

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00058340	2 Total pages filed: 19	
3 COMMITTEE NAME Texans for Toll-free Highways			OFFICE USE ONLY	
			Date Received ELECTRONICALLY FILED 07/07/2025	
			Date Hand-delivered or Date Postmarked	
			Receipt #	Amount
			Date Processed	
			Date Imaged	
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 317 Sidney Baker S, Suite 400-308 Kerrville, TX 78028			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	
		Sudie		
	NICKNAME	LAST	SUFFIX	
		Sartor		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3530 Eva Jane San Antonio, TX 78261			
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 488-5412			
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR)			
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination			
	<input type="checkbox"/> Runoff			
10 PERIOD COVERED	Month Day Year 01/01/2025 THROUGH Month Day Year 06/30/2025			
11 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE	
			<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Texans for Toll-free Highways	13 Filer ID (Ethics Commission Filers) 00058340
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,670.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 29.70
	4. TOTAL POLITICAL EXPENDITURES	\$ 4,600.70
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,628.67
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Sudie Sartor

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 19

17 COMMITTEE NAME Texans for Toll-free Highways		18 Filer ID (Ethics Commission Filers) 00058340
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,670.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 4,600.70
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/9 Rpt: 4/19
2 FILER NAME Texans for Toll-free Highways		3 Filer ID (Ethics Commission Filers) 00058340
4 Date 03/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIGELOW, SHERRY <hr/> 6 Contributor address; City; State; Zip Code KERRVILLE, TX 78029	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 03/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BODENBACH, PETER <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78250	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYAS, FORREST <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) ZEIT ENERGY
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulger, Linda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulger, Linda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/9 Rpt: 5/19
2 FILER NAME Texans for Toll-free Highways		3 Filer ID (Ethics Commission Filers) 00058340
4 Date 03/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulger, Linda 6 Contributor address; City; State; Zip Code San Antonio, TX 78258	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulger, Linda Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulger, Linda Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulger, Linda Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARDONE, FRANK V Contributor address; City; State; Zip Code SAN ANTONIO, TX 78248	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/9 Rpt: 6/19
2 FILER NAME Texans for Toll-free Highways		3 Filer ID (Ethics Commission Filers) 00058340
4 Date 01/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Chris 6 Contributor address; City; State; Zip Code San Antonio, TX 78261	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Chris Contributor address; City; State; Zip Code San Antonio, TX 78261	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Chris Contributor address; City; State; Zip Code San Antonio, TX 78261	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Chris Contributor address; City; State; Zip Code San Antonio, TX 78261	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Chris Contributor address; City; State; Zip Code San Antonio, TX 78261	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/9 Rpt: 7/19
2 FILER NAME Texans for Toll-free Highways		3 Filer ID (Ethics Commission Filers) 00058340
4 Date 06/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Chris <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78261	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EAKIN, JOHN <hr/> Contributor address; City; State; Zip Code HELOTES, TX 78023	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTOK, JOHN PATRICK <hr/> Contributor address; City; State; Zip Code SAFE HARBOR, FL 34695	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) COMPANION/CAREGIVER		Employer (See Instructions) SELF
Date 01/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falcon Borel , Linda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78260	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falcon Borel , Linda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78260	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/9 Rpt: 8/19
2 FILER NAME Texans for Toll-free Highways		3 Filer ID (Ethics Commission Filers) 00058340
4 Date 04/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falcon Borel , Linda 6 Contributor address; City; State; Zip Code San Antonio, TX 78260	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) retired
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falcon Borel , Linda Contributor address; City; State; Zip Code San Antonio, TX 78260	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 02/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falcon Borel , Linda Contributor address; City; State; Zip Code San Antonio, TX 78260	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 01/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grams, Clyde Contributor address; City; State; Zip Code Bulverde, TX 78163	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grams, Clyde Contributor address; City; State; Zip Code Bulverde, TX 78163	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/9 Rpt: 9/19
