

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

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|--|--|--|--|--|
| The GPAC Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00083850 | 2 Total pages filed: 57 | |
| 3 COMMITTEE NAME Texas Forever Forward | | | OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/15/2025 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged | |
| 4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 91047 San Antonio, TX 78209 | | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST MI The Honorable Wallace B. NICKNAME LAST SUFFIX Jefferson | | | |
| 6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 515 Congress Ave Ste. 2350 Austin, TX 78701 | | | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 515 Congress Ave Ste. 2350 Austin, TX 78701 | | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (210) 826-7979 x118 | | | |
| 9 REPORT TYPE | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff | | | |
| 10 PERIOD COVERED | Month Day Year Month Day Year 01/01/2025 THROUGH 06/30/2025 | | | |
| 11 ELECTION | ELECTION DATE Month Day Year 11/04/2025 | | ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special | |

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

| | | |
|---|--|---|
| 12 COMMITTEE NAME Texas Forever Forward | | 13 Filer ID (Ethics Commission Filers) 00083850 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported |
| | | B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 15 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold |
| EXPENDITURE TOTALS | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 2,680.00 |
| | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 304.05 |
| CONTRIBUTION BALANCE | 4. TOTAL POLITICAL EXPENDITURES | \$ 162,681.63 |
| | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 761,709.77 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 |

