FORM SPAC SPECIFIC-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The SPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 66 00056637 3 COMMITTEE NAME **OFFICE USE ONLY** Texans for Joe Straus Date Received **ELECTRONICALLY FILED** 07/15/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 90388 Date Hand-delivered or Date Postmarked San Antonio, TX 78209 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Randy NAME NICKNAME LAST **SUFFIX** Cain STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1800 Frost Bank Tower STREET **ADDRESS** 100 West Houston Street (Residence or Business) San Antonio, TX 78205 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1800 Frost Bank Tower MAILING **ADDRESS** 100 West Houston Street San Antonio, TX 78205 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (210) 242-7104 PHONE REPORT January 15 30th day before election Exceeded modified reporting limit **TYPE** Dissolution (Attach PAC-DR) 8th day before election X July 15 Runoff 10th day after campaign treasurer termination 10 PERIOD Month Year Month Day Year Day COVERED **THROUGH** 06/30/2025 01/01/2025 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Other Primary Runoff 11/04/2025 χ General Special

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Texans for Joe Straus			00056637	
14 COMMITTEE PURPOSE		CANDIDATE / OFFICEHOLDER NAME		
(Attach lists on plain paper to complete this report if necessary.)	Candidate Officeholder	OFFICE SOUGHT (candidate) / OFFICE HEL	.D (officeholder)	
CUPPORT				
SUPPORT (Candidate or Measure)		BALLOT IDENTIFICATION / #	ELECTI	ON DATE
OPPOSE (Candidate or Measure)			Month	Day Year
ASSIST (Officeholder)	Measure	DESCRIPTION		
15 CONTRIBUTION TOTALS		TRIBUTIONS OF \$50 OR LESS (OTHER THATES OF LOANS, OR CONTRIBUTIONS MADE LESS ITEMIZED	N PLEDGES,	\$ \$0.00
	2. TOTAL POLITICAL CO	ONTRIBUTIONS S, LOANS, OR GUARANTEES OF LOANS)		\$ \$0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED PO	LITICAL EXPENDITURES		\$ \$506.45
	4. TOTAL POLITICAL EX	(PENDITURES		\$ \$194,397.62
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CON- REPORTING PERIOD	FRIBUTIONS MAINTAINED AS OF THE LAST	DAY OF THE	\$ \$2,028,932.14
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMO DAY OF THE REPORTIN	UNT OF ALL OUTSTANDING LOANS AS OF G PERIOD	THE LAST	\$ \$0.00
16 AFFIDAVIT		I swear, or affirm, under penalty of per and correct and includes all informatio Title 15, Election Code.		
		Mr. Ra	ndy Cain	
AFFIX NOTARY	STAMP / SEAL ABOVE	Signature of Ca	mpaign Treasure	er
Sworn to and subscribed	before me, by the said	,t	his the	day
		n, witness my hand and seal of office.		
Signature of officer add	ministering oath Print	ed name of officer administering oath	Title of office	er administering oath

SUBTOTALS - SPAC

FORM SPAC **COVER SHEET PG 3**

			3 of 66
17 COMMITTE	E NAME	18 Filer ID	(Ethics Commission Filers)
Texans for	00056637		
19 SCHEDULE NAME OF S			SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	PR	\$
	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$
6.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$
7.	SCHEDULE E: LOANS		\$
8. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	6	\$ 179,989.58
9. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 1,823.19
10.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
11. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 12,584.85
12.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
13.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$ 32,716.20

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

	Credit Card Payment		The Instruction Guide explains how to co	omple	elete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 1/32 Rpt: 4/66		Texans for Joe Straus		00056637
4	Date	5	Payee name		•
	01/31/2025		Brewer, Meredith (Mrs.)		
6	Amount (\$)	7	Payee address; City; State; Zip Co	ode	
	\$2,314.07		2919 Trailend Dr.		
			San Antonio, TX 78209		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)) Description
	OF EXPENDITURE		Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.
					Check if Austin, TX, officeholder living expense Wages for political services.
					vvages for political services.
9	Complete ONLY if direct		Candidate/Officeholder name Office sou	Jaht	t Office held
	expenditure to benefit C/O				
_	Date	Т	Payee name		
	02/28/2025		Brewer, Meredith (Mrs.)		
	Amount (\$)	┢	Payee address; City; State; Zip Co	ode	
	\$2,314.08		2919 Trailend Dr.		
	,_,-,-				
			San Antonio, TX 78209		
	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 Wages for political services.
					wages for political services.
	Complete ONLY if direct	Ц (Candidate/Officeholder name Office sou	<u>l</u> uaht	t Office held
	expenditure to benefit C/O	Н		J	
	Date	Γ	Payee name		
	03/31/2025		Brewer, Meredith (Mrs.)		
	Amount (\$)	H	Payee address; City; State; Zip Co	ode	
	\$2,314.07		2919 Trailend Dr.		
			San Antonio, TX 78209		
	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.
	EXI ENDITORE				Check if Austin, TX, officeholder living expense
					Wages for political services.
	Complete ONLY if direct	Ц,	Candidate/Officeholder name Office sou	lapt	t Office held
	expenditure to benefit C/O		Januard Mille Sol	agrit	Cilice nelu
l					

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	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/32 Rpt: 5/66	Texans for Joe Straus 00056637
4	Date	5 Payee name
	04/30/2025	Brewer, Meredith (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,314.09	2919 Trailend Dr.
		San Antonio, TX 78209
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 Wages for political services.
		wages for political services.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_		
	Date	Payee name
	05/30/2025	Brewer, Meredith (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,314.07	2919 Trailend Dr.
		San Antonio, TX 78209
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Wages for political services.
		wages for political services.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date 06/30/2025	Payee name Prover Maradith (Mrs.)
		Brewer, Meredith (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,314.08	2919 Trailend Dr.
		San Antonio, TX 78209
	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 Wages for political services.
		wages for political services.
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
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SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explai		Expens Wages	se s/Contract Labor		Travel in District Travel Out of Dist OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)
L	Sch: 3/32 Rpt: 6/66	Texans for	Joe Straus					00056637	
4	Date	5 Payee name							
	01/06/2025	Bridgehead	, I.T.						
6	Amount (\$)	7 Payee addre	ss; City; Sta	ate; Zip Co	ode				
	\$31.83	1335 Centr	al Parkway South						
		Suite 100							
		San Antoni	o, TX 78232						
8	PURPOSE	(a) Category (S	ee Categories listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE		head/Rental Expense				outsio	de of Texas. Comp	olete Schedule T.
	LAPENDITORE					_		officeholder living	expense
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9	Complete ONLY if direct expenditure to benefit C/OI		ceholder name	Office sou	ugnt			Office he	liu
	Date	Payee name							
	02/01/2025	Bridgehead	, I.T.						
	Amount (\$)	Payee addre	ss; City; Sta	ate; Zip Co	ode				
	\$31.83	1335 Centr	al Parkway South						
		Suite 100							
		San Antoni	o, TX 78232						
	PURPOSE	(a) Category (S	ee Categories listed at the top of this	schedule)	(b)	Description			
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	expenditure to benefit C/O		conduct flame	Onice 300	agrit			Onice ne	
	Date	Payee name							
L	04/02/2025	Bridgehead	, I.T.						
	Amount (\$)	Payee addre	ss; City; Sta	ate; Zip Co	ode				
	\$31.83	1335 Centr	al Parkway South						
		Suite 100							
		San Antoni	o, TX 78232						
	PURPOSE	(a) Category (S	ee Categories listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE	Office Over	head/Rental Expense			_		de of Texas. Comp	
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	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	<u>l</u> uaht			Office he	ld
	expenditure to benefit C/O			55 550				200 110	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Le	gal Services he Instruction Guide explains		/ages	/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 4/32 Rpt: 7/66	Texans for Jo	e Straus					00056637	
4	Date	5 Payee name							
	04/01/2025	Bridgehead, I	.Т.						
6	Amount (\$)	7 Payee address	; City; State	e; Zip Co	de				
	\$31.83	1335 Central	Parkway South						
		Suite 100							
		San Antonio,	TX 78232						
8	PURPOSE	(a) Category (See	Categories listed at the top of this scl	hedule)	(b)	Description			
	OF EXPENDITURE	Office Overhe	ad/Rental Expense			느		de of Texas. Com	
						Monthly I.T. S		officeholder living	expense
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9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Office	holder name	Office sou	ght			Office he	eld
	experialiture to benefit C/OI	1							
	Date	Payee name							
	05/06/2025	Bridgehead, I	.Т.						
	Amount (\$)	Payee address	; City; State	; Zip Co	de				
	\$31.83	1335 Central	Parkway South						
		Suite 100							
		San Antonio,	TX 78232						
	PURPOSE OF	(a) Category (See	Categories listed at the top of this scl	hedule)	(b)	Description			
	EXPENDITURE	Office Overhe	ad/Rental Expense			=		de of Texas. Comp officeholder living	
						Monthly I.T. S			expense
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	06/02/2025	Payee name Bridgehead, I	т						
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	Amount (\$) \$31.83	Payee address	;	e; Zip Co	ue				
	Φ31.03		Parkway South						
		Suite 100							
		San Antonio,	TX 78232						
	PURPOSE OF		Categories listed at the top of this scl	hedule)	(b)	Description			
	EXPENDITURE	Office Overhe	ead/Rental Expense					de of Texas. Comp officeholder living	
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SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers	$\overline{}$
•	Sch: 5/32 Rpt: 8/66	Texans for Joe Straus 00056637	'
4	Date	5 Payee name	
	01/09/2025	Bush, Mary (Mrs.)	
6	Amount (\$) \$875.00	7 Payee address; City; State; Zip Code 244 Retama Place San Antonio, TX 78209	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense Committee office adminstrative consultant.	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	02/04/2025	Bush, Mary (Mrs.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$875.00	244 Retama Place	
		San Antonio, TX 78209	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Committee office adminstrative consultant.	
		Committee onice auminstrative consultant.	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	03/04/2025	Bush, Mary (Mrs.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$875.00	244 Retama Place	
		San Antonio, TX 78209	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.	
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense	
		Committee office adminstrative consultant.	
	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

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 Com		Gift/Awards/Memorials Legal Services The Instruction G	•		/ages	/Contract Labor		Travel Out of D OTHER (enter	oistrict a category not listed above)
1	Total pages Cabadula F1:	2						- 2	2	Filer ID	(Ethics Commission Filers)
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	Sch: 6/32 Rpt: 9/66		Texans for 3	oe Siraus						00056637	
4	Date	5	Payee name								
	04/01/2025		Bush, Mary	(Mrs.)							
6	Amount (\$)	7	Payee addres	s; City;	State	; Zip Co	de				
	\$875.00	ı	244 Retama			-					
	,			-							
		Ι.	Con Antonio	TV 70200							
		├	San Antonic								
8	PURPOSE OF			e Categories listed at t	he top of this sch	nedule)	(b)	Description			
	EXPENDITURE	'	Consulting I	Expense				_			mplete Schedule T.
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9	Complete ONLY if direct expenditure to benefit C/OI		anuidate/Offi	eholder name	(Office sou	ynt			Office h	ieiu
	Date		Payee name								
	05/01/2025		Bush, Mary	(Mrs.)							
	Amount (\$)		Payee addres	s; City;	State	; Zip Co	de				
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		,	San Antonic	TY 79200							
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	EXPENDITURE	'	Consulting I	Expense				=		de of Texas. Co officeholder livir	mplete Schedule T.
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L	06/03/2025		Bush, Mary	(Mrs.)							
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	expenditure to benefit C/OI				`		J			3001	

