeholder/Political Committee			
		iditorio di la constanti di la			
_	Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	Date	Payee name			
	04/04/2025	Harris County Republican Party			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$1,200.00	8588 Katy Fwy, Suite 445			
		Houston, TX 77024			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.			
		Candidate/Officeholder/Political Committee			
		Lincoln Reagan Day Dinner			
	Operation ONE Wife disease	Open Fields (Office helds			
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH					
	Date	Payee name			
	04/17/2025	Paxton, Ken			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$100.00	PO Box 3476			
	Ψ100.00	1 0 80% 3470			
		McKinney, TX 75070			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Contributions/Donations Made By			
	EXPENDITURE	Candidate/Officeholder/Political Committee			
		campaign donation			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OH				

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

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	Committee L	-ood/Beverage Expense Gift/Awards/Memorials Expense .egal Services The Instruction Guide explai		Expens Wages	e /Contract Labor		Travel in District Travel Out of District OTHER (enter a cate	t egory not listed above)
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID (E	Ethics Commission Filers)
L	Sch: 2/4 Rpt: 5/8	Flynn, Josh I	B. (Mr.)				L	00051339	
4	Date	Payee name				•			
	02/28/2025	Recover Am	erica Now						
6	Amount (\$)	7 Payee address	s; City; Sta	ate; Zip Co	ode				
	\$500.00	PO Box 624	46						
		Houston, TX	77205						
8	PURPOSE	(a) Category (See	e Categories listed at the top of this	schedule)	(b)	Description			
	OF		s/Donations Made By	ocricuale)		_ ·	outsio	de of Texas. Complet	e Schedule T.
	EXPENDITURE		fficeholder/Political Ćor	nmittee		—	, TX,	officeholder living exp	pense
						donation			
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Offic	eholder name	Office sou	ught			Office held	
	Date	Payee name							
	03/27/2025	Recover Am	erica Now						
	Amount (\$)	Payee address	s; City; Sta	ate; Zip Co	ode				
	\$200.00 PO Box 62446								
	, 3 5	- / -							
		Houston, TX	77205						
	PURPOSE		e Categories listed at the top of this	schedule)	(b)	Description			
	OF		s/Donations Made By	ooneduic)	ĺ <i>′</i>	_ `	outsio	de of Texas. Complet	e Schedule T.
	EXPENDITURE		fficeholder/Political Cor	nmittee		—	, TX,	officeholder living exp	pense
						donation			
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Offic	eholder name	Office sou	ught			Office held	
L	experience to belieff 6/01								
	Date	Payee name							
	01/15/2025	Republican F	Party of Texas						
	Amount (\$)	Payee address	s; City; Sta	ate; Zip Co	ode				
	\$25.00	P.O. Box 220	06						
		Austin, TX 78	8768						
	PURPOSE	(a) Category (See	e Categories listed at the top of this	schedule)	(b)	Description			
	OF		s/Donations Made By	ouricuale)	[` ′		outsio	de of Texas. Complet	e Schedule T.
	EXPENDITURE		fficeholder/Political Cor	nmittee				officeholder living exp	pense
						Grass Roots	Clu	b	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Offic	eholder name	Office sou	ught			Office held	
	enpondition to some of or i								
				_	_				

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					
1	Total pages Schedule F1:					
	Sch: 3/4 Rpt: 6/8	Flynn, Josh B. (Mr.) 00051339				
4	Date	5 Payee name				
L	02/15/2025	Republican Party of Texas				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$25.00	P.O. Box 2206				
		Austin, TX 78768				
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				
		Grass Roots Glub				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/Oh					
	Date	Payee name				
	03/15/2025	Republican Party of Texas				
	Amount (\$) Payee address; City; State; Zip Code					
	\$25.00 P.O. Box 2206					
		Austin, TX 78768				
	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/Officerioider/Political Committee Grass Roots Club				
Complete ONLY if direct Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OH	1				
	Date	Payee name				
	04/15/2025	Republican Party of Texas				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$25.00	P.O. Box 2206				
		Austin, TX 78768				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.				
		Candidate/Officeholder/Political Committee				
		Grass rivote Gras				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OH					

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	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: 4/4 Rpt: 7/8	Flynn, Josh B. (Mr.) 00051339
4	Date	5 Payee name
	05/15/2025	Republican Party of Texas
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$25.00	P.O. Box 2206
		Austin, TX 78768
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 Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee Grass Roots Club
		State Note State
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
3	expenditure to benefit C/OI	
	Data	
	Date	Payee name
	06/15/2025	Republican Party of Texas
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.00	P.O. Box 2206
		Austin, TX 78768
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	E/4 E/40	Candidate/Officeholder/Political Committee Cross Roots Club
		Grass Roots Club
_	Complete ONLY if direct	Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	05/05/2025	Texas State Rifle Association
	Amount (\$)	Payee address; City; State; Zip Code
	\$115.00	8411 N I-35 Service Road
		Austin, TX 78753
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense donation
		donation
	Complete ONLY if direct	Condidate/Office helder no rec
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

Payee address;

1831 12th Avenue South

Nashville, TN 37203

City;

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 Total pages Schedule G: Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 8/8 Flynn, Josh B. (Mr.) 00051339 Date Payee name 03/02/2025 Cypress Republican PAC Amount (\$) Payee address; City; State; Zip Code \$7.00 8190 Barker Cypress Road #51 Reimbursement from political contributions intended Х Cypress, TX 77433 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee luncheon Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/22/2025 Daily Wire

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description [subscription	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
03/20/2025	Louder With Crowder		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$89.00	P.O. Box 261280		
Reimbursement from political contributions intended	Dallas, TX 75026		
PURPOSE	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Office Overhead/Rental Expense	[Check if Austin, TX, officeholder living expense
EXI ENDITORE		subscription	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

State; Zip Code

8

Amount (\$)

intended

Χ

Reimbursement from political contributions

\$269.54