16 AFFIDAVIT

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

The Honorable Wallace B. Jefferson

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 57

| | | |
|---|--|---|
| 17 COMMITTEE NAME Texas Forever Forward | | 18 Filer ID (Ethics Commission Filers) 00083850 |
| 19 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 2,680.00 |
| 2. | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 5. | <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 6. | <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 7. | <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 8. | <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 9. | <input type="checkbox"/> SCHEDULE E: LOANS | \$ |
| 10. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 151,253.26 |
| 11. | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ 1,839.19 |
| 12. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 13. | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ 9,589.18 |
| 14. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 15. | <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ 5,740.32 |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/3 Rpt: 4/57 |
| 2 FILER NAME Texas Forever Forward | | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 03/24/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bockmon, Danny (Mr.) 6 Contributor address; City; State; Zip Code Daingerfield, TX 75638 | 7 Amount of Contribution (\$) \$2,500.00 |
| 8 Principal occupation / Job title (See Instructions) President | | 9 Employer (See Instructions) Bockmon Insurance Agency |
| Date 01/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dudley, Kris (Ms.) Contributor address; City; State; Zip Code Austin, TX 78747-1660 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dudley, Kris (Ms.) Contributor address; City; State; Zip Code Austin, TX 78747-1660 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 03/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dudley, Kris (Ms.) Contributor address; City; State; Zip Code Austin, TX 78747-1660 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 04/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dudley, Kris (Ms.) Contributor address; City; State; Zip Code Austin, TX 78747-1660 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/3 Rpt: 5/57 |
| 2 FILER NAME Texas Forever Forward | | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 05/26/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dudley, Kris (Ms.) 6 Contributor address; City; State; Zip Code Austin, TX 78747-1660 | 7 Amount of Contribution (\$) \$10.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 06/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dudley, Kris (Ms.) Contributor address; City; State; Zip Code Austin, TX 78747-1660 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/24/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Mark (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75238-3301 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Tax Director | | Employer (See Instructions) Lennox International |
| Date 02/24/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Mark (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75238-3301 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Tax Director | | Employer (See Instructions) Lennox International |
| Date 03/24/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Mark (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75238-3301 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Tax Director | | Employer (See Instructions) Lennox International |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/3 Rpt: 6/57 |
| 2 FILER NAME Texas Forever Forward | | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 04/24/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Mark (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75238-3301 | 7 Amount of Contribution (\$) \$20.00 |
| 8 Principal occupation / Job title (See Instructions) Tax Director | | 9 Employer (See Instructions) Lennox International |
| Date 05/24/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Mark (Mr.) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75238-3301 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Tax Director | | Employer (See Instructions) Lennox International |
| Date 06/24/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Mark (Mr.) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75238-3301 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Tax Director | | Employer (See Instructions) Lennox International |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 1/35 Rpt: 7/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 02/06/2025 | 5 Payee name AT&T | |
| 6 Amount (\$) \$112.09 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 650574 Dallas, TX 75265-0574 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cellular Telephone for Committee Use. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/20/2025 | Payee name AT&T | |
| Amount (\$) \$112.14 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 650574 Dallas, TX 75265-0574 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cellular Telephone for Committee Use. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/16/2025 | Payee name AT&T | |
| Amount (\$) \$116.15 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 650574 Dallas, TX 75265-0574 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cellular Telephone for Committee Use. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 2/35 Rpt: 8/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 05/16/2025 | 5 Payee name AT&T | |
| 6 Amount (\$) \$116.15 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 650574 Dallas, TX 75265-0574 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cellular Telephone for Committee Use. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 06/16/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name AT&T | | |
| Amount (\$) \$116.15 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 650574 Dallas, TX 75265-0574 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cellular Telephone for Committee Use. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/29/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Anedot | | |
| Amount (\$) \$1.80 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution Processing Fee. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 3/35 Rpt: 9/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 02/26/2025 | 5 Payee name Anedot | |
| 6 Amount (\$) \$1.80 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution Processing Fee. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 03/26/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Anedot | | |
| Amount (\$) \$102.10 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution Processing Fee. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 04/30/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Anedot | | |
| Amount (\$) \$1.80 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution Processing Fee. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 4/35 Rpt: 10/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 05/29/2025 | 5 Payee name Anedot | |
| 6 Amount (\$) \$1.80 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution Processing Fee. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/30/2025 | Payee name Anedot | |
| Amount (\$) \$1.80 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution Processing Fee. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/30/2025 | Payee name Brewer, Meredith (Mrs.) | |
| Amount (\$) \$1,890.77 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2919 Trailend Dr. San Antonio, TX 78209 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages for committee political and administrative services. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 5/35 Rpt: 11/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 02/28/2025 | 5 Payee name Brewer, Meredith (Mrs.) | |
| 6 Amount (\$) \$1,890.78 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2919 Trailend Dr. San Antonio, TX 78209 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages for committee political and administrative services. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 03/31/2025 | Candidate/Officeholder name Brewer, Meredith (Mrs.) | |
| Amount (\$) \$1,890.77 <input type="checkbox"/> Expenditure from corporate funds | Office sought 2919 Trailend Dr. San Antonio, TX 78209 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages for committee political and administrative services. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 04/30/2025 | Candidate/Officeholder name Brewer, Meredith (Mrs.) | |
| Amount (\$) \$1,890.79 <input type="checkbox"/> Expenditure from corporate funds | Office sought 2919 Trailend Dr. San Antonio, TX 78209 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages for committee political and administrative services. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 6/35 Rpt: 12/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 06/02/2025 | 5 Payee name Brewer, Meredith (Mrs.) | |
| 6 Amount (\$) \$1,890.77 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2919 Trailend Dr. San Antonio, TX 78209 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages for committee political and administrative services. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 06/30/2025 | Candidate/Officeholder name Brewer, Meredith (Mrs.) | |
| Amount (\$) \$1,890.78 <input type="checkbox"/> Expenditure from corporate funds | Office sought 2919 Trailend Dr. San Antonio, TX 78209 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages for committee political and administrative services. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/02/2025 | Candidate/Officeholder name Bridgehead, I.T. | |
| Amount (\$) \$15.59 <input type="checkbox"/> Expenditure from corporate funds | Office sought 1335 Central Parkway South Suite 100 San Antonio, TX 78232 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly I.T. Software Support. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 7/35 Rpt: 13/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 02/04/2025 | 5 Payee name Bridgehead, I.T. | |
| 6 Amount (\$) \$15.59 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1335 Central Parkway South Suite 100 San Antonio, TX 78232 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly I.T. Software Support. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 04/01/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Bridgehead, I.T. | | |
| Amount (\$) \$15.59 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1335 Central Parkway South Suite 100 San Antonio, TX 78232 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly I.T. Software Support. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 04/02/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Bridgehead, I.T. | | |
| Amount (\$) \$15.59 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1335 Central Parkway South Suite 100 San Antonio, TX 78232 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly I.T. Software Support. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 8/35 Rpt: 14/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 05/06/2025 | 5 Payee name Bridgehead, I.T. | |
| 6 Amount (\$) \$15.59 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1335 Central Parkway South Suite 100 San Antonio, TX 78232 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly I.T. Software Support. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 06/02/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Bridgehead, I.T. | | |
| Amount (\$) \$15.59 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1335 Central Parkway South Suite 100 San Antonio, TX 78232 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly I.T. Software Support. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/09/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Bush, Mary (Mrs.) | | |
| Amount (\$) \$625.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 244 Retama Place San Antonio, TX 78209 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Administrative office consultant. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 9/35 Rpt: 15/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 02/04/2025 | 5 Payee name Bush, Mary (Mrs.) | |
| 6 Amount (\$) \$625.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 244 Retama Place San Antonio, TX 78209 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Administrative office consultant. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 03/04/2025 | Candidate/Officeholder name Bush, Mary (Mrs.) | |
| Amount (\$) \$625.00 <input type="checkbox"/> Expenditure from corporate funds | Office sought 244 Retama Place San Antonio, TX 78209 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Administrative office consultant. |
| Office held | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 04/01/2025 | Candidate/Officeholder name Bush, Mary (Mrs.) | |
| Amount (\$) \$625.00 <input type="checkbox"/> Expenditure from corporate funds | Office sought 244 Retama Place San Antonio, TX 78209 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Administrative office consultant. |