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 Cabadula F1:	· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1: Sch: 7/32 Rpt: 10/66	2 FILER NAME Texans for Joe Straus 3 Filer ID (Ethics Commission Filers) 00056637
4	Date	5 Payee name
	06/30/2025	Chase Cardmember Service
	00/30/2023	Chase Cardinember Service
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,539.86	PO Box 94014
		Palatine, IL 60094
Ļ	DUDDOCE	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit card payment for incurred itemized political
		expenditures.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialture to benefit C/Oi	7
Г	Date	Payee name
	01/07/2025	Chase Cardmember Service
_	Amount (\$)	Payee address; City; State; Zip Code
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	\$740.15	PO Box 94014
		Palatine, IL 60094
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Credit card payment for incurred itemized political
		expenditures.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-i
⊨	Data	Davies same
	Date	Payee name
	02/07/2025	Chase Cardmember Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$451.04	PO Box 94014
		Palatine, IL 60094
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	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit card payment for incurred itemized political
		expenditures.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Cabadula F1:		_
_	Total pages Schedule F1: Sch: 8/32 Rpt: 11/66	Texans for Joe Straus 3 Filer ID (Ethics Continussion Filers) 00056637	
4	Date	5 Payee name	
	02/20/2025	Chase Cardmember Service	
6	Amount (\$) \$2,391.32	Polatica II coop4	
		Palatine, IL 60094	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Credit card payment for incurred itemized political expenditures.	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
_	Date	Davies name	_
	03/19/2025	Payee name Chase Cardmember Service	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$987.60	PO Box 94014	
		Palatine, IL 60094	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Credit card payment for incurred itemized political	
		expenditures.	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	03/28/2025	Chase Cardmember Service	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$452.16	PO Box 94014	
		Palatine, IL 60094	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Credit card payment for incurred itemized political expenditures.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
			_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
_	Sch: 9/32 Rpt: 12/66	Texans for Joe Straus 00056637	
4	Date	5 Payee name	
	04/04/2025	Chase Cardmember Service	
6	Amount (\$) \$1,128.95	7 Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Credit Card Payment	
	EXPENDITURE	Check if Austin, TX, officeholder living expense Credit card payment for incurred itemized political expenditures.	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	04/25/2025	Chase Cardmember Service	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4,231.25	PO Box 94014	
		Palatine, IL 60094	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Credit card payment for incurred itemized political expenditures.	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	05/05/2025	Chase Cardmember Service	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$516.09	PO Box 94014	
		Palatine, IL 60094	
	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.	
		Credit card nayment for incurred itemized political	
		Credit card payment for incurred itemized political expenditures.	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
			_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	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: 10/32 Rpt: 13/66	Texans for Joe Straus 00056637
4	Date	5 Payee name
	05/23/2025	Chase Cardmember Service
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$208.62	PO Box 94014
		Palatine, IL 60094
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit card payment for incurred itemized political
		expenditures.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/26/2025	Chase Cardmember Service
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$1,044.93	PO Box 94014
		Palatine, IL 60094
	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 incurred itemized political
		expenditures.
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-
Г	Date	Payee name
	01/07/2025	Davis Kaufman PLLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	508 West 14th Street
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Political consulting/Legal Services
		Folitical consulting/Legal Services
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
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SCHEDULE F1

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

Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/32 Rpt: 14/66	Texans for Joe Straus 00056637
4	Date	5 Payee name
	02/04/2025	Davis Kaufman PLLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,500.00	508 West 14th Street
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Political consulting/Legal Services
		Tonada dendalang 2000
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
3	expenditure to benefit C/O	
_	Data	
	Date	Payee name Davis Koufman DLLC
	03/11/2025	Davis Kaufman PLLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	508 West 14th Street
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Political consulting/Legal Services
		1 ollucal consulting/Legal Services
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	Data	
	Date	Payee name
	04/04/2025	Davis Kaufman PLLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	508 West 14th Street
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense
		Check if Austin, TX, officeholder living expense Political consulting/Legal Services
		Political consulting/Legal Services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
<u> </u>	T. 1 0 1 1 54	
1	Total pages Schedule F1: Sch: 12/32 Rpt: 15/66	2 FILER NAME Texans for Joe Straus 3 Filer ID (Ethics Commission Filers) 00056637
4	Date	5 Payee name
	05/02/2025	Davis Kaufman PLLC
6	Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 508 West 14th Street Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political consulting/Legal Services
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/05/2025	Davis Kaufman PLLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	508 West 14th Street
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Political consulting/Legal Services
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/16/2025	Department of Treasury
	Amount (\$)	Payee address; City; State; Zip Code
	\$18,769.00	Internal Revenue Service Center
		Ogden, UT 84201
	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
		1120 POL Taxes
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/32 Rpt: 16/66	Texans for Joe Straus 00056637
4	Date	5 Payee name
	01/10/2025	Department of Treasury
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$7,343.33	Internal Revenue Service Center
		Ogden, UT 84201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Federal Payroll Taxes
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OH	
_		
	Date	Payee name
	01/31/2025	Department of Treasury
	Amount (\$)	Payee address; City; State; Zip Code
	\$84.00	Internal Revenue Service Center
		Ogden, UT 84201
	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 Federal Unemployment Taxes
		rederal Oriemployment Taxes
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
-	Data	Para a same
	Date 02/11/2025	Payee name Department of Treasury
	02/11/2025	
	Amount (\$)	Payee address; City; State; Zip Code
	Amount (\$) \$1,734.30	
		Payee address; City; State; Zip Code Internal Revenue Service Center
		Payee address; City; State; Zip Code
	\$1,734.30 PURPOSE	Payee address; City; State; Zip Code Internal Revenue Service Center
	\$1,734.30	Payee address; City; State; Zip Code Internal Revenue Service Center Ogden, UT 84201 (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.
	\$1,734.30 PURPOSE OF	Payee address; City; State; Zip Code Internal Revenue Service Center Ogden, UT 84201 (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
	\$1,734.30 PURPOSE OF	Payee address; City; State; Zip Code Internal Revenue Service Center Ogden, UT 84201 (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.
	\$1,734.30 PURPOSE OF EXPENDITURE	Payee address; City; State; Zip Code Internal Revenue Service Center Ogden, UT 84201 (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 Federal Payroll Taxes
	\$1,734.30 PURPOSE OF	Payee address; City; State; Zip Code Internal Revenue Service Center Ogden, UT 84201 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if Austin, TX, officeholder living expense Federal Payroll Taxes Candidate/Officeholder name Office sought Office held
	\$1,734.30 PURPOSE OF EXPENDITURE Complete ONLY if direct	Payee address; City; State; Zip Code Internal Revenue Service Center Ogden, UT 84201 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if Austin, TX, officeholder living expense Federal Payroll Taxes Candidate/Officeholder name Office sought Office held
	\$1,734.30 PURPOSE OF EXPENDITURE Complete ONLY if direct	Payee address; City; State; Zip Code Internal Revenue Service Center Ogden, UT 84201 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if Austin, TX, officeholder living expense Federal Payroll Taxes 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 Commit

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 14/32 Rpt: 17/66	Texans for Joe Straus 00056637	
4	Date	5 Payee name	
	03/17/2025	Department of Treasury	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,734.26	Internal Revenue Service Center	
		Ogden, UT 84201	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Federal Payroll Taxes	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
٥	expenditure to benefit C/O		
_	Date	Davida martia	_
	04/15/2025	Payee name Department of Treasury	
			_
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,734.30	Internal Revenue Service Center	
	!		
		Ogden, UT 84201	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	!	Federal Payroll Taxes	
	!	- Sastar ayısı rados	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
	Data	Γ -	_
	Date	Payee name Department of Treequity	
	05/16/2025	Department of Treasury	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,734.24	Internal Revenue Service Center	
		Ogden, UT 84201	
	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	
		Federal Payroll Taxes	
	Computate ONLY if dispost	Candidate/Officeholder name Office acusht	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H	
	<u> </u>		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 15/32 Rpt: 18/66	Texans for Joe Straus 00056637
4	Date	5 Payee name
	06/13/2025	Department of Treasury
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,734.28	Internal Revenue Service Center
		Ogden, UT 84201
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Federal Payroll Taxes
		reactain ayron raxes
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	_	
	Date	Payee name
	02/25/2025	Embry Communications
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	2705 Long Lasso Passo
		Leander, TX 78641
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Communications Consultant
		Communications Consultant
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date	Payee name
	03/28/2025	Embry Communications
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	2705 Long Lasso Passo
		Leander, TX 78641
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Communications Consultant
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Oriana.o to borioni O/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		mmittee	Gift/Awards/Memorials Legal Services The Instruction G	•		/ages	/Contract Labor		Travel Out of D OTHER (enter	istrict a category not listed above)
1	Total pages Schodule F1:	2	EII ED NAME				1		2	Eilor ID	(Ethics Commission Filore)
	Total pages Schedule F1:								3		(Ethics Commission Filers)
	Sch: 16/32 Rpt: 19/66		Texans for	Joe Straus						00056637	
4	Date	5	Payee name								
	05/20/2025		Embry Com	munications							
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	de				
	\$5,000.00			Lasso Passo	,	•					
	, , , , , , , , ,		9								
			Loomdon T	/ 700 / 1							
		_	Leander, T			 -					
8	PURPOSE OF	(a)		ee Categories listed at	the top of this sch	edule)	(b)	Description			
	EXPENDITURE		Consulting	Expense				_			mplete Schedule T.
								Communicati		officeholder livin Consultar	
								Johnnandali	J113	Jonisaliai	
<u>_</u>	Complete ONLY !! -!!	<u> </u>	Condidate 10"	oobold== :=		Office	al-+			O#:!	vold
9	Complete ONLY if direct expenditure to benefit C/OI		Januidate/Offi	ceholder name	C	Office sou	ynt			Office h	ieiu
	Date		Payee name								
	03/11/2025		George & B	arbara Bush Fo	oundation						
	Amount (\$)		Payee addre	ss; City;	State;	; Zip Co	de				
	\$10,000.00		10000 Mem	orial Dr.							
			Suite 900								
			Houston, T	x 77024							
	DUDDOS-	ļ.,					<i>(</i> 1.)				
	PURPOSE OF	(a)		ee Categories listed at		edule)	(a)	Description	outc:	do of Toyon Co	mploto Schodulo T
	EXPENDITURE			ns/Donations Ma Officeholder/Pol		ittee		=		officeholder livin	mplete Schedule T. ng expense
			Carialdate/(Jinceriolael/P01	ideal Collilli	iiii.ee		Charitable Co			• P
\vdash	Complete ONLY if direct		Candidate/Offi	ceholder name		Office sou	aht			Office h	neld
	expenditure to benefit C/O						g			311100 11	- -
_	Data	_									
	Date		Payee name								
	01/03/2025		HEB								
	Amount (\$)		Payee addre		State;	; Zip Co	de				
	\$5.08		999 E Bass	e Rd.							
			San Antonio	o, TX 78209							
	PURPOSE	(a)	Category (S	ee Categories listed at	the top of this sch	edule)	(b)	Description			
	OF EXPENDITURE			age Expense		<i>'</i>		Check if travel			mplete Schedule T.
	EVLEINDIIOKE			•						officeholder livin	
								Committee O	ffic	e Food and	l Beverages
		L									
	Complete ONLY if direct		Candidate/Offi	ceholder name	C	Office sou	ght			Office h	neld
	expenditure to benefit C/O	Н									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	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: 17/32 Rpt: 20/66	Texans for Joe Straus 00056637
4	Date	5 Payee name
	01/06/2025	Intuit
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5.60	2632 Marine Way
		Mountain View, CA 94043
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 Vendor payment processing fees.
		Vendor payment processing rees.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
\vdash	Date	Payee name
	02/03/2025	Intuit
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.60	2632 Marine Way
		Mountain View, CA 94043
	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
		Vendor payment processing fees.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	
	Date	Payee name
	02/24/2025	Intuit
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.87	2632 Marine Way
		Mountain View, CA 94043
	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
		Vendor payment processing fees.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

Advertising Expense Ever Accounting/Banking Fee: Consulting Expense Foor Contributions/ Donations Made By - Gift/