2 FILER NAME Texans for Toll-free Highways		3 Filer ID (Ethics Commission Filers) 00058340
4 Date 04/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWELL, ETHAN 6 Contributor address; City; State; Zip Code BULLARD, TX 75757	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) POWER
Date 04/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRK, PEGGY Contributor address; City; State; Zip Code FT WORTH, TX 76112	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) THEATER STAGE WORK		Employer (See Instructions) SELF EMPLOYED0
Date 01/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLOZA, JAMES Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 05/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLOZA, JAMES Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLOZA, JAMES Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/9 Rpt: 10/19
2 FILER NAME Texans for Toll-free Highways		3 Filer ID (Ethics Commission Filers) 00058340
4 Date 02/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMB , LEESA (Mr.) <hr/> 6 Contributor address; City; State; Zip Code BOERNE, TX 78015	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SALES ASSISTANT		9 Employer (See Instructions)
Date 03/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, ELIZABETH <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions)
Date 03/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, MICHAEL <hr/> Contributor address; City; State; Zip Code BRAZORIA, TX 77422	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SUPERVISOR		Employer (See Instructions)
Date 02/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marburger , Susan <hr/> Contributor address; City; State; Zip Code BRENDAN, TX 77833	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marburger , Susan <hr/> Contributor address; City; State; Zip Code BRENDAN, TX 77833	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/9 Rpt: 11/19
2 FILER NAME Texans for Toll-free Highways		3 Filer ID (Ethics Commission Filers) 00058340
4 Date 01/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROHL, HANS 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, DAVID Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, DAVID Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 03/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, DAVID Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 04/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, DAVID Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/9 Rpt: 12/19
2 FILER NAME Texans for Toll-free Highways		3 Filer ID (Ethics Commission Filers) 00058340
4 Date 05/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, DAVID <hr/> 6 Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, DAVID <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 03/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOWE, HENRY <hr/> Contributor address; City; State; Zip Code PASADENA, TX 77506	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) LONESTAR
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOWE, HENRY <hr/> Contributor address; City; State; Zip Code PASADENA, TX 77506	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) LONESTAR

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 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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/7 Rpt: 13/19	2 FILER NAME Texans for Toll-free Highways	3 Filer ID (Ethics Commission Filers) 00058340
4 Date 05/29/2025	5 Payee name AIRBNB	
6 Amount (\$) \$1,214.69 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 888 BRANNAN ST SAN FRANCISCO, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WASHINGTON DC VISIT TO ELAECTED OFFICIALS
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/19/2025	Payee name ALLSUPS #102360	
Amount (\$) \$19.29 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2025 NW LOOP STEPHENVILLE, TX 76401	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GASOLINE GRANBURY TRUE TEXAS PROJECT
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/21/2025	Payee name CACTUS CANYON	
Amount (\$) \$40.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 700 FM 407 WEST ARGYLE, TX 76226	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TRAVEL GRANBURY TRUE TEXAS PROJECT
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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 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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/7 Rpt: 14/19	2 FILER NAME Texans for Toll-free Highways	3 Filer ID (Ethics Commission Filers) 00058340
4 Date 01/15/2025	5 Payee name CONSTANT CONTAC	
6 Amount (\$) \$10.66 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1601 TRAPELO RD WALTHAM, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE/EMAIL
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/29/2025	Candidate/Officeholder name Office sought Office held	
Payee name CONSTANT CONTAC		
Amount (\$) \$167.36 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1601 TRAPELO RD WALTHAM, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE/EMAIL
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/26/2025	Candidate/Officeholder name Office sought Office held	
Payee name CONSTANT CONTAC		
Amount (\$) \$10.66 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1601 TRAPELO RD WALTHAM, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE/EMAIL