| Office held | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 10/35 Rpt: 16/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 05/02/2025 | 5 Payee name Bush, Mary (Mrs.) | |
| 6 Amount (\$) \$625.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 244 Retama Place San Antonio, TX 78209 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Administrative office consultant. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 06/03/2025 | Candidate/Officeholder name Bush, Mary (Mrs.) | |
| Amount (\$) \$625.00 <input type="checkbox"/> Expenditure from corporate funds | Office sought 244 Retama Place San Antonio, TX 78209 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Administrative office consultant. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/07/2025 | Candidate/Officeholder name Chase Cardmember Service | |
| Amount (\$) \$451.04 <input type="checkbox"/> Expenditure from corporate funds | Office sought PO Box 94014 Palatine, IL 60094 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for itemized incurred committee expenditures. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 11/35 Rpt: 17/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 02/21/2025 | 5 Payee name Chase Cardmember Service | |
| 6 Amount (\$) \$303.58 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for itemized incurred committee expenditures. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/28/2025 | Payee name Chase Cardmember Service | |
| Amount (\$) \$284.76 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for itemized incurred committee expenditures. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/03/2025 | Payee name Chase Cardmember Service | |
| Amount (\$) \$2,718.94 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for itemized incurred committee expenditures. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 12/35 Rpt: 18/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 04/26/2025 | 5 Payee name Chase Cardmember Service | |
| 6 Amount (\$) \$2,539.34 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for itemized incurred committee expenditures. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 05/06/2025 | Candidate/Officeholder name Office sought Office held | |
| Amount (\$) \$487.13 <input type="checkbox"/> Expenditure from corporate funds | Payee name Chase Cardmember Service Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for itemized incurred committee expenditures. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 05/23/2025 | Candidate/Officeholder name Office sought Office held | |
| Amount (\$) \$809.23 <input type="checkbox"/> Expenditure from corporate funds | Payee name Chase Cardmember Service Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for itemized incurred committee expenditures. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 13/35 Rpt: 19/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 06/26/2025 | 5 Payee name Chase Cardmember Service | |
| 6 Amount (\$) \$1,145.30 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for itemized incurred committee expenditures. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 06/30/2025 | Candidate/Officeholder name Payee name Chase Cardmember Service | |
| Amount (\$) \$322.48 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for itemized incurred committee expenditures. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/10/2025 | Candidate/Officeholder name Payee name Department of Treasury | |
| Amount (\$) \$7,442.28 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Internal Revenue Service Center Ogden, UT 84201 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Federal Payroll Taxes. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: Sch: 14/35 Rpt: 20/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 01/30/2025 | 5 Payee name Department of Treasury | |
| 6 Amount (\$) \$84.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code Internal Revenue Service Center Ogden, UT 84201 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Federal Unemployment Taxes |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/11/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Department of Treasury | | |
| Amount (\$) \$1,750.30 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Internal Revenue Service Center Ogden, UT 84201 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Federal Payroll Taxes |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 03/17/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Department of Treasury | | |
| Amount (\$) \$1,750.26 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Internal Revenue Service Center Ogden, UT 84201 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Federal Payroll Taxes |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|--|--|---|--|
| 1 Total pages Schedule F1: Sch: 15/35 Rpt: 21/57 | | 2 FILER NAME Texas Forever Forward | | 3 Filer ID (Ethics Commission Filers) 00083850 | |
| 4 Date 04/30/2025 | | 5 Payee name Department of Treasury | | | |
| 6 Amount (\$) \$1,750.30 <input type="checkbox"/> Expenditure from corporate funds | | 7 Payee address; City; State; Zip Code Internal Revenue Service Center Ogden, UT 84201 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Federal Payroll Taxes | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |
| Date 05/16/2025 | | Payee name Department of Treasury | | | |
| Amount (\$) \$1,750.24 <input type="checkbox"/> Expenditure from corporate funds | | Payee address; City; State; Zip Code Internal Revenue Service Center Ogden, UT 84201 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Federal Payroll Taxes | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |
| Date 06/13/2025 | | Payee name Department of Treasury | | | |
| Amount (\$) \$1,750.28 <input type="checkbox"/> Expenditure from corporate funds | | Payee address; City; State; Zip Code Internal Revenue Service Center Ogden, UT 84201 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Federal Payroll Taxes | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 16/35 Rpt: 22/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 04/29/2025 | 5 Payee name Department of Treasury | |
| 6 Amount (\$) \$5,616.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code Internal Revenue Service Center Ogden, UT 84201 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Taxes | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 1120 POL Taxes |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/28/2025 | Candidate/Officeholder name Embry Communications | |
| Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds | Office sought 2705 Long Lasso Pass Leander, TX 78641 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Communications Consultant |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 03/28/2025 | Candidate/Officeholder name Embry Communications | |
| Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds | Office sought 2705 Long Lasso Pass Leander, TX 78641 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Communications Consultant |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 17/35 Rpt: 23/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 05/20/2025 | 5 Payee name Embry Communications | |
| 6 Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2705 Long Lasso Pass Leander, TX 78641 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Communications Consultant |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/08/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Intuit | | |
| Amount (\$) \$3.73 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Vendor payment processing fees. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/03/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Intuit | | |
| Amount (\$) \$3.73 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Vendor payment processing fees. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 18/35 Rpt: 24/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 02/27/2025 | 5 Payee name Intuit | |
| 6 Amount (\$) \$1.87 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Vendor payment processing fees. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 03/03/2025 | Payee name Intuit | |
| Amount (\$) \$3.73 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Vendor payment processing fees. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 03/27/2025 | Payee name Intuit | |
| Amount (\$) \$1.87 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Vendor payment processing fees. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 19/35 Rpt: 25/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 03/31/2025 | 5 Payee name Intuit | |
| 6 Amount (\$) \$3.73 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Vendor payment processing fees. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 05/01/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Intuit | | |
| Amount (\$) \$3.73 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Vendor payment processing fees. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 05/19/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Intuit | | |
| Amount (\$) \$1.87 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Vendor payment processing fees. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 20/35 Rpt: 26/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 06/02/2025 | 5 Payee name Intuit | |
| 6 Amount (\$) \$3.74 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Vendor payment processing fees. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/30/2025 | Payee name Korstad, Tara (Mrs.) | |
| Amount (\$) \$2,109.25 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 412 Thistlewood Dr. Austin, TX 78745 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages for committee administrative services. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/28/2025 | Payee name Korstad, Tara (Mrs.) | |
| Amount (\$) \$2,109.26 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 412 Thistlewood Dr. Austin, TX 78745 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages for committee administrative services. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 21/35 Rpt: 27/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 03/31/2025 | 5 Payee name Korstad, Tara (Mrs.) | |
| 6 Amount (\$) \$2,109.25 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 412 Thistlewood Dr. Austin, TX 78745 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages for committee administrative services. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 04/30/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Korstad, Tara (Mrs.) | | |
| Amount (\$) \$2,109.26 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 412 Thistlewood Dr. Austin, TX 78745 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages for committee administrative services. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 06/02/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Korstad, Tara (Mrs.) | | |
| Amount (\$) \$2,109.26 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 412 Thistlewood Dr. Austin, TX 78745 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages for committee administrative services. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 22/35 Rpt: 28/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 06/30/2025 | 5 Payee name Korstad, Tara (Mrs.) | |
| 6 Amount (\$) \$2,109.26 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 412 Thistlewood Dr. Austin, TX 78745 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages for committee administrative services. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/09/2025 | Candidate/Officeholder name LHP+Company Inc. | |
| Amount (\$) \$7,500.00 <input type="checkbox"/> Expenditure from corporate funds | Office sought PO Box 29382 Austin, TX 78755 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Consultant and Related Expenses. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/04/2025 | Candidate/Officeholder name LHP+Company Inc. | |
| Amount (\$) \$7,500.00 <input type="checkbox"/> Expenditure from corporate funds | Office sought PO Box 29382 Austin, TX 78755 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Consultant and Related Expenses. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 23/35 Rpt: 29/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 03/04/2025 | 5 Payee name LHP+Company Inc. | |
| 6 Amount (\$) \$7,500.00 <input type="checkbox"/> Expenditure from corporate funds | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Consultant and Related Expenses. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 04/01/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name LHP+Company Inc. | | |
| Amount (\$) \$7,500.00 <input type="checkbox"/> Expenditure from corporate funds | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Consultant and Related Expenses. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 05/02/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name LHP+Company Inc. | | |
| Amount (\$) \$7,500.00 <input type="checkbox"/> Expenditure from corporate funds | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Consultant and Related Expenses. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 24/35 Rpt: 30/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 06/05/2025 | 5 Payee name LHP+Company Inc. | |