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica		nmittee	Legal Services		inting Exp ilaries/Wa		e /Contract Labor		OTHER (enter a	strict a category not listed	d above)
	Credit Card Payment			The Instruction G	uide explains how	to con	nple	te this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Comm	ission Filers)
	Sch: 18/32 Rpt: 21/66		Texans for .	Joe Straus						00056637		
4	Date	5	Payee name					•				
	03/03/2025		Intuit									
6	Amount (\$)	7	Payee addres	ss; City;	State; Z	in Cod	de					
•	\$3.74	ľ	2632 Marine		, –	.,						
	, , , ,											
			Mountain Vi	ew, CA 94043								
_		ļ.,										
8	PURPOSE OF	(a)		ee Categories listed at t		e) ((b)	Description	ata:	do of Toyoo Com	valete Cebedule T	
	EXPENDITURE		Office Overl	nead/Rental Ex _l	pense			=		officeholder living	nplete Schedule T. g expense	
								Vendor paym				
9	Complete ONLY if direct		Candidate/Offi	ceholder name	Offic	e soug	ıht			Office h	eld	
	expenditure to benefit C/OI	Н				J						
=	Date	Π	Payee name									
	03/10/2025		Intuit									
	Amount (\$)	⊢	Payee addres	ss; City;	State; Z	in Coo	10					
	\$1.87		2632 Marine	-	State, Z	ір Сос	iC.					
	Ψ1.07		2002 Mailin	e vvay								
			Manuatain N	04 04040								
		<u> </u>		ew, CA 94043								
	PURPOSE OF	(a)		ee Categories listed at t		e) ((b)	Description	ata:	do of Toyoo Com	valete Cebedule T	
	EXPENDITURE		Office Overl	nead/Rental Ex _l	pense			=		officeholder living	nplete Schedule T. g expense	
								Vendor paym				
	Complete ONLY if direct		Candidate/Offi	ceholder name	Offic	e soug	ht			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	03/27/2025		Intuit									
	Amount (\$)		Payee addres	ss; City;	State; Z	in Cod	de					
	\$5.60		2632 Marine	-	, –	.,						
	, , , ,											
			Mountain Vi	ew, CA 94043								
	PURPOSE	(0)				- 1,	(h)	Description				
	OF	(a)		e Categories listed at t nead/Rental Ex		e)	(D)	Description Check if travel of	outsi	de of Texas. Com	nplete Schedule T.	
	EXPENDITURE		Office Over	ieau/Reiliai Ex	pense			ш		officeholder livin		
								Vendor paym	en	t processing	g fees.	
	Complete ONLY if direct		Candidate/Offi	ceholder name	Offic	e soug	jht			Office h	eld	
	expenditure to benefit C/OI	Н										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 19/32 Rpt: 22/66	Texans for Joe Straus 00056637
4	Date	5 Payee name
	04/03/2025	Intuit
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1.87	2632 Marine Way
		Mountain View, CA 94043
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 Vendor payment processing fees.
		Vendor payment processing rees.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
F	Date	Payee name
	05/01/2025	Intuit
H	Amount (\$)	Payee address; City; State; Zip Code
	\$5.60	2632 Marine Way
	, , , ,	
		Mountain View, CA 94043
	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 Vendor payment processing fees.
		Vendor payment processing lees.
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	Davida marea
	05/19/2025	Payee name Intuit
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.87	2632 Marine Way
		Mountain View, CA 94043
	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 Vendor payment processing fees.
		vendor payment processing rees.
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		
l		

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

	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: 20/32 Rpt: 23/66	Texans for Joe Straus	00056637
4	Date	5 Payee name	•
	06/04/2025	Intuit	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$5.60	2632 Marine Way	
		Mountain View, CA 94043	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) De	escription
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		V	endor payment processing fees.
			or don paymont processing room
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
_	Date	Payee name	
	01/31/2025	Korstad, Tara (Mrs.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,359.18	2808 Mossback Lane	
		Austin, TX 78739	
	PURPOSE OF	· · · · · · · · · · · · · · · · · · ·	escription
	EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		l L	/ages for political/administrative services.
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	02/28/2025	Korstad, Tara (Mrs.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,359.19	2808 Mossback Lane	
		Austin, TX 78739	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) De	escription
	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense /ages for political/administrative services.
		ļ vv	ages for political/autilitiestrative services.
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	•	Office field

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

ordan dara i ayınısın	The Instruction Guide explains how to co	omplete this	form.		
1 Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
Sch: 21/32 Rpt: 24/66	Texans for Joe Straus			00056637	
4 Date	5 Payee name				
03/31/2025	Korstad, Tara (Mrs.)				
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode			
\$2,359.18	2808 Mossback Lane				
	Austin, TX 78739				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Descr	ription		
OF	Salaries/Wages/Contract Labor			de of Texas. Com	plete Schedule T.
EXPENDITURE				officeholder living	
		Wage	es for polition	cal/administr	rative services.
		<u> </u>			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ught		Office he	eld
Date	Payee name				
04/30/2025	Korstad, Tara (Mrs.)				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$2,359.19	2808 Mossback Lane				
	Austin, TX 78739				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Descr	ription		
OF EXPENDITURE	Salaries/Wages/Contract Labor				plete Schedule T.
-				officeholder living	rative services.
		vvage	es for politic	zaraaministi	alive services.
Complete ONLY if direct	Candidate/Officeholder name Office sou	ınht		Office he	əld
expenditure to benefit C/O		agiit		Omoc no	Sid
Date	Dougo nama				
05/30/2025	Payee name Korstad, Tara (Mrs.)				
		odo			
Amount (\$) \$2,359.19	Payee address; City; State; Zip Co 2808 Mossback Lane	oue			
Φ2,339.19	2000 MOSSBACK Latte				
	Austin TV 70720				
	Austin, TX 78739	1			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Descr		do of Toyon Com	unloto Sahadulo T
EXPENDITURE	Salaries/Wages/Contract Labor			officeholder living	plete Schedule T. g expense
					rative services.
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught		Office he	eld
expenditure to benefit C/O	Н				

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
1	Sch: 22/32 Rpt: 25/66	2 FILER NAME Texans for Joe Straus 3 Filer ID (Ethics Commission Filers) 00056637
4	Date	5 Payee name
	06/30/2025	Korstad, Tara (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,359.19	2808 Mossback Lane
		Austin, TX 78739
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Wages for political/administrative services.
		Transport of political action of 1900.
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiditure to benefit C/O	
	Date	Payee name
	01/09/2025	LHP+Company Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$7,500.00	PO Box 29382
		Austin, TX 78755
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Political consultant and related expenses.
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiantiale to belief cross	'
	Date	Payee name
	02/04/2025	LHP+Company Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$7,500.00	PO Box 29382
		Austin, TX 78755
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Political consultant and related expenses.
		Political consultant and related expenses.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	

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

Sch: 23/32 Rpt: 26/66 Texans for Joe Straus 00056637 Payee name LHP+Company Inc. Amount (\$) \$7,500.00 \$7,500.00 \$7,500.00 Texans for Joe Straus O0056637 Texans for Joe Straus 00056637 Ode LHP+Company Inc. Texans for Joe Straus O0056637 Ode LHP+Company Inc. Ode PO Box 29382 Austin, TX 78755 Austin, TX 78755 Austin, TX 78755 Austin, TX 78755 Austin, TX 78755 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political consultant and related expenses.	Date 03/04/2025 Amount (\$) Purpose OF EXPENDITURE Texans for Joe Straus Texans for Joe Straus Texans for Joe Straus Furpose Straus Texans for Joe Straus Furpose Straus Texans for Joe Straus Texans for Joe Straus Texans for Joe Straus Texans for Joe Straus Straus Texans for Joe Straus Texans for Joe Straus Straus Texans for Joe Straus Straus Texans for Joe Straus Texan	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
4 Date 03/04/2025 5 Payee name LHP+Company Inc. 6 Amount (\$)	Date 03/04/2025 Amount (\$) \$7,500.00 PO Box 29382 Austin, TX 78755 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense Candidate/Officeholder name Candidate/Officeholder name Candidate/Officeholder name Date The property of Payee name LHP+Company Inc. The property of Payee name The property of	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
O3/04/2025 LHP+Company Inc.	O3/04/2025 Amount (\$) \$7,500.00 PO Box 29382 Austin, TX 78755 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense Candidate/Officeholder name Candidate/Officeholder name City; State; Zip Code PO Box 29382 (b) D Complete ONLY if direct Candidate/Officeholder name Office sought	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
7 Payee address; City; State; Zip Code \$7,500.00 \$7 Payee address; City; State; Zip Code PO Box 29382 Austin, TX 78755 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder Iving expense Political consultant and related expenses. 9 Complete QNLY if direct expenditure to benefit C/OH Date 04/01/2025 Amount (\$) Payee name LHP+Company Inc. Amount (\$) Payee address; City; State; Zip Code PO Box 29382 Austin, TX 78755 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Invalid Invalidation of Texas. Complete Schedule T. Check if Invalidation, X, officeholder Iving expense	Amount (\$) \$7 Payee address; City; State; Zip Code PO Box 29382 Austin, TX 78755 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense Complete ONLY if direct Candidate/Officeholder name Candidate/Officeholder name Office sought	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
\$7,500.00 PO Box 29382 Austin, TX 78755 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political consultant and related expenses. 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name LHP+Company Inc. Amount (\$) Payee address; City; State; Zip Code \$8,751.99 PO Box 29382 Austin, TX 78755 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if Tavel outside of Texas. Complete Schedule T. Check if Tavel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	\$7,500.00 PO Box 29382 Austin, TX 78755 PURPOSE OF Consulting Expense Complete ONLY if direct Candidate/Officeholder name Office sought	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Austin, TX 78755 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Laustin, TX, officeholder living expense Political consultant and related expenses. 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name LHP+Company Inc. Amount (\$) Payee address; City; State; Zip Code PO Box 29382 Austin, TX 78755 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if Austin, TX, officeholder living expense	Austin, TX 78755 PURPOSE OF Consulting Expense Complete ONLY if direct Austin, TX 78755 (a) Category (See Categories listed at the top of this schedule) Consulting Expense Candidate/Officeholder name Office sought	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Candidate/Officeholder name Cand	PURPOSE OF Consulting Expense (a) Category (See Categories listed at the top of this schedule) Consulting Expense Complete ONLY if direct Candidate/Officeholder name Office sought	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Candidate/Officeholder name Cand	PURPOSE OF Consulting Expense (a) Category (See Categories listed at the top of this schedule) Consulting Expense Complete ONLY if direct Candidate/Officeholder name Office sought	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
OF EXPENDITURE Consulting Expense	OF EXPENDITURE Consulting Expense Complete ONLY if direct Candidate/Officeholder name Office sought	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
POlitical consultant and related expenses. Complete ONLY if direct expenditure to benefit C/OH	Complete ONLY if direct Candidate/Officeholder name Office sought	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH Date 04/01/2025	Complete ONLY if direct Candidate/Officeholder name Office sought	Political consultant and related expenses.
Date 04/01/2025 Payee name LHP+Company Inc. Amount (\$) Payee address; City; State; Zip Code \$8,751.99 PO Box 29382 Austin, TX 78755 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
expenditure to benefit C/OH Date		
O4/01/2025 LHP+Company Inc. Amount (\$)		Office held
O4/01/2025 LHP+Company Inc. Amount (\$) \$8,751.99 PO Box 29382 Austin, TX 78755 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Amount (\$) Payee address; City; State; Zip Code PO Box 29382 Austin, TX 78755 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	. ayou mame	
\$8,751.99 PO Box 29382 Austin, TX 78755 PURPOSE OF Consulting Expense (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	1 7	
Austin, TX 78755 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	\$6,731.99 PO BOX 29362	
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	Austin TY 78755	
OF EXPENDITURE Consulting Expense Consulting Expense Consulting Expense Consulting Expense Consulting Expense		Opposition
Check if Austin, TX, officeholder living expense	OF Consulting Expense	
Political consultant and related expenses.	EXPENDITORE	Check if Austin, TX, officeholder living expense
	P	Political consultant and related expenses.
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	Complete ONLY if direct Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OH		Office field
Date Payee name	Date Pavee name	
05/02/2025 LHP+Company Inc.		
Amount (\$) Payee address; City; State; Zip Code	Amount (\$) Payee address; City; State; Zip Code	
\$7,500.00 PO Box 29382	\$7,500.00 PO Box 29382	
Austin, TX 78755	Austin, TX 78755	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) D	Description
OF Capaulting Evapones Complete Schedule T	Consulting Expense	Check if travel outside of Texas. Complete Schedule T.
EVENDITURE Consulting Expense	L L	
EXPENDITURE Consulting Expense Consulting Expense Consulting Expense		The state of the s
EVENDITURE Consulting Expense	Complete ONLY if direct Candidate/Officeholder name Office sought	Office held
EXPENDITURE Consulting Expense Check if Austin, TX, officeholder living expense Political consultant and related expenses. Complete ONLY if direct Candidate/Officeholder name Office sought Office held	expenditure to benefit C/OH	
EXPENDITURE Consulting Expense Check if Austin, TX, officeholder living expense Political consultant and related expenses.	oxportations to borious of or i	
EXPENDITURE Consulting Expense Check if Austin, TX, officeholder living expense Political consultant and related expenses. Complete ONLY if direct Candidate/Officeholder name Office sought Office held	oxportation to sortonic oyour	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 24/32 Rpt: 27/66	Texans for Joe Straus 00056637
4	Date	5 Payee name
	06/05/2025	LHP+Company Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$7,500.00	PO Box 29382
		Austin, TX 78755
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Political consultant and related expenses.
		Totalogi obtioditati and foldiog oxportoco.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
5	expenditure to benefit C/O	
_	Data	
	Date	Payee name Millon and Company B C
	01/30/2025	Millan and Company P.C.
	Amount (\$)	Payee address; City; State; Zip Code
	\$557.50	817 San Antonio St., Suite L17
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Accounting Fees and Ethics Compliance
		Accounting rees and Lunes Compilance
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	02/21/2025	Millan and Company P.C.
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,454.75	817 San Antonio St., Suite L17
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Accounting Fees and Ethics Compliance
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experience to benefit eye.	