Complete <u>ONLY</u> if direct 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 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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/7 Rpt: 15/19	2 FILER NAME Texans for Toll-free Highways	3 Filer ID (Ethics Commission Filers) 00058340
4 Date 03/03/2025	5 Payee name CONSTANT CONTAC	
6 Amount (\$) \$167.36 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1601 TRAPELO RD WALTHAM, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE/EMAIL
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/28/2025	Candidate/Officeholder name Office sought Office held	
Payee name CONSTANT CONTAC		
Amount (\$) \$5.33 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1601 TRAPELO RD WALTHAM, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE/EMAIL
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/31/2025	Candidate/Officeholder name Office sought Office held	
Payee name CONSTANT CONTAC		
Amount (\$) \$167.36 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1602 TRAPELO ROAD WALTHAM, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE/EMAIL
Complete <u>ONLY</u> if direct 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 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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/7 Rpt: 16/19	2 FILER NAME Texans for Toll-free Highways	3 Filer ID (Ethics Commission Filers) 00058340
4 Date 04/28/2025	5 Payee name CONSTANT CONTAC	
6 Amount (\$) \$5.33 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1601 TRAPELO ROAD WALTHAM, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE/EMAIL
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/29/2025	Candidate/Officeholder name Office sought Office held	
Payee name CONSTANT CONTAC		
Amount (\$) \$167.36 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1601 TRAPELO ROAD WALTHAM, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE/EMAIL
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/02/2025	Candidate/Officeholder name Office sought Office held	
Payee name CONSTANT CONTAC		
Amount (\$) \$10.66 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1601 TRAPELO ROAD WALTHAM, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE/EMAIL
Complete <u>ONLY</u> if direct 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 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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/7 Rpt: 17/19	2 FILER NAME Texans for Toll-free Highways	3 Filer ID (Ethics Commission Filers) 00058340
4 Date 05/13/2025	5 Payee name CONSTANT CONTAC	
6 Amount (\$) \$5.33 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1601 TRAPELO ROAD WALTHAM, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE/EMAIL
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/29/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$167.36 <input type="checkbox"/> Expenditure from corporate funds	Payee name CONSTANT CONTAC Payee address; City; State; Zip Code 1601 TRAPELO ROAD WALTHAM, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE/EMAIL
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/30/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$186.55 <input type="checkbox"/> Expenditure from corporate funds	Payee name CONSTANT CONTAC Payee address; City; State; Zip Code 1601 TRAPELO ROAD WALTHAM, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE/EMAIL
Complete <u>ONLY</u> if direct 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 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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/7 Rpt: 18/19	2 FILER NAME Texans for Toll-free Highways	3 Filer ID (Ethics Commission Filers) 00058340
4 Date 02/12/2025	5 Payee name COSTCO GAS	
6 Amount (\$) \$20.31 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5611 UTSA BLVD SAN ANTONIO, TX 78249	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GAS
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/11/2025	Payee name FULL FUSION LLC	
Amount (\$) \$357.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 317 SIDNEY BAKER S, STE 400-308 KERRVILLE, TX 78028	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE/EMAIL
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/23/2025	Payee name SOUTHWEST AIRLINES	
Amount (\$) \$618.66 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2702 LOVE FIELD DRIVE DALLAS, TX 75235	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TRIP TO WASHINGTON DC TO VISIT ELECTED OFFICIALS
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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 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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/7 Rpt: 19/19	2 FILER NAME Texans for Toll-free Highways	3 Filer ID (Ethics Commission Filers) 00058340
4 Date 02/21/2025	5 Payee name TEXANS UNITING FOR REFORM AND FREEDOM	
6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 317 SIDNEY BAKER S, STE 400-308 KERRVILLE, TX 78028	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DONATION TO NON-PROFIT
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/24/2025	Payee name UNION PUB	
Amount (\$) \$20.48 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 201 MASSACHUSETTS AVENUE NE WASHINGTON , DC 20002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TRIP TO WASHINGTON DC
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/23/2025	Payee name UPS Store #3736	
Amount (\$) \$208.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 317 S Sidney Baker St #400 Kerrville, TX 78028	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FOR WASHINGTON DC TRIP
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held