| 6 Amount (\$) \$7,500.00 <input type="checkbox"/> Expenditure from corporate funds | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Consultant and Related Expenses. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/30/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Millan and Company P.C. | | |
| Amount (\$) \$107.50 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 812 San Antonio Rd. Suite L17 Austin, TX 78701 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting and Ethics Compliance. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/26/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Millan and Company P.C. | | |
| Amount (\$) \$1,450.95 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 812 San Antonio Rd. Suite L17 Austin, TX 78701 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting and Ethics Compliance. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|---|
| 1 Total pages Schedule F1: Sch: 25/35 Rpt: 31/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 03/07/2025 | 5 Payee name Millan and Company P.C. | |
| 6 Amount (\$) \$60.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 812 San Antonio Rd. Suite L17 Austin, TX 78701 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting and Ethics Compliance. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 04/30/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Millan and Company P.C. | | |
| Amount (\$) \$60.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 812 San Antonio Rd. Suite L17 Austin, TX 78701 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting and Ethics Compliance. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 05/15/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Millan and Company P.C. | | |
| Amount (\$) \$1,086.98 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 812 San Antonio Rd. Suite L17 Austin, TX 78701 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting and Ethics Compliance. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 26/35 Rpt: 32/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 01/03/2025 | 5 Payee name Nueces Marketing Partners LTD | |
| 6 Amount (\$) \$708.75 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1920 Nacogdoches Rd. San Antonio, TX 78209 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Committee Office Rent. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/31/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Nueces Marketing Partners LTD | | |
| Amount (\$) \$708.75 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1920 Nacogdoches Rd. San Antonio, TX 78209 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Committee Office Rent. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 03/03/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Nueces Marketing Partners LTD | | |
| Amount (\$) \$708.75 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1920 Nacogdoches Rd. San Antonio, TX 78209 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Committee Office Rent. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 27/35 Rpt: 33/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 04/01/2025 | 5 Payee name Nueces Marketing Partners LTD | |
| 6 Amount (\$) \$708.75 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1920 Nacogdoches Rd. San Antonio, TX 78209 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Committee Office Rent. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 05/01/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Nueces Marketing Partners LTD | | |
| Amount (\$) \$708.75 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1920 Nacogdoches Rd. San Antonio, TX 78209 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Committee Office Rent. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 06/01/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Nueces Marketing Partners LTD | | |
| Amount (\$) \$708.75 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1920 Nacogdoches Rd. San Antonio, TX 78209 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Committee Office Rent. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|---|
| 1 Total pages Schedule F1: Sch: 28/35 Rpt: 34/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 01/02/2025 | 5 Payee name Plum Interests, LLC | |
| 6 Amount (\$) \$68.20 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 115 Circle Street San Antonio, TX 78209 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Committee Computer Software |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 05/06/2025 | Candidate/Officeholder name Plum Interests, LLC | |
| Amount (\$) \$68.20 <input type="checkbox"/> Expenditure from corporate funds | Office sought 115 Circle Street San Antonio, TX 78209 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Committee Computer Software |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 03/26/2025 | Candidate/Officeholder name RPSA Attorneys At Law | |
| Amount (\$) \$193.75 <input type="checkbox"/> Expenditure from corporate funds | Office sought 755 East Mulberry Suite 200 San Antonio, TX 78212 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Legal Services | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Legal fees for committee work. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 29/35 Rpt: 35/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 01/03/2025 | 5 Payee name Spectrum Business | |
| 6 Amount (\$) \$133.23 <input type="checkbox"/> Expenditure from corporate funds | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Committee office utilities. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/31/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Spectrum Business | | |
| Amount (\$) \$133.23 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 660815 Dallas, TX 75266 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Committee office utilities. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 03/03/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Spectrum Business | | |
| Amount (\$) \$133.24 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 660815 Dallas, TX 75266 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Committee office utilities. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 30/35 Rpt: 36/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 04/01/2025 | 5 Payee name Spectrum Business | |
| 6 Amount (\$) \$134.48 <input type="checkbox"/> Expenditure from corporate funds | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Committee office utilities. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 05/01/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Spectrum Business | | |
| Amount (\$) \$134.48 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 660815 Dallas, TX 75266 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Committee office utilities. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 06/01/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Spectrum Business | | |
| Amount (\$) \$134.48 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 660815 Dallas, TX 75266 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Committee office utilities. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 31/35 Rpt: 37/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 04/01/2025 | 5 Payee name Texas 2036 | |
| 6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 3963 Maple Ave. Suite 290 Dallas, TX 75219 | |
| 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Charitable contribution. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/05/2025 | Payee name The Brookings Institution | |
| Amount (\$) \$25,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1775 Massachusetts Washington, DC 20036 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Charitable Contribution. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/03/2025 | Payee name Travelers Insurance | |
| Amount (\$) \$50.76 <input type="checkbox"/> Expenditure from corporate funds | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Property and Casualty Coverage for Committee Office. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 32/35 Rpt: 38/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 01/31/2025 | 5 Payee name Travelers Insurance | |
| 6 Amount (\$) \$50.76 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 660317 Dallas, TX 75266-0317 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Property and Casualty Coverage for Committee Office. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 03/03/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Travelers Insurance | | |
| Amount (\$) \$93.07 <input type="checkbox"/> Expenditure from corporate funds | 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Property and Casualty Coverage for Committee Office. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/26/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name U.S. Post Office | | |
| Amount (\$) \$360.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1107 Austin Highway San Antonio, TX 78209 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual PO Box Rental Fee. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|---|
| 1 Total pages Schedule F1: Sch: 33/35 Rpt: 39/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 01/07/2025 | 5 Payee name Wall Street Journal | |
| 6 Amount (\$) \$70.19 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1211 Avenue of the Americas New York, NY 10036 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Subscription for Committee Use. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 03/04/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Wall Street Journal | | |
| Amount (\$) \$70.19 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1211 Avenue of the Americas New York, NY 10036 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Subscription for Committee Use. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 04/01/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Wall Street Journal | | |
| Amount (\$) \$70.19 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1211 Avenue of the Americas New York, NY 10036 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Subscription for Committee Use. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|---|
| 1 Total pages Schedule F1: Sch: 34/35 Rpt: 40/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 04/29/2025 | 5 Payee name Wall Street Journal | |
| 6 Amount (\$) \$70.19 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1211 Avenue of the Americas New York, NY 10036 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Subscription for Committee Use. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 05/27/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Wall Street Journal | | |
| Amount (\$) \$70.19 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1211 Avenue of the Americas New York, NY 10036 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Subscription for Committee Use. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/04/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Wall Street Journal | | |
| Amount (\$) \$70.19 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1211 Avenue of the Americas New York, NY 10036 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Subscription for Committee Use. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 35/35 Rpt: 41/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 06/24/2025 | 5 Payee name Wall Street Journal | |
| 6 Amount (\$) \$70.19 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1211 Avenue of the Americas New York, NY 10036 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Subscription for Committee Use. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F2: Sch: 1/2 Rpt: 42/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS | | \$ |
| 5 Date 06/30/2025 | 6 Payee name Department of Treasury | |
| 7 Amount (\$) \$1,750.26 <input type="checkbox"/> Expenditure from corporate funds | 8 Payee address; City; State; Zip Code Internal Revenue Service Center Ogden, UT 84201 | |
| 9 TYPE OF EXPENDITURE | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | |
| 10 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Incurred Federal Payroll Taxes. |
| 11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/30/2025 | Payee name Department of Treasury | |
| Amount (\$) \$84.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Internal Revenue Service Center Ogden, UT 84201 | |
| TYPE OF EXPENDITURE | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Incurred Federal Unemployment Taxes |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F2: Sch: 2/2 Rpt: 43/57 | 2 FILER NAME Texas Forever Forward | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS | | \$ |
| 5 Date 06/30/2025 | 6 Payee name Texas Workforce Commission | |
| 7 Amount (\$) \$4.93 <input type="checkbox"/> Expenditure from corporate funds | 8 Payee address; City; State; Zip Code 101 E. 15th Street Austin, TX 78778 | |
| 9 TYPE OF EXPENDITURE | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | |
| 10 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Incurred State Unemployment Taxes |
| 11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