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

	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: 25/32 Rpt: 28/66	Texans for Joe Straus	00056637
4	Date	5 Payee name	
	03/13/2025	Millan and Company P.C.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$60.00	817 San Antonio St., Suite L17	
		Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if trave	el outside of Texas. Complete Schedule T.
			in, TX, officeholder living expense Fees and Ethics Compliance
		Accounting	rees and Eulics Compliance
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ľ	expenditure to benefit C/OI		Cine neid
_	Date	Payee name	
	05/01/2025	Millan and Company P.C.	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$60.00	817 San Antonio St., Suite L17	
	φ00.00	or sarranomo st., sano err	
		Austin, TX 78701	
	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if trave	el outside of Texas. Complete Schedule T.
	EXPENDITURE	/tecounting/banking	in, TX, officeholder living expense
		Accounting	Fees and Ethics Compliance
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	05/15/2025	Millan and Company P.C.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,199.48	817 San Antonio St., Suite L17	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if trave	el outside of Texas. Complete Schedule T.
			in, TX, officeholder living expense Fees and Ethics Compliance
		Accounting	rees and Ethics Compilance
L	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·	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 Salaries (Contract Labor

	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: 26/32 Rpt: 29/66	Texans for Joe Straus 00056637
4	Date	5 Payee name
	01/03/2025	Nueces Marketing Partners LTD
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$992.25	1920 Nacogdoches Rd.
		San Antonio, TX 78209
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.
		Committee office rent.
		Continued office felic.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
۱	expenditure to benefit C/O	
\vdash	Date	Power name
	01/30/2025	Payee name Nueces Marketing Partners LTD
		<u> </u>
	Amount (\$)	Payee address; City; State; Zip Code
	\$992.25	1920 Nacogdoches Rd.
		San Antonio, TX 78209
	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
		Committee office rent.
		Committee onloc rent.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	03/01/2025	Nueces Marketing Partners LTD
	Amount (\$)	Payee address; City; State; Zip Code
	\$992.25	1920 Nacogdoches Rd.
		04.4
		San Antonio, TX 78209
	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
		Committee office rent.
		Sommet one rent.
	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 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			Legal Services		Salaries/W		e /Contract Labor		OTHER (enter a	strict a category not listed ab	ove)
	Credit Card Payment			The Instruction Gu	ıide explains h	ow to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commissi	on Filers)
	Sch: 27/32 Rpt: 30/66		Texans for J	oe Straus						00056637		
4	Date	5	Payee name									
	04/01/2025			keting Partners	LTD							
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Co	de					
	\$992.25		1920 Nacog	doches Rd.								
			San Antonio	, TX 78209								
8	PURPOSE	(a)	Category (Se	e Categories listed at tl	ne ton of this scher	dula)	(b)	Description				
	OF EXPENDITURE	ľ		nead/Rental Exp		uuie)	` '		outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE			·				_		officeholder living	g expense	
								Committee of	ffice	e rent.		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	eholder name	Of	ffice sou	ght			Office h	eld	
		_										
	Date		Payee name									
	05/01/2025		Nueces Mar	keting Partners	LTD							
	Amount (\$)		Payee address		State;	Zip Co	de					
	\$992.25		1920 Nacog	doches Rd.								
			San Antonio	, TX 78209								
	PURPOSE	(a)	Category (Se	e Categories listed at tl	ne top of this sched	dule)	(b)	Description				
	OF EXPENDITURE		Office Overh	nead/Rental Exp	oense			=			plete Schedule T.	
								Committee of		officeholder living	g expense	
	Complete ONLY if direct		Candidate/Offic	eholder name	Of	ffice sou	ght			Office h	eld	
	expenditure to benefit C/OI					•	•					
-	Date	Π	Payee name									
	06/01/2025		•	keting Partners	LTD							
	Amount (\$)		Payee addres			Zip Co	de					
	\$992.25		1920 Nacog	-	Otato,	Z.p 00	uo					
	7002.20			acccc . ta.								
			San Antonio	TX 78209								
	PURPOSE	(0)				1	(h)	Description				
	OF	(a)		e Categories listed at the		dule)	(D)	Description Check if travel of	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		Office Over	icad/iteritar Exp	Jense			ш		officeholder living		
								Committee of	ffice	e rent.		
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	Of	ffice sou	ght			Office h	eld	
	experiulture to beriefft C/Of	П										

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

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.			
1	Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
	Sch: 28/32 Rpt: 31/66	Texans for Joe Straus			00056637	
4	Date	5 Payee name				
	04/02/2025	Plum Interests, LLC				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$68.20	115 Circle Street				
		San Antonio, TX 78209				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description			
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if tra	avel outsi	ide of Texas. Com	
	LAI LINDITORE		_		, officeholder living	
			Computer	SOILW	are for comr	nillee onice.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought			Office he	7ld
9	expenditure to benefit C/O				Office fi	eiu
	<u> </u>					
	Date	Payee name				
	06/03/2025	Plum Interests, LLC				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$68.20	115 Circle Street				
		San Antonio, TX 78209				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b)	Description			
	EXPENDITURE	Office Overhead/Rental Expense			ide of Texas. Com , officeholder living	
			_		are for comr	
			·			
	Complete ONLY if direct	Candidate/Officeholder name Office sought			Office he	eld
	expenditure to benefit C/O					
	Date	Payee name				
	03/26/2025	RPSA Attorneys At Law				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$193.75	755 East Mulberry				
	¥2000	Suite 200				
		San Antonio, TX 78212				
	DUDDOCE		5			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Legal Services	Description Check if tra		ide of Texas. Com	plete Schedule T.
	EXPENDITURE	Legal Services			, officeholder living	
			Legal work	k on b	ehalf of com	mittee.
	Complete ONLY if direct	Candidate/Officeholder name Office sought			Office h	eld
	expenditure to benefit C/O	1				
_						

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Spectrum Business 6 Amount (\$) 7 Payee address; City; State; Zip Code PO Box 660815 Dallas, TX 75266 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Committee Office Utilities.
4 Date 01/03/2025 5 Payee name Spectrum Business 6 Amount (\$) \$133.21 7 Payee address; City; State; Zip Code PO Box 660815 Dallas, TX 75266 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Office Overhead/Rental Expense Committee Office Utilities. Office held Date Payee name
Spectrum Business 6 Amount (\$) \$133.21 PO Box 660815 Dallas, TX 75266 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Committee Office Utilities. (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Committee Office Utilities. 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name
7 Payee address; City; State; Zip Code \$133.21 PO Box 660815 Dallas, TX 75266 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Office Overhead/Rental Expense Committee Office Utilities. Office Held Date Payee name
\$133.21 PO Box 660815 Dallas, TX 75266 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Office Overhead/Rental Expense Committee Office Utilities. Candidate/Officeholder name Date Payee name
Dallas, TX 75266 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Committee Office Utilities. 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Committee Office Utilities. 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Committee Office Utilities. 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name
OF EXPENDITURE Office Overhead/Rental Expense Office Overhead/Rental Expense Office Overhead/Rental Expense Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Committee Office Utilities. 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name
Office Overhead/Rental Expense Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Committee Office Utilities. 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name
9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name Committee Office Utilities. Committee Office Utilities.
9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name Candidate/Officeholder name Office sought Office held
Date Payee name
Date Payee name
- ayee name
- ayee name
01/30/2025 Spectrum Business
Amount (\$) Payee address; City; State; Zip Code
\$133.21 PO Box 660815
Dallas, TX 75266
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 Committee Office Utilities.
Complete ONLY if direct Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OH
Date Payee name
03/01/2025 Spectrum Business
Amount (\$) Payee address; City; State; Zip Code
\$133.22 PO Box 660815
\$133.22 PO Box 660815
Dallas, TX 75266
Dallas, TX 75266 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description
Dallas, TX 75266 PURPOSE (a) Categories (See Categories listed at the top of this schedule) (b) Description
Dallas, TX 75266 PURPOSE OF OF OF OF OF OF OF COPENDATURE OF
Dallas, TX 75266 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Dallas, TX 75266 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 Candidate/Officeholder name Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Committee Office Utilities.
Dallas, TX 75266 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Committee Office Utilities.
Dallas, TX 75266 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 Candidate/Officeholder name Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Committee Office Utilities.

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 fo	rm.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 30/32 Rpt: 33/66	Texans for Joe Straus	00056637
4	Date	5 Payee name	•
	04/01/2025	Spectrum Business	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$134.46	PO Box 660815	
		Dallas, TX 75266	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descript	tion
	OF EXPENDITURE	Office Overhead/Rental Expense	if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE		if Austin, TX, officeholder living expense ttee Office Utilities.
		Commi	title Office Offities.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Office field
_	Date		
	05/01/2025	Payee name Spectrum Business	
		·	
	Amount (\$) \$134.46	Payee address; City; State; Zip Code PO Box 660815	
	\$134.40	PO BOX 000815	
		Dollar TV 7F2CC	
		Dallas, TX 75266	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descript	tion (if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Nertial Experise I	r if Austin, TX, officeholder living expense
		,	ttee Office Utilities.
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	06/01/2025	Spectrum Business	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$134.46	PO Box 660815	
		Dallas, TX 75266	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descript	tion
	OF EXPENDITURE	onice overnead/Nental Expense	x if travel outside of Texas. Complete Schedule T.
	-		if Austin, TX, officeholder living expense ttee Office Utilities.
		Commi	tice office duffices.
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	•	C555.5