EXPENDITURES MADE BY CREDIT CARD

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|----------------------------------|--|--|
| 1 Total pages Schedule F4: Sch: 1/11 Rpt: 44/57 | | 2 FILER NAME Texas Forever Forward | | 3 Filer ID (Ethics Commission Filers) 00083850 | |
| 4 CREDIT CARD ISSUER | | Name of financial institution Chase Bank | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 258.91 | |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$487.13 | (b) Date of Charge 04/01/2025 | (c) Date(s) Credit Card Issuer Paid 05/06/2025 | |
| 7 PAYEE | | (a) Payee name Bridgehead, I.T. | | (b) Payee address; City, State, Zip Code 1335 Central Parkway South Suite 100 San Antonio, TX 78232 | |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Quarterly IT Support | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$120.00 | (b) Date of Charge 01/20/2025 | (c) Date(s) Credit Card Issuer Paid 02/21/2025 | |
| PAYEE | | (a) Payee name Nation Builder | | (b) Payee address; City, State, Zip Code PO Box 811428 Los Angeles, CA 90081 | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Committee Campaign Software. | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$482.48 | (b) Date of Charge 02/25/2025 | (c) Date(s) Credit Card Issuer Paid 04/03/2025 | |
| PAYEE | | (a) Payee name American Airlines | | (b) Payee address; City, State, Zip Code 1 Skyview Drive Fort Worth, TX 76155 | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Travel Out of District | | (b) Description Airfare for Joe Straus to attend Brookings Institution Board Meeting | |
| | | (c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

EXPENDITURES MADE BY CREDIT CARD

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

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

The Instruction Guide explains how to complete this form.