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: Sch: 31/32 Rpt: 34/66	2 FILER NAME Texans for Joe Straus 3 Filer ID (Ethics Commission Filers) 00056637
4	Date 01/02/2025	5 Payee name Texas State History Museum Foundation
6	Amount (\$) \$10,000.00	7 Payee address; City; State; Zip Code 1700 Congress Ave. Austin, TX 78701
8	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 Contribution.
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 04/30/2025	Payee name Texas Workforce Commission
	Amount (\$) \$40.06	Payee address; City; State; Zip Code 101 E. 15th Street Austin, TX 78778
	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 State Unemployment Taxes
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 01/03/2025	Payee name Travelers Insurance
	Amount (\$) \$50.76	Payee address; City; State; Zip Code PO Box 660317
		Dallas, TX 75266-0317
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Property and Casualty coverage for committee office
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	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: 32/32 Rpt: 35/66	Texans for Joe Straus 00056637
4	Date	5 Payee name
l	01/30/2025	Travelers Insurance
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$50.76	PO Box 660317
l		
		Dallas, TX 75266-0317
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
l		Check if Austin, TX, officeholder living expense Property and Casualty coverage for committee office.
l		1 Toperty and Casally Coverage for Committee office.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Г	Date	Payee name
l	03/01/2025	Travelers Insurance
H	Amount (\$)	Payee address; City; State; Zip Code
	\$93.07	PO Box 660317
l		
		Dallas, TX 75266-0317
l	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
l		Check if Austin, TX, officeholder living expense Property and Casualty coverage for committee office.
		Property and Casualty coverage for committee office.
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
l	expenditure to benefit C/OI	
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UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(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) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/2 Rpt: 36/66 Texans for Joe Straus 00056637 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date Payee name 06/30/2025 Department of Treasury Amount (\$) Payee address; State; Zip Code \$1,734.26 Internal Revenue Service Center Ogden, UT 84201 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Incurred Federal Payroll Taxes. 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date Department of Treasury 06/30/2025 Amount (\$) Payee address; City; State; Zip Code \$84.00 Internal Revenue Service Center Ogden, UT 84201 TYPE OF Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense **Incurred Federal Unemployment Taxes** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(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 Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 2/2 Rpt: 37/66 Texans for Joe Straus 00056637 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date Payee name 06/30/2025 **Texas Workforce Commission** Amount (\$) Payee address; City; State; Zip Code \$4.93 101 E. 15th Street Austin, TX 78778 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense **Incurred State Unemployment Taxes** 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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 Insti	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Et	hics Commiss	sion Filers)	
Sch: 1/23 Rpt: 38/66	Texans for Joe Stra	aus		00056637			
4 CREDIT CARD ISSUER		ncial institution e Bank	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CRE CARD	\$	506.4	15	
6 PAYMENT	(a) Amount Charged \$164.69	(b) Date of Charge 01/10/2025	(c) Date(s) Credit Card Iss 02/20/2025	suer Paid			
7 PAYEE	(a) Payee name AT&T Mobility		(b) Payee address; PO Box 650574	City,	State,	Zip Code	
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		Dallas, TX 75265-0574 (b) Description Cellular telephone for p				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin	TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought			e sought	Office held			
PAYMENT	(a) Amount Charged \$164.76	(b) Date of Charge 02/10/2025	(c) Date(s) Credit Card Iss 03/28/2025	suer Paid			
PAYEE	(a) Payee name AT&T Mobility		(b) Payee address; PO Box 650574 Dallas, TX 75265-0574	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Cellular telephone for p				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin	, TX, officeholder living e	xpense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
PAYMENT	(a) Amount Charged \$174.91	(b) Date of Charge 05/12/2025	(c) Date(s) Credit Card Is: 06/26/2025	suer Paid			
PAYEE	(a) Payee name AT&T Mobility		(b) Payee address; PO Box 650574 Dallas, TX 75265-0574	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	1	Category (b) Do		(b) Description Cellular telephone for political use.			
Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T.		, TX, officeholder living e	xpense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			

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 Sched	lule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)				
Sch: 2/23 Rpt: 3	89/66	Texans for Joe Stra	aus		00056637						
4 CREDIT CARD ISSUER			ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	506.4	15				
6 PAYMENT		(a) Amount Charged \$487.12	(b) Date of Charge 04/01/2025	(c) Date(s) Credit Card Issue 05/05/2025	er Paid						
7 PAYEE 8 PURPOSE OF		(a) Payee name Bridgehead, I.T. (a) Category		(b) Payee address; 1335 Central Parkway So Suite 100 San Antonio, TX 78232 (b) Description	City, outh	State,	Zip Code				
EXPENDITURE X Political		(See Categories listed at the top Office Overhead/Rent		Quarterly I.T. Support							
Non-Political			of Texas. Complete Schedule T.		, officeholder living exp	ense					
· · · · · · · · · · · · · · · · · · ·				e sought	Office held						
expenditure to benefi	it C/OH		T	1							
PAYMENT		(a) Amount Charged \$164.76	(b) Date of Charge 04/10/2025	(c) Date(s) Credit Card Issue 05/23/2025	er Paid						
PAYEE (a) Payee name			(b) Payee address;	City,	State,	Zip Code					
		AT&T Mobility		PO Box 650574							
				Dallas, TX 75265-0574							
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Cellular telephone for pol	itical use.						
Non-Political		(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin TX	, officeholder living exp	ense					
Complete ONLY if	direct	Candidate/Officeholder		e sought	Office held						
expenditure to benefi				v							
PAYMENT		(a) Amount Charged \$174.91	(b) Date of Charge 06/12/2025	(c) Date(s) Credit Card Issue 06/30/2025	er Paid						
PAYEE		(a) Payee name AT&T Mobility	PO Box		City,	State,	Zip Code				
PURPOSE OF EXPENDITURE X Political		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Cellular telephone for pol	itical use.						
Non-Political		1	of Texas. Complete Schedule T.	<u> </u>	, officeholder living exp	ense					
· ·	Complete ONLY if direct xpenditure to benefit C/OH Candidate/Officeholder name Office sought Office held										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries/Mange/Control Labor

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

Candidate/Officeholder/Politica	•			HER (enter a categor	y not listed al	oove)	
		ruction Guide explains how	to complete this form.	I			
1 Total pages Schedule F4:				3 Filer ID (Ethic	s Commiss	sion Filers)	
Sch: 3/23 Rpt: 40/66	Texans for Joe Stra	nus		00056637			
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZED		506.4	IE	
ISSUER	see pi	revious	EXPENDITURES CHARGED TO A CREDIT	\$	500.4	ŀ	
			CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid			
	\$451.04	01/05/2025	02/07/2025				
	, , , , , , ,						
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
			1335 Central Parkway So	uth		·	
	Bridgehead, I.T.		Suite 100				
			San Antonio, TX 78232				
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top		Quarterly I.T. Support				
X Political	Office Overhead/Rent	tal Expense					
Non-Political		of Towns Committee Coloradula T	Observativity Asserting TAY	officeholder living exp			
9 Complete ONLY if direct	(c) and the state of the state				ense		
expenditure to benefit C/OH	Candidate/Officeriolder	name Onic	e sougrit	Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Doid			
PATMENT			06/30/2025	Palu			
	\$86.60	06/02/2025	00,00,2020				
BAYEE				-			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Central Market		4821 Broadway				
	Central Market						
	() -		San Antonio, TX 78209				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Political office water coffee atc				
l <u> </u>	Food/Beverage Exper		Political office water, coffee, etc.				
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid			
	\$32.43	04/10/2025	05/23/2025				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
			508 Young St.				
	Dallas Morning Nev	VS					
			Dallas, TX 75202				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top	*	Monthly subscription for p	olitical use.			
X Political	Office Overhead/Rent	iai Expense					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin. TX.	officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought	Office held			
expenditure to benefit C/OH			·				
·	l						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries/Mange/Control Labor

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

Candidate/Officeholder/Politica	· ·			THER (enter a category	not listed ab	oove)	
		ruction Guide explains how	to complete this form.	1			
1 Total pages Schedule F4:				3 Filer ID (Ethic	s Commiss	sion Filers)	
Sch: 4/23 Rpt: 41/66	Texans for Joe Stra	nus		00056637			
4 CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZED		F0C /		
ISSUER	see pi	revious	EXPENDITURES CHARGED TO A CREDIT	\$	506.4	15	
			CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid			
	\$32.51	06/10/2025	06/30/2025				
	402.01	00/10/2020					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
			508 Young St.	•		·	
	Dallas Morning Nev	VS					
			Dallas, TX 75202				
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top		Monthly subscription for p	olitical use.			
X Political	Office Overhead/Rent	tal Expense					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		<u> </u>			
	e sought	officeholder living expe	nse				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Onic	e sougni	Office field			
· ·	(a) Amazunt Chavarad	(h) Data of Charge	(a) Data(a) Cradit Card Issuer	Daid			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer 05/23/2025	Palu			
	\$35.16	04/02/2025	00/20/2020				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Go Daddy.com		14455 N. Hayden Rd.				
	Go Daddy.com		Suite 219				
			Scottsdale, AZ 85260				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this echodulo)	(b) Description				
l <u> </u>	Office Overhead/Rent		Monthly website hosting fee.				
X Political		•					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse		
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid			
	\$35.16	05/02/2025	06/26/2025				
	755.25	00,02,2020					
PAYEE	(a) Payee name	l	(b) Payee address;	City,	State,	Zip Code	
			14455 N. Hayden Rd.	-			
	Go Daddy.com		Suite 219				
			Scottsdale, AZ 85260				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top	,	Monthly website hosting fe	ee.			
X Political	Office Overhead/Rent	tal Expense					
Non-Political	(a) Charle if transmit and it	of Toyon Complete Calada T	Charlist Assatis	officeholder living	200		
<u> </u>	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	officeholder living expe	nse		
Complete ONLY if direct expenditure to benefit C/OH	Sandidate/Onicendider	name Office	o oougiit	Jilice Helu			
S. Politaita to boliciit 0/011							
ī							

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 (Ethi	cs Commiss	ion Filers)			
	Sch: 5/23 Rpt: 42/66	Texans for Joe Stra	aus			00056637					
4	CREDIT CARD ISSUER		ncial institution revious	EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$	506.4	15			
6	PAYMENT	(a) Amount Charged \$29.99	(b) Date of Charge 06/05/2025	(c) Date(s) C 06/30/2025	redit Card Issuer	Paid					
7	PAYEE	(a) Payee name Houston Chronicle			west Freeway	City,	State,	Zip Code			
Ļ		() 0 :		Houston, T.							
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Monthly sul	on bscription for p	r political use.					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
9	Complete ONLY if direct Candidate/Officeholder name Office					Office held					
е	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged \$145.11	(b) Date of Charge 03/10/2025	(c) Date(s) C 04/04/2025	redit Card Issuer 5	Paid					
	PAYEE (a) Payee name (b) Payee address;			City,	State,	Zip Code					
		Joe's Seafood		750 15th St	treet NW						
				Washingtor	n, DC 20005						
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description Meeting to	on discuss politica	al business.					
	Non-Political	(a) Chapte if traval autoids	of Texas. Complete Schedule T.	<u> </u>	Charle if Austin TV	officebolder living our					
┝	Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder		sought	Check if Austin, 1X,	officeholder living exp	lense				
е	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged \$56.44	(b) Date of Charge 06/09/2025	(c) Date(s) C 06/30/2025	redit Card Issuer i	Paid					
	PAYEE	(a) Payee name Lyft		(b) Payee address; 548 Market St. Suite 68514 San Francisco, CA 94104		City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District		of this schedule)	(b) Description		aus to attend S	SLLF mee	eting.			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
е	Complete ONLY if direct										

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: 6/23 Rpt: 43/66	Texans for Joe Stra	aus		00056637				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 506.45				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$120.00	01/23/2025	02/20/2025					
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code				
	Nation Builder		PO Box 811428					
			Los Angeles, CA 90081					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	are Cubeculation for political office				
X Political	Office Overhead/Rent	· ·	Monthly Campaign Sollwa	are Subscription for political office.				
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	e sought	Office held					
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$120.00	(b) Date of Charge 02/23/2025	(c) Date(s) Credit Card Issue 03/28/2025	r Paid				
PAYEE	PAYEE (a) Payee name			City, State, Zip Code				
	Nation Builder		PO Box 811428					
			Los Angeles, CA 90081					
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Monthly Campaign Software Subscription for political office					
X Political Non-Political								
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.		officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH			e sought	Office held				
PAYMENT	(a) Amount Charged \$29.79	(b) Date of Charge 02/16/2025	(c) Date(s) Credit Card Issue 03/28/2025	r Paid				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
	New York Times		620 Eighth Ave.					
			New York, NY 10018					
PURPOSE OF	(a) Category		(b) Description					
	EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			political use.				
X Political	X Political							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	edule T. Check if Austin, TX, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/OH	ect Candidate/Officeholder name Office sought Office held							