| | | | |
|--|---|----------------------------------|--|
| 1 Total pages Schedule F4: Sch: 2/11 Rpt: 45/57 | 2 FILER NAME Texas Forever Forward | | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 CREDIT CARD ISSUER | Name of financial institution see previous | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 258.91 |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged \$20.00 | (b) Date of Charge 03/05/2025 | (c) Date(s) Credit Card Issuer Paid 04/03/2025 |
| 7 PAYEE | (a) Payee name American Airlines | | (b) Payee address; City, State, Zip Code 1 Skyview Drive Fort Worth, TX 76155 |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Travel Out of District | | (b) Description Wifi for Joe Straus while traveling to attend Brookings Institution Board Meeting |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought Office held | | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged \$460.23 | (b) Date of Charge 03/25/2025 | (c) Date(s) Credit Card Issuer Paid 04/03/2025 |
| PAYEE | (a) Payee name BOA | | (b) Payee address; City, State, Zip Code 300 W. 6th Street Austin, TX 78701 |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description Meeting to Discuss Committee Business. |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought Office held | | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged \$2,254.59 | (b) Date of Charge 04/01/2025 | (c) Date(s) Credit Card Issuer Paid 04/26/2025 |
| PAYEE | (a) Payee name Aristotle | | (b) Payee address; City, State, Zip Code 205 Pennsylvania Ave., SE Washington, DC 20003 |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Committee software. |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought Office held | | |

EXPENDITURES MADE BY CREDIT CARD

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|----------------------------------|--|--|
| 1 Total pages Schedule F4: Sch: 3/11 Rpt: 46/57 | | 2 FILER NAME Texas Forever Forward | | 3 Filer ID (Ethics Commission Filers) 00083850 | |
| 4 CREDIT CARD ISSUER | | Name of financial institution see previous | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 258.91 | |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$164.68 | (b) Date of Charge 01/10/2025 | (c) Date(s) Credit Card Issuer Paid 02/21/2025 | |
| 7 PAYEE | | (a) Payee name AT&T Mobility | | (b) Payee address; City, State, Zip Code PO Box 650574 Dallas, TX 75265-0574 | |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Cellular telephone for committee use. | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$174.90 | (b) Date of Charge 06/15/2025 | (c) Date(s) Credit Card Issuer Paid 06/30/2025 | |
| PAYEE | | (a) Payee name AT&T Mobility | | (b) Payee address; City, State, Zip Code PO Box 650574 Dallas, TX 75265-0574 | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Cellular telephone for committee use. | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$18.90 | (b) Date of Charge 01/16/2025 | (c) Date(s) Credit Card Issuer Paid 02/21/2025 | |
| PAYEE | | (a) Payee name Intuit | | (b) Payee address; City, State, Zip Code 2632 Marine Way Mountain View, CA 94043 | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | (b) Description Payroll Processing Fees. | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

EXPENDITURES MADE BY CREDIT CARD

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|---|----------------------------------|--|--|
| 1 Total pages Schedule F4: Sch: 4/11 Rpt: 47/57 | | 2 FILER NAME Texas Forever Forward | | 3 Filer ID (Ethics Commission Filers) 00083850 | |
| 4 CREDIT CARD ISSUER | | Name of financial institution see previous | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 258.91 | |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$15.12 | (b) Date of Charge 06/16/2025 | (c) Date(s) Credit Card Issuer Paid 06/30/2025 | |
| 7 PAYEE | | (a) Payee name Intuit | | (b) Payee address; City, State, Zip Code 2632 Marine Way Mountain View, CA 94043 | |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | (b) Description Payroll Processing Fees. | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$120.00 | (b) Date of Charge 02/23/2025 | (c) Date(s) Credit Card Issuer Paid 03/28/2025 | |
| PAYEE | | (a) Payee name Nation Builder | | (b) Payee address; City, State, Zip Code PO Box 811428 Los Angeles, CA 90081 | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Committee Campaign Software. | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$152.32 | (b) Date of Charge 05/20/2025 | (c) Date(s) Credit Card Issuer Paid 06/26/2025 | |
| PAYEE | | (a) Payee name PJ Clarke's | | (b) Payee address; City, State, Zip Code 1600 K Street NW Washington, DC 20006 | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description Meeting to discuss committee business. | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

EXPENDITURES MADE BY CREDIT CARD

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|----------------------------------|--|--|
| 1 Total pages Schedule F4: Sch: 5/11 Rpt: 48/57 | | 2 FILER NAME Texas Forever Forward | | 3 Filer ID (Ethics Commission Filers) 00083850 | |
| 4 CREDIT CARD ISSUER | | Name of financial institution see previous | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 258.91 | |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$563.48 | (b) Date of Charge 02/25/2025 | (c) Date(s) Credit Card Issuer Paid 04/03/2025 | |
| 7 PAYEE | | (a) Payee name United Airlines | | (b) Payee address; City, State, Zip Code 233 S. Wacker Dr. Chicago, IL 60606 | |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Travel Out of District | | (b) Description Airfare for Joe Straus to attend the Brookings Institution Board Meeting on | |
| | | (c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$164.76 | (b) Date of Charge 02/10/2025 | (c) Date(s) Credit Card Issuer Paid 03/28/2025 | |
| PAYEE | | (a) Payee name AT&T Mobility | | (b) Payee address; City, State, Zip Code PO Box 650574 Dallas, TX 75265-0574 | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Cellular telephone for committee use. | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$164.75 | (b) Date of Charge 03/10/2025 | (c) Date(s) Credit Card Issuer Paid 04/26/2025 | |
| PAYEE | | (a) Payee name AT&T Mobility | | (b) Payee address; City, State, Zip Code PO Box 650574 Dallas, TX 75265-0574 | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Cellular telephone for committee use. | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

EXPENDITURES MADE BY CREDIT CARD

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|---|----------------------------------|--|--|
| 1 Total pages Schedule F4: Sch: 6/11 Rpt: 49/57 | | 2 FILER NAME Texas Forever Forward | | 3 Filer ID (Ethics Commission Filers) 00083850 | |
| 4 CREDIT CARD ISSUER | | Name of financial institution see previous | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 258.91 | |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$164.77 | (b) Date of Charge 04/15/2025 | (c) Date(s) Credit Card Issuer Paid 05/23/2025 | |
| 7 PAYEE | | (a) Payee name AT&T Mobility | | (b) Payee address; City, State, Zip Code PO Box 650574 Dallas, TX 75265-0574 | |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Cellular telephone for committee use. | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$174.91 | (b) Date of Charge 05/23/2025 | (c) Date(s) Credit Card Issuer Paid 06/26/2025 | |
| PAYEE | | (a) Payee name AT&T Mobility | | (b) Payee address; City, State, Zip Code PO Box 650574 Dallas, TX 75265-0574 | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Cellular telephone for committee use. | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$451.04 | (b) Date of Charge 01/05/2025 | (c) Date(s) Credit Card Issuer Paid 02/07/2025 | |
| PAYEE | | (a) Payee name Bridgehead, I.T. | | (b) Payee address; City, State, Zip Code 1335 Central Parkway South Suite 100 San Antonio, TX 78232 | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Quarterly IT Support | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

EXPENDITURES MADE BY CREDIT CARD

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|----------------------------------|--|--|
| 1 Total pages Schedule F4: Sch: 7/11 Rpt: 50/57 | | 2 FILER NAME Texas Forever Forward | | 3 Filer ID (Ethics Commission Filers) 00083850 | |
| 4 CREDIT CARD ISSUER | | Name of financial institution see previous | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 258.91 | |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$277.20 | (b) Date of Charge 06/16/2025 | (c) Date(s) Credit Card Issuer Paid 05/23/2025 | |
| 7 PAYEE | | (a) Payee name Intuit | | (b) Payee address; City, State, Zip Code 2632 Marine Way Mountain View, CA 94043 | |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Annual Accounting Software Subscription. | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$120.00 | (b) Date of Charge 03/23/2025 | (c) Date(s) Credit Card Issuer Paid 04/26/2025 | |
| PAYEE | | (a) Payee name Nation Builder | | (b) Payee address; City, State, Zip Code PO Box 811428 Los Angeles, CA 90081 | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Committee Campaign Software. | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$120.00 | (b) Date of Charge 04/20/2025 | (c) Date(s) Credit Card Issuer Paid 05/23/2025 | |
| PAYEE | | (a) Payee name Nation Builder | | (b) Payee address; City, State, Zip Code PO Box 811428 Los Angeles, CA 90081 | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Committee Campaign Software. | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

EXPENDITURES MADE BY CREDIT CARD

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|----------------------------------|---|--|
| 1 Total pages Schedule F4: Sch: 8/11 Rpt: 51/57 | | 2 FILER NAME Texas Forever Forward | | 3 Filer ID (Ethics Commission Filers) 00083850 | |
| 4 CREDIT CARD ISSUER | | Name of financial institution see previous | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 258.91 | |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$120.00 | (b) Date of Charge 05/23/2025 | (c) Date(s) Credit Card Issuer Paid 06/26/2025 | |
| 7 PAYEE | | (a) Payee name Nation Builder | | (b) Payee address; City, State, Zip Code PO Box 811428 Los Angeles, CA 90081 | |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Committee Campaign Software. | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$120.00 | (b) Date of Charge 06/23/2025 | (c) Date(s) Credit Card Issuer Paid 06/30/2025 | |
| PAYEE | | (a) Payee name Nation Builder | | (b) Payee address; City, State, Zip Code PO Box 811428 Los Angeles, CA 90081 | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Committee Campaign Software. | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$322.48 | (b) Date of Charge 04/21/2025 | (c) Date(s) Credit Card Issuer Paid 05/23/2025 | |
| PAYEE | | (a) Payee name Southwest Airlines | | (b) Payee address; City, State, Zip Code 2702 Love Field Dr. Dallas, TX 75235 | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Travel Out of District | | (b) Description Airfare for Joe Straus to attend George Bush Advisory Board meeting. | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

EXPENDITURES MADE BY CREDIT CARD

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|---|----------------------------------|---|--|
| 1 Total pages Schedule F4: Sch: 9/11 Rpt: 52/57 | | 2 FILER NAME Texas Forever Forward | | 3 Filer ID (Ethics Commission Filers) 00083850 | |
| 4 CREDIT CARD ISSUER | | Name of financial institution see previous | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 258.91 | |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$18.00 | (b) Date of Charge 03/07/2025 | (c) Date(s) Credit Card Issuer Paid 04/03/2025 | |
| 7 PAYEE | | (a) Payee name United Airlines | | (b) Payee address; City, State, Zip Code 233 S. Wacker Dr. Chicago, IL 60606 | |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Travel Out of District | | (b) Description Wifi for Joe Straus to attend the Brookings Institution Board Meeting on | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$136.20 | (b) Date of Charge 04/23/2025 | (c) Date(s) Credit Card Issuer Paid 05/23/2025 | |
| PAYEE | | (a) Payee name Uber | | (b) Payee address; City, State, Zip Code 1455 Market St. San Francisco, CA 94103 | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Travel Out of District | | (b) Description Transportation for Joe Straus while participating in George Bush Advisory Board Meeting | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$971.66 | (b) Date of Charge 03/07/2025 | (c) Date(s) Credit Card Issuer Paid 04/03/2025 | |
| PAYEE | | (a) Payee name The Jefferson Hotel | | (b) Payee address; City, State, Zip Code 1200 16th St. NW Washington, DC 20036 | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Travel Out of District | | (b) Description Lodging for Joe Straus while attending the Brookings Institution Board Meeting. | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