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 (Ethic	cs Commiss	sion Filers)			
	Sch: 7/23 Rpt: 44/66	Texans for Joe Stra	aus		c	00056637					
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITE EXPENDITURES CHARGED TO A C	\$	\$	506.4	15			
6	PAYMENT	(a) Amount Charged \$277.20	(b) Date of Charge 04/18/2025	(c) Date(s) Credit Car 06/26/2025	rd Issuer F	Paid					
7	PAYEE	(a) Payee name Intuit		(b) Payee address; 2632 Marine Way		City,	State,	Zip Code			
Ļ		() 0 :		Mountain View, CA	4 94043						
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Annual accounting	g software	e subscription					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if A	Austin, TX, off	ficeholder living exp	ense				
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held					
€	expenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged \$72.86	(b) Date of Charge 02/13/2025	(c) Date(s) Credit Car 03/19/2025	rd Issuer F	Paid					
	PAYEE	YEE (a) Payee name (b) Payee address;				City,	State,	Zip Code			
		Uber		1455 Market St. St. 400 San Francisco, CA	\ 94103						
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Transportation for Joe Straus while traveling to attend SLL Meeting.				tend SLLF			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if A	Austin, TX, off	ficeholder living exp	ense				
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged \$1,407.47	(b) Date of Charge 01/08/2025	(c) Date(s) Credit Car 02/20/2025	rd Issuer F	Paid					
	PAYEE	(a) Payee name Go Daddy.com		(b) Payee address; 14455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260		City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political	1 22 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		(b) Description Annual Domain Name Registration							
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Austin, TX, off	ficeholder living exp	ense				
E	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH										

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

Candidate/Onicendiden/Folitica		ruction Guide explains how	· ·	TILK (enter a category	not iisteu ai	bove)	
1 Total pages Schedule F4:		-		3 Filer ID (Ethic	s Commiss	sion Filers)	
Sch: 8/23 Rpt: 45/66	Texans for Joe Stra	aus		00056637			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	506.4	15	
6 PAYMENT	(a) Amount Charged \$35.16	(b) Date of Charge 03/01/2025	(c) Date(s) Credit Card Issuer 04/25/2025	Paid			
7 PAYEE	(a) Payee name Go Daddy.com		(b) Payee address; 14455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260	City,	State,	Zip Code	
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	*	(b) Description Monthly website hosting fe	ee.			
Non-Political	` _	of Texas. Complete Schedule T.	<u> </u>	officeholder living expe	ense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged \$164.76	(b) Date of Charge 03/10/2025	(c) Date(s) Credit Card Issuer 04/25/2025	Paid			
PAYEE	(a) Payee name (b) Payee address; PO Box 650574			City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Cellular telephone for political use.				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged \$32.43	(b) Date of Charge 02/10/2025	(c) Date(s) Credit Card Issuer 03/28/2025	Paid			
PAYEE	(a) Payee name Dallas Morning News		(b) Payee address; 508 Young St. Dallas, TX 75202	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE	ITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Monthly subscription for political use.				
Non-Political	(c) desired actions of the configuration of the con				ense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Office held						

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.		The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics	Commiss	sion Filers)									
Sch: 9/23 Rpt: 46/66	Texans for Joe Stra	aus		00056637											
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	506.4	1 5									
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid											
	\$35.16	06/16/2025	06/30/2025												
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code									
	Go Daddy.com		14455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260												
8 PURPOSE OF	(a) Category		(b) Description												
EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Rent		Monthly website hosting f	fee.											
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expe	nse										
9 Complete ONLY if direct	·														
expenditure to benefit C/OH															
PAYMENT	(a) Amount Charged \$29.99	(b) Date of Charge 01/06/2025	(c) Date(s) Credit Card Issue 02/20/2025	er Paid											
PAYEE	PAYEE (a) Payee name (b) Payee address;			City,	State,	Zip Code									
	Houston Chronicle		4747 Southwest Freeway	1											
DUDDOOF OF	(a) Cotagon;		Houston, TX 77027 (b) Description												
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		Monthly subscription for political use.												
Non-Political	(a) Chapte if traval autoids	of Texas. Complete Schedule T.	Chook if Austin TV	officebolder living even											
	(c) Check if travel outside Candidate/Officeholder		e sought	, officeholder living experior Office held	ise										
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder	name ome	c sought	Office field											
PAYMENT	(a) Amount Charged \$28.97	(b) Date of Charge 03/11/2025	(c) Date(s) Credit Card Issue 04/04/2025	er Paid											
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code									
			548 Market St.												
	Lyft		Suite 68514												
			San Francisco, CA 94104	1											
PURPOSE OF	(a) Category	(4)	(b) Description												
	EXPENDITURE (See Categories listed at the top of this schedule) Travel Out of District			raus while attend	ling Yale	e CEO									
X Political			Conference.												
Non-Political	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	of Texas. Complete Schedule T.		, officeholder living expe	nse										
Complete ONLY if direct expenditure to benefit C/OH															
•															

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 (Ethi	ics Commiss	sion Filers)			
	Sch: 10/23 Rpt: 47/66	Texans for Joe Stra	aus			00056637					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZE NDITURES GED TO A CRE	\$	506.4				
6	PAYMENT	(a) Amount Charged \$23.09	(b) Date of Charge 04/26/2025	(c) Date(s 05/23/20	s) Credit Card Iss 025	suer Paid					
7	PAYEE	(a) Payee name Lyft			ket St. 514 ncisco, CA 941	City, 104	State,	Zip Code			
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Descri Transpo	•	Straus while atter	traus while attending SLLF meetir				
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin,	, TX, officeholder living exp	pense				
	9 Complete ONLY if direct Candidate/Officeholder name Office					Office held					
е	xpenditure to benefit C/OH	()	I (1) = 1 (5)	175-7	\						
	PAYMENT	(a) Amount Charged \$29.79	(b) Date of Charge 01/24/2025	02/20/20	s) Credit Card Iss 025	suer Paid					
	PAYEE	(a) Payee name (b) Payee addre 620 Eighth Av			City,	State,	Zip Code				
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri	ption	or political use.					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin,	, TX, officeholder living exp	oense				
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged \$29.79	(b) Date of Charge 04/18/2025	(c) Date(s 06/26/20	s) Credit Card Iss 025	suer Paid					
	PAYEE	(a) Payee name New York Times		(b) Payee 620 Eigh New Yor		City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Descri Monthly	subscription fo	or political use.					
$ldsymbol{ldsymbol{ldsymbol{eta}}}$					Check if Austin,	, TX, officeholder living ex	oense				
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
I											

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

l		The Inst	ruction Guide explains how	to complete this forr	n.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
	Sch: 11/23 Rpt: 48/66	Texans for Joe Stra	nus			00056637		
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UN EXPENDITUR CHARGED TO CARD	ES	\$	506.4	15
6	PAYMENT	(a) Amount Charged \$15.12	(b) Date of Charge 06/16/2025	(c) Date(s) Credit 06/30/2025	Card Issuer	Paid		
7	PAYEE	(a) Payee name Intuit		(b) Payee address 2632 Marine W	ay	City,	State,	Zip Code
Ļ	DUDDOG 05	(a) Cataman		Mountain View,	CA 94043	i		
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Monthly payroll	processing	g fees.		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Chec	ck if Austin, TX,	officeholder living exp	ense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
E	expenditure to benefit C/OH			_				
	PAYMENT	(a) Amount Charged \$502.92	(b) Date of Charge 04/26/2025	(c) Date(s) Credit 05/23/2025	Card Issuer	Paid		
	PAYEE	(a) Payee name	•	(b) Payee address	City,	State,	Zip Code	
				1 Lincoln Squai	re			
L				Gettysburg, PA 17325				
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Lodging for Joe Leaders Found			e Legisla	ative
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	☐ Chec	ck if Austin, TX.	officeholder living exp	ense	
H	Complete ONLY if direct	Candidate/Officeholder		e sought		Office held		
e	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$705.10	(b) Date of Charge 03/01/2025	(c) Date(s) Credit 04/25/2025	Card Issuer	Paid		
	PAYEE	(a) Payee name Go Daddy.com		(b) Payee address; 14455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	1 2/ 2 1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		(b) Description Annual Domain Name Registration				
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Chec	ck if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct							

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 Insti	ruction Guide explains how	to complete this f	orm.				
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)	
Sch: 12/23 Rpt: 49/66	Texans for Joe Stra	aus			00056637			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UEXPENDITUE CHARGED CARD		\$	506.4	1 5	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cre	dit Card Issuer	Paid			
	\$34.76	01/16/2025	02/20/2025					
7 PAYEE	(a) Payee name		(b) Payee addr	ess;	City,	State,	Zip Code	
	Go Daddy.com		14455 N. Hay Suite 219 Scottsdale, A					
8 PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Rent		Monthly webs	site hosting fe	ee.			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
9 Complete ONLY if direct Candidate/Officeholder name Office sought			Office held					
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cre	dit Card Issuer	Paid			
	\$778.24	02/15/2025	03/19/2025					
PAYEE	(a) Payee name		(b) Payee addr	ess;	City,	State,	Zip Code	
	The Hay Adams Ho	otel	800 16th Stre					
DUDDOOF OF	(a) Catagon;		Washington,	1 X 20006				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Lodging for Joe Straus while attending the State Legislative					
X Political	Traver Out of District		Leaders Four	ndation Meet	ing			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$29.99	(b) Date of Charge 02/05/2025	(c) Date(s) Cre 03/28/2025	dit Card Issuer	· Paid			
PAYEE	(a) Payee name	l .	(b) Payee addr	ess;	City,	State,	Zip Code	
			4747 Southw	est Freeway				
	Houston Chronicle							
			Houston, TX	77027				
PURPOSE OF	\ \ \ \ \ \ \ \ \ \ \ \ \ \							
EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			Monthly subs	cription for p	olitical use.			
X Political	olitical Office Overhead/Nerhal Expense							
Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				edule T. Check if Austin, TX, officeholder living expense			
Complete ONLY if direct	Complete ONLY if direct Candidate/Officeholder name				Office held			
expenditure to benefit C/OH								

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 (Ethi	cs Commis	sion Filers)
	Sch: 13/23 Rpt: 50/66	Texans for Joe Stra	aus			00056637		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	506.4	4 5
6	PAYMENT	(a) Amount Charged \$29.99	(b) Date of Charge 04/05/2025	(c) Date(s) 05/23/20) Credit Card Issuer 125	r Paid		
7	PAYEE	(a) Payee name Houston Chronicle			uthwest Freeway	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Houston, TX 77027 (b) Description Monthly subscription for po				olitical use.		
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense	
9	Complete ONLY if direct			Office held				
	PAYMENT	(a) Amount Charged \$206.77	(b) Date of Charge 05/28/2025	(c) Date(s) 06/30/20) Credit Card Issuer 125	r Paid		
	PAYEE	(a) Payee name Lyft		(b) Payee 548 Mark Suite 685 San Fran	ket St.	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Descrip			l busines	S.
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$120.00	(b) Date of Charge 03/23/2025	(c) Date(s) 04/25/20) Credit Card Issuer 125	r Paid		
	PAYEE	(a) Payee name Nation Builder		(b) Payee PO Box 8 Los Ange		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip Monthly	otion Campaign Softwa	are Subscriptio	n for poli	tical office.
L	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct candidate/Officeholder name Office sought complete to benefit C/OH					Office held		
Γ		<u> </u>						

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 (Ethic	cs Commis	sion Filers)
	Sch: 14/23 Rpt: 51/66	Texans for Joe Stra	aus			00056637		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	506.4	4 5
6	PAYMENT	(a) Amount Charged \$120.00	(b) Date of Charge 04/23/2025	(c) Date(s 06/26/20) Credit Card Issuer 125	Paid		
7	PAYEE	(a) Payee name Nation Builder		(b) Payee PO Box	811428	City,	State,	Zip Code
Ļ	PURPOSE OF	(a) Category		(b) Descri	eles, CA 90081			
8	(See Categories listed at the top of this schedule) Office Overhead/Rental Expense Monthly Campaign Soft				•	are Subscription	n for poli	tical office.
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense		
9	9 Complete ONLY if direct cypenditure to benefit C/OH Candidate/Officeholder name Office sought				Office held			
	PAYMENT	(a) Amount Charged \$120.00	(b) Date of Charge 05/23/2025	(c) Date(s 06/26/20) Credit Card Issuer 125	Paid		
	PAYEE	(a) Payee name Nation Builder		(b) Payee	811428	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri	eles, CA 90081 ption Campaign Softwa	are Subscription	n for poli	tical office.
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Chack if Austin TV	officeholder living exp	onso	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	·	e sought	Check ii Addini, 1X,	Office held	crisc	
	PAYMENT	(a) Amount Charged \$120.00	(b) Date of Charge 06/23/2025	(c) Date(s 06/30/20) Credit Card Issuer 125	Paid		
	PAYEE	(a) Payee name Nation Builder		(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	ption Campaign Softwa	are Subscription	n for poli	tical office.
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX,	officeholder living exp	ense	
E	Complete ONLY if direct expenditure to benefit C/OH	Complete ONLY if direct Candidate/Officeholder name Offi				Office held		
Г								