EXPENDITURES MADE BY CREDIT CARD

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|---|----------------------------------|--|--|
| 1 Total pages Schedule F4: Sch: 10/11 Rpt: 53/57 | | 2 FILER NAME Texas Forever Forward | | 3 Filer ID (Ethics Commission Filers) 00083850 | |
| 4 CREDIT CARD ISSUER | | Name of financial institution see previous | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 258.91 | |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$565.81 | (b) Date of Charge 05/22/2025 | (c) Date(s) Credit Card Issuer Paid 06/26/2025 | |
| 7 PAYEE | | (a) Payee name The Jefferson Hotel | | (b) Payee address; City, State, Zip Code 1200 16th St. NW Washington, DC 20036 | |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Travel Out of District | | (b) Description Lodging for Joe Straus while attending the Brookings Institution Board Meeting. | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$149.53 | (b) Date of Charge 03/06/2025 | (c) Date(s) Credit Card Issuer Paid 04/03/2025 | |
| PAYEE | | (a) Payee name Uber | | (b) Payee address; City, State, Zip Code 1455 Market St. San Francisco, CA 94103 | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Travel Out of District | | (b) Description Transportation for Joe Straus while participating in Brookings Institution Board Meeting | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$37.97 | (b) Date of Charge 05/22/2025 | (c) Date(s) Credit Card Issuer Paid 06/26/2025 | |
| PAYEE | | (a) Payee name Uber | | (b) Payee address; City, State, Zip Code 1455 Market St. San Francisco, CA 94103 | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Travel Out of District | | (b) Description Transportation for Joe Straus while participating in Brookings Institution Board Meeting. | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

EXPENDITURES MADE BY CREDIT CARD

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

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

The Instruction Guide explains how to complete this form.

| | | | |
|---|---|----------------------------------|--|
| 1 Total pages Schedule F4: Sch: 11/11 Rpt: 54/57 | 2 FILER NAME Texas Forever Forward | | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 CREDIT CARD ISSUER | Name of financial institution see previous | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 258.91 |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged \$217.36 | (b) Date of Charge 06/15/2025 | (c) Date(s) Credit Card Issuer Paid 06/30/2025 |
| 7 PAYEE | (a) Payee name Go Daddy.com | | (b) Payee address; City, State, Zip Code 14455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260 |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Annual Domain Name Registration Fees. |
| (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought Office held | | |

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

SCHEDULE K

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule K: Sch: 1/2 Rpt: 55/57 |
| 2 FILER NAME Texas Forever Forward | | 3 Filer ID (Ethics Commission Filers) 00083850 |
| 4 Date 01/31/2025 | 5 Name of person from whom amount is received Frost Bank Money Market | 8 Amount (\$) \$1,041.60 |
| | 6 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78269 | |
| | 7 Purpose for which amount is received Interest Income <input type="checkbox"/> Check if political contribution returned to filer | |
| Date 02/28/2025 | Name of person from whom amount is received Frost Bank Money Market | Amount (\$) \$927.33 |
| | Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78269 | |
| | Purpose for which amount is received Interest Income <input type="checkbox"/> Check if political contribution returned to filer | |
| Date 03/31/2025 | Name of person from whom amount is received Frost Bank Money Market | Amount (\$) \$1,002.13 |
| | Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78269 | |
| | Purpose for which amount is received Interest Income <input type="checkbox"/> Check if political contribution returned to filer | |
| Date 04/30/2025 | Name of person from whom amount is received Frost Bank Money Market | Amount (\$) \$945.92 |
| | Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78269 | |
| | Purpose for which amount is received Interest Income <input type="checkbox"/> Check if political contribution returned to filer | |
| Date 05/30/2025 | Name of person from whom amount is received Frost Bank Money Market | Amount (\$) \$950.34 |
| | Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78269 | |
| | Purpose for which amount is received Interest Income <input type="checkbox"/> Check if political contribution returned to filer | |

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

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
Sch: 2/2 Rpt: 56/57

2 FILER NAME
Texas Forever Forward

3 Filer ID (Ethics Commission Filers)
00083850

4 Date
06/30/2025

5 Name of person from whom amount is received
Frost Bank Money Market

8 Amount (\$)
\$873.00

6 Address of person from whom amount is received; City; State; Zip Code

San Antonio, TX 78269

7 Purpose for which amount is received
Interest Income

☐ Check if political contribution returned to filer

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: 1/1 Rpt: 57/57

2 FILER NAME
Texas Forever Forward

3 Filer ID (Ethics Commission Filers)
00083850

4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee
American 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

03/05/2025

03/07/2025

7 Name of person(s) traveling

Straus III, Joseph (The Honorable)

8 Departure city or name of departure location

San Antonio

9 Destination city or name of destination location

Washington, D.C.

10 Means of transportation
Commercial Airplane

11 Purpose of travel (including name of conference, seminar, or other event)
Air transportation for Joe Straus to participate in Brookings Institution Board Meeting.

Name of Contributor / Corporation or Labor Organization / Pledgor /Payee
United Airlines

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

Dates of Travel

03/07/2025

03/07/2025

Name of person(s) traveling

Straus III, Joseph (The Honorable)

Departure city or name of departure location

Washington, D.C.

Destination city or name of destination location

San Antonio

Means of transportation
Commercial Airplane

Purpose of travel (including name of conference, seminar, or other event)
Airfare for Joe Straus to return from participation in the Brookings Board meeting.