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

l		The Inst	ruction Guide explains how	to complete thi	s form.			
1	Total pages Schedule F4:	4: 2 FILER NAME 3				3 Filer ID (Ethi	cs Commiss	sion Filers)
	Sch: 15/23 Rpt: 52/66	Texans for Joe Stra	Texans for Joe Straus					
4	CREDIT CARD ISSUER		ncial institution revious	EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$	506.4	1 5
6	PAYMENT	(a) Amount Charged \$29.79	(b) Date of Charge 03/21/2025	(c) Date(s) C 04/25/2025	redit Card Issuer	r Paid		
7	PAYEE	(a) Payee name New York Times		(b) Payee ad 620 Eighth	Ave.	City,	State,	Zip Code
L				New York,				
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Monthly su	olitical use.			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
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 06/26/2025			Paid			
Г	PAYEE	(a) Payee name		(b) Payee ad	dress;	City,	State,	Zip Code
		New York Times		620 Eighth				
L				New York,				
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	*	(b) Description Monthly su	on bscription for p	olitical use.		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin TX	officeholder living exp	nense	
H	Complete ONLY if direct	Candidate/Officeholder	<u> </u>	sought	Check ii Addini, 17,	Office held	Jense	
e	expenditure to benefit C/OH			o coug		000		
	PAYMENT	(a) Amount Charged \$638.32	(b) Date of Charge 06/10/2025	(c) Date(s) C 06/30/2025	redit Card Issuer	r Paid		
Г	PAYEE	(a) Payee name	l .	(b) Payee ad	dress;	City,	State,	Zip Code
		Opal Grand Resort		10 North O				
L					ch, FL 33483			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Lodging for Joe Straus		Joe Straus to	attend meeting	g with Sta	ite	
	X Political	ical		Legislative Leaders.				
	Non-Political	(C) Check if travel outside	lule T. Check if Austin, TX, officeholder living expense					
e	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	andidate/Officeholder name Office so			Office held		

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

Printing Expense Salaries/Wages/Contract Labor

		this form.						
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	nics Commiss	sion Filers)
	Sch: 16/23 Rpt: 53/66	Texans for Joe Stra	aus			00056637		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES GED TO A CREDI	\$	506.4	15
6	PAYMENT	(a) Amount Charged \$114.18	(b) Date of Charge 02/13/2025	(c) Date(s) 03/19/20	Credit Card Issue 25	er Paid		
7	PAYEE	(a) Payee name Olio		(b) Payee 699 14th Washing		City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Meeting to discuss political			al business.			
L				, officeholder living ex	xpense			
	9 Complete ONLY if direct candidate/Officeholder name Office sought expenditure to benefit C/OH			Office held				
	PAYMENT	(a) Amount Charged \$213.20	(b) Date of Charge 01/08/2025	(c) Date(s) 02/20/20	Credit Card Issue 25	er Paid		
	PAYEE	(a) Payee name The Business Journ	nal	(b) Payee 200 E. G San Anto		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri		olitical use.		
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX	, officeholder living ex	xpense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$16.67	(b) Date of Charge 04/08/2025	(c) Date(s) 05/23/20	Credit Card Issue 25	er Paid		
	PAYEE	(a) Payee name Central Market		(b) Payee 4821 Bro		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	nse	(b) Descri Political	office water, coff			
L	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX	, officeholder living ex	xpense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
I								

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.	(3 -	,	,	
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	ics Commis	sion Filers)	
	Sch: 17/23 Rpt: 54/66	Texans for Joe Stra	aus			00056637			
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$ 506.45			
6	PAYMENT	(a) Amount Charged \$32.43	(b) Date of Charge 01/10/2025	(c) Date(s 02/20/20) Credit Card Issue 125	r Paid			
7	PAYEE	(a) Payee name Dallas Morning Nev	vs	(b) Payee 508 You	ng St.	City,	State,	Zip Code	
8	PURPOSE OF EXPENDITURE X Political		See Categories listed at the top of this schedule) Office Overhead/Rental Expense Monthly subscription for polymers.						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense		
9 ∈	9 Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH			Office held					
	PAYMENT	(a) Amount Charged \$32.43	(b) Date of Charge 03/10/2025	(c) Date(s 04/25/20) Credit Card Issue 125	r Paid			
	PAYEE	(a) Payee name Dallas Morning Nev	vs	(b) Payee 508 You Dallas, T	ng St.	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri		olitical use.			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	pense		
€	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
	PAYMENT	(a) Amount Charged \$32.43	(b) Date of Charge 05/10/2025	(c) Date(s 06/26/20) Credit Card Issuer)25	r Paid			
	PAYEE	(a) Payee name Dallas Morning Nev	ws	(b) Payee 508 You Dallas, T		City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Descri Monthly	subscription for p				
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX,	officeholder living exp	pense		
E	Complete ONLY if direct Candidate/Officeholder name Office complete to benefit C/OH					Office held			
ĺ									

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

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: 18/23 Rpt: 55/66	Texans for Joe Stra	aus		00056637				
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 506.45				
6	PAYMENT	(a) Amount Charged \$636.37	(b) Date of Charge 05/27/2025	(c) Date(s) Credit Card Issue 06/30/2025	r Paid				
7	PAYEE	(a) Payee name Delta Airlines	Delta Airlines 1030 Delta Blvd Atlanta, GA 30354						
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Travel for Joe Straus for r	neeting with SLLF.				
L	Non-Political	(c) X Check if travel outside	<u>`</u>	_	officeholder living expense				
	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	Candidate/Officeholder name Office sought						
	PAYMENT	(a) Amount Charged \$35.16	(b) Date of Charge 02/02/2025	(c) Date(s) Credit Card Issue 03/28/2025	r Paid				
	PAYEE	(a) Payee name Go Daddy.com		(b) Payee address; 14455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260	City, State, Zip Code				
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Reni	tal Expense	(b) Description Monthly website hosting fee.					
	Non-Political		of Texas. Complete Schedule T.	<u> </u>	officeholder living expense				
e:	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held				
	PAYMENT	(a) Amount Charged \$29.99	(b) Date of Charge 03/10/2025	(c) Date(s) Credit Card Issue 04/25/2025	r Paid				
	PAYEE	(a) Payee name Houston Chronicle		(b) Payee address; 4747 Southwest Freeway Houston, TX 77027	City, State, Zip Code				
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Description Monthly subscription for p					
$ldsymbol{f eta}$	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	<u> </u>	officeholder living expense				
_e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held				

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 Insti	ruction Guide explains how	to complete this form.					
1 Total pages Schedule F4:						Filers)		
Sch: 19/23 Rpt: 56/66	Texans for Joe Stra	nus		00056637				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	506.45			
6 PAYMENT	(a) Amount Charged \$29.99	(b) Date of Charge 05/05/2025	(c) Date(s) Credit Card Issuer 06/26/2025	r Paid				
7 PAYEE	(a) Payee name Houston Chronicle		(b) Payee address; 4747 Southwest Freeway	City,	State, Zip	o Code		
	(a) Oatawari		Houston, TX 77027 (b) Description					
8 PURPOSE OF EXPENDITURE X Political	(See Categories listed at the top of this schedule) Office Overhead/Rental Expense Monthly subscription for poli			olitical use.				
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expense	;			
Complete ONLY if direct Candidate/Officeholder name Office			e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$377.00	(b) Date of Charge 03/10/2025	(c) Date(s) Credit Card Issuer 04/04/2025	r Paid				
PAYEE	(a) Payee name		(b) Payee address;	City,	State, Zip	o Code		
	Hyatt Place Capitol	Hill	400 E Street SW					
			Washington, DC 20024					
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Lodging for Joe Straus while attending the Yale CEO Conference.					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Chock if Austin TV	officeholder living evnens	`			
Complete ONLY if direct	Candidate/Officeholder		Check if Austin, TX, officeholder living expense ice sought					
expenditure to benefit C/OH			o ooug					
PAYMENT	(a) Amount Charged \$35.11	(b) Date of Charge 06/13/2025	(c) Date(s) Credit Card Issuer 06/30/2025	r Paid				
PAYEE	(a) Payee name New York Times	•	(b) Payee address; 620 Eighth Ave. New York, NY 10018	City, S	State, Zip	o Code		
PURPOSE OF EXPENDITURE X Political	XPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Monthly subscription for p	olitical use.				
Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T			nedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				

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

		this form.							
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Et	hics Commiss	sion Filers)	
	Sch: 20/23 Rpt: 57/66	Texans for Joe Stra	aus			00056637			
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$	506.4	15	
6	PAYMENT	(a) Amount Charged \$18.90	(b) Date of Charge 01/16/2025	(c) Date(s) 02/20/20	Credit Card Issue 25	r Paid			
7	PAYEE	(a) Payee name Intuit		(b) Payee 2632 Mai Mountain		City,	State,	Zip Code	
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Monthly payroll processing							
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Au			Check if Austin, TX,	officeholder living e	xpense			
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought			Office held					
	PAYMENT	(a) Amount Charged \$37.80	(b) Date of Charge 05/16/2025	(c) Date(s) 06/26/20	Credit Card Issue 25	r Paid			
	PAYEE	(a) Payee name Intuit		(b) Payee 2632 Mai		City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	T. Check if Austin, TX, officeholder living expense					
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
	PAYMENT	(a) Amount Charged \$395.70	(b) Date of Charge 04/10/2025	(c) Date(s) 04/25/20	Credit Card Issue 25	r Paid			
	PAYEE	(a) Payee name Southwest Airlines		(b) Payee PO Box 3 Dallas, T	36647	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Descrip Airfare fo	otion r Joe Straus to a	uttend SLLF M	leeting.		
L	Non-Political (c) X Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX,	officeholder living e	xpense		
e	Complete ONLY if direct xpenditure to benefit C/OH	·				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 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:	Total pages Schedule F4: 2 FILER NAME					cs Commiss	sion Filers)		
Sch: 21/23 Rpt: 58/66	Texans for Joe Stra	nus			00056637				
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$	506.4	15		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid				
	\$22.15	04/24/2025	06/26/20	25					
7 PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code		
	1.05		1455 Market St.						
	Uber		St. 400						
			San Francisco, CA 94103						
8 PURPOSE OF	(a) Category		(b) Descrip						
EXPENDITURE X Political	See Categories listed at the top of this schedule) Travel Out of District Transportation for Joe Strueting.				aus while trave	ling for S	SLLF		
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX,	officeholder living exp	ense			
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid				
	\$8.00	02/18/2025	03/19/20	25					
φο.00 02/10/2023									
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code		
			233 S. W	acker Dr.					
	United Airlines								
			Chicago,	IL 60606					
PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Wifi for Jo	oe Straus while t	raveling to atte	nd SLLF	Meeting.		
X Political	Traver out or District								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	T. Check if Austin, TX, officeholder living expense						
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	<u> </u>	Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid				
	\$67.62	03/10/2025	04/25/20	25					
	4002	00,10,101							
PAYEE	(a) Payee name	l	(b) Payee	address;	City,	State,	Zip Code		
			1455 Mai	ket St.					
	Uber		St. 400						
			San Fran	cisco, CA 94103	}				
PURPOSE OF	(a) Category		(b) Descrip						
EXPENDITURE	(See Categories listed at the top	of this schedule)	Transpor	tation for Joe Str	aus while trave	ling on p	olitical		
X Political	Travel Out of District		business						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	dule T. Check if Austin, TX, officeholder living expense						
Complete ONLY if direct	(1)	Candidate/Officeholder name Office sought							
expenditure to benefit C/OH			5		Office held				
<u> </u>	<u> </u>								

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 thi	is form.			
1	Total pages Schedule F4:	2 FILER NAME	FILER NAME				cs Commiss	sion Filers)
	Sch: 22/23 Rpt: 59/66	Texans for Joe Stra	Texans for Joe Straus			00056637		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$	506.4	15
6	PAYMENT	(a) Amount Charged \$203.68	(b) Date of Charge 03/10/2025	(c) Date(s) C 04/25/2025	Credit Card Issuer	Paid		
7	PAYEE	(a) Payee name Uber			et St. sco, CA 94103	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	Categories listed at the top of this schedule) Transportation for Joe Strai			aus while trave	eling for Y	′ale CEO
	Non-Political				Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct Candidate/Officeholder name Cexpenditure to benefit C/OH			e sought		Office held		
	PAYMENT	(a) Amount Charged \$418.48	(b) Date of Charge 01/31/2025	(c) Date(s) C 02/20/2025	Credit Card Issuer 5	Paid		
	PAYEE	(a) Payee name United Airlines		(b) Payee ac 233 S. Wad Chicago, IL	cker Dr.	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description		ttend sLLF Me	eting	
	Non-Political	(c) X Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$1,128.95	(b) Date of Charge 03/04/2025	(c) Date(s) C 04/25/2025	Credit Card Issuer	Paid		
	PAYEE	(a) Payee name United Airlines		(b) Payee ac 233 S. Wad Chicago, IL	cker Dr.	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Airfare Airfare			(b) Description Airfare for Joe Straus while traveling to attend Yale CEO Conference.			
L	Non-Political	(c) X Check if travel outside	dule T. Check if Austin, TX, officeholder living expense					
E	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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	I Committee Gift/Award Legal Serv		Printing Expense T Salaries/Wages/Contract Labor C	ravel in District ravel Out of District DTHER (enter a cate		ove)
			ruction Guide explains h	how to complete this form.			
1	Total pages Schedule F4:				3 Filer ID (E	thics Commiss	ion Filers)
	Sch: 23/23 Rpt: 60/66	Texans for Joe Stra	aus		00056637		
4	CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZED			_
	ISSUER	see p	revious	EXPENDITURES	_ \$	506.4	5
		'		CHARGED TO A CREDIT	'		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid		
		.,		04/25/2025			
		\$34.00	03/10/2025				
7	PAYEE	(a) Dayon nama		(b) Dayon address:	City	Ctoto	Zip Code
′	FAILL	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
		United Airlines		233 S. Wacker Dr.			
		5					
				Chicago, IL 60606			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
		Travel Out of District	or this scriedule)	Wifi for Joe Straus while Conference.	traveling to at	ttend Yale C	EO
	x Political			Conference.			
	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 O	Office sought	Office held		
e	xpenditure to benefit C/OH						

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

SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	1		pages Schedule K: 1/4 Rpt: 61/66	
2	FILER NAME		3	Filer I	O (Ethics Commission Filers)	
	Texans for J	loe Straus		0005	6637	
4	Date	5 Name of person from whom amount is received	l		8 Amount (\$)	
	01/13/2025	Frost Bank			\$50.	80
		6 Address of person from whom amount is received; City; State; Zip Code				
		Address of person from whom amount is received, City, State, 21p Code				
		San Antonio, TX 78296				
			olitic	ral con	I tribution returned to filer	
		Interest Income	Ontic	ai con	inbution retained to mer	
	Date	Name of person from whom amount is received			Amount (\$)	
	02/28/2025	Frost Bank			\$19.	50
		Address of person from whom amount is received; City; State; Zip Code				
		San Antonio, TX 78296				
		<u> </u>	olitio	cal con	tribution returned to filer	
		Interest Income				
	Date	Name of person from whom amount is received			Amount (\$)	
	03/31/2025	Frost Bank			\$135.	79
		Address of person from whom amount is received; City; State; Zip Code				
		San Antonio, TX 78296				
		<u> </u>	olitio	cal con	tribution returned to filer	
		Interest Income				
	Date	Name of person from whom amount is received			Amount (\$)	
	04/30/2025	Frost Bank			\$134.	54
		Address of person from whom amount is received; City; State; Zip Code				
		San Antonio, TX 78296				
		Purpose for which amount is received	olitio	cal con	tribution returned to filer	
		Interest Income				
	Date	Name of person from whom amount is received			Amount (\$)	
	05/30/2025	Frost Bank			\$88.	67
		Address of person from whom amount is received; City; State; Zip Code		•••••	-	
		Address of person from whom amount is received, only, state, 2-p sode				
		San Antonio, TX 78296				
			olitio	cal con	tribution returned to filer	
		Interest Income				
		I .				

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

SCHEDULE K

	The Instru	pages Schedule K: 2/4 Rpt: 62/66			
2	FILER NAME		3	Filer II	C (Ethics Commission Filers)
	Texans for Joe Straus				6637
4	Date	5 Name of person from whom amount is received	<u> </u>		8 Amount (\$)
	06/30/2025	Frost Bank			\$57.36
		6 Address of person from whom amount is received; City; State; Zip Code			•
		Address of person from whom amount is received, City, State, 21p Code			
		San Antonio, TX 78296			
		<u> </u>	olitic	al cont	I ribution returned to filer
		Interest Income	Ontic	ai com	indution returned to mer
					1
	Date	Name of person from whom amount is received			Amount (\$)
	01/31/2025	Frost Bank Brokerage			\$5,053.59
		Address of person from whom amount is received; City; State; Zip Code			
		San Antonio, TX 78296			
		<u> </u>	olitic	al cont	ribution returned to filer
		Dividend Income			
	Date	Name of person from whom amount is received			Amount (\$)
	02/28/2025	Frost Bank Brokerage			\$4,541.07
		Address of person from whom amount is received; City; State; Zip Code			1
		San Antonio, TX 78296			
		Purpose for which amount is received	olitic	al cont	ribution returned to filer
		Dividend Income			
	Date	Name of person from whom amount is received			Amount (\$)
	03/31/2025	Frost Bank Brokerage			\$4,680.53
		Address of person from whom amount is received; City; State; Zip Code			•
		, , , , , , , , , , , , , , , , , , ,			
		San Antonio, TX 78296			
		Purpose for which amount is received Check if po	olitic	al cont	ribution returned to filer
		Dividend Income			
_	Date	Name of person from whom amount is received			Amount (\$)
	04/30/2025	Frost Bank Brokerage			\$4,413.92
		Address of person from whom amount is received; City; State; Zip Code			•
		Address of person from whom amount is received, City, State, 2ip Code			
		San Antonio, TX 78296			
		<u> </u>	olitic	al cont	I ribution returned to filer
		Dividend Income	JC		
_					

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

SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	1		pages Schedule K: 3/4 Rpt: 63/66
2	FILER NAME		Filer	ID (Ethics Commission Filers)	
	Texans for Joe Straus				56637
4	Date	5 Name of person from whom amount is received			8 Amount (\$)
	05/30/2025	Frost Bank Brokerage			\$4,533.82
	00/00/2020	6 Address of person from whom amount is received: City; State; Zip Code			
		Address of person from whom amount is received, City, State, Zip Code			
		San Antonio, TX 78296			
			- I:4:		
		7 Purpose for which amount is received	OIITIO	cai co	ntribution returned to filer
		Dividend income			
	Date	Name of person from whom amount is received			Amount (\$)
	06/30/2025	Frost Bank Brokerage			\$4,370.12
		Address of person from whom amount is received; City; State; Zip Code			····
		San Antonio, TX 78296			
		Purpose for which amount is received Check if p	olitio	cal co	ntribution returned to filer
		Dividend Income			
	Date	Name of person from whom amount is received			Amount (\$)
	01/31/2025	Jefferson Bank			\$867.81
	01/31/2023				
		Address of person from whom amount is received; City; State; Zip Code			
		San Antonio, TX 78201			
			olitid	anl co	
		Interest Income	Ulltit	Jai CU	initibution returned to mer
	Date	Name of person from whom amount is received			Amount (\$)
	03/02/2025	Jefferson Bank			\$690.26
		Address of person from whom amount is received; City; State; Zip Code			
		San Antonio, TX 78201			
		Purpose for which amount is received	olitio	cal co	ntribution returned to filer
		Interest Income			
	Date	Name of person from whom amount is received			Amount (\$)
	04/02/2025	Jefferson Bank			\$742.35
		Address of person from whom amount is received; City; State; Zip Code			
		Address of person from whom amount is received, Gity, State, 21p Code			
		San Antonio, TX 78201			
			oliti	ral co	
		Interest Income	UIILI	Jui UU	nanoanon retarrieu to illel

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 4/4 Rpt: 64/66 2 FILER NAME Filer ID (Ethics Commission Filers) Texans for Joe Straus 00056637 8 Amount (\$) Date 5 Name of person from whom amount is received 05/02/2025 Jefferson Bank \$769.02 6 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78201 Purpose for which amount is received Check if political contribution returned to filer Interest Income Name of person from whom amount is received Amount (\$) Date 06/02/2025 Jefferson Bank \$821.46 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78201 Purpose for which amount is received Check if political contribution returned to filer Interest Income Date Name of person from whom amount is received Amount (\$) 06/30/2025 \$745.59 Jefferson Bank Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78201 Purpose for which amount is received Check if political contribution returned to filer Interest Income

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.					1 Total pages Schedule T: Sch: 1/2 Rpt: 65/66				
2 FILER NAME					3 Filer ID (Ethics Commission Filers)				
Texans for Joe Straus				00056637					
4 Name of Contribut Delta Airlines	4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Delta Airlines								
5 Contribution / Expe	enditure rep	oorted on:							
Schedule A2		Schedule B	Schedule D Schedule F1						
Schedule F2	<u> </u>	Schedule F4	Schedule G	Schedule H	Schedule COH-UC				
6 Dates of Travel	Dates of Travel 7 Name of person(s) traveling Straus III, Joseph (The Honorable)								
	8 Depart	ure city or name of	departure location						
06/09/2025	San A	ntonio, Texas							
	9 Destina	ation city or name o	of destination location						
06/10/2025	West	Palm Beach, FL							
10 Means of transport	tation	11 Purpose of tra	vel (including name of co	onference, seminar, or	other event)				
Commercial Airp	olane	Meeting with	State Legislative Lea	ders Foundation lea	adership.				
Name of Contribut	or / Corpora	ation or Labor Orga	anization / Pledgor /Paye	ee					
Southwest Airlin	es								
Contribution / Expe	enditure rep	oorted on:							
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D Schedule F1				
Schedule F2	X:	Schedule F4	Schedule G	Schedule H	Schedule COH-UC				
Dates of Travel	Name	of person(s) traveli	ng						
	Straus III, Joseph (The Honorable)								
Departure city or name of departure location									
04/24/2025	Dallas	i							
	Destina	ation city or name o	of destination location						
04/26/2025	Baltim	ore							
Means of transpor	tation	Purpose of tra	vel (including name of c	onference, seminar, or	other event)				
Commercial Airp	olane	Airfare for Jo	e Straus to attend the	SLLF Meeting.					
Name of Contribut	or / Corpora	ation or Labor Orga	anization / Pledgor /Paye	ee					
United Airlines									
Contribution / Expe	enditure rep	oorted on:							
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D Schedule F1				
Schedule F2	$\overline{\mathbf{x}}$:	Schedule F4	Schedule G	Schedule H	Schedule COH-UC				
Dates of Travel	Name	of person(s) traveli	ng						
	Straus	s III, Joseph (The	Honorable)						
Departure city or name of departure location									
02/13/2025 San Antonio									
I I		ation city or name o	of destination location						
02/15/2025 Washington, DC									
Means of transportation		Purpose of travel (including name of conference, seminar, or other event)							
Commercial Airplane		Airfare to atte	end SLLF Meeting.						

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES SCHEDULE T FOR TRAVEL OUTSIDE OF TEXAS Name of Contributor / Corporation or Labor Organization / Pledgor /Payee **United Airlines** 5 Contribution / Expenditure reported on: Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC 6 Dates of Travel Name of person(s) traveling Straus III, Joseph (The Honorable) Departure city or name of departure location 03/10/2025 San Antonio Destination city or name of destination location 03/11/2025 Washington DC 11 Purpose of travel (including name of conference, seminar, or other event) 10 Means of transportation Commercial Airplane Airfare for Joe Straus to attend Yale CEO Conference meeting.