# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to complete		1 Filer ID (Ethics Commi 00088214		2 Total pages	filed: 14
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
NAME	Mr.	Joseph L.			Date Received	
					ELECTRONIC	CALLY FILED
	NICKNAME I	 _AST		SUFFIX	07/14/2025	
	-	Trahan		Jr.		
4 CANDIDATE /	ADDRESS / PO BOX; APT / S	SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered	d or Date Postmarked
OFFICEHOLDER MAILING	ATTN: ZIMMERN					
ADDRESS	3355 West Alabama, Suite 9	980			Receipt #	Amount
Change of Address	Houston, TX 77098				Date Processed	
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR F	IRST		MI		
TREASURER		oseph L.				
NAME						
	NICKNAME L	 AST		SUFFIX		
	Т	rahan				
6 CAMPAIGN	STREET ADDRESS (NO PO B	OX PLEASE);	AP <sup>-</sup>	Γ / SUITE #; CITY;	S	TATE; ZIP CODE
TREASURER ADDRESS	ATTN: ZIMMERN					
(Residence or Business)	3355 West Alabama, Suite 9	980				
(**************************************	Houston, TX 77098					
7 CAMPAIGN	AREA CODE PHONE	NUMBER E	XTENSION			
TREASURER	(832) 444-0914					
PHONE	(== )					
8 REPORT				_		
TYPE	January 15	30th day before	election	Runoff		campaign treasurer ifficeholder only)
	X July 15	8th day before 6	election	Exceeded modified	_	ttach C/OH-FR)
				reporting limit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2025	TH	ROUGH	06/30/202	25	
10 ELECTION	ELECTION DATE  Month Day Year		iman.	ELECTION TYPE Runoff	Othor	
	Month Day Year 11/05/2024		rimary	Runon	Other	
	11/00/2021	XG	eneral	Special		
				Ī		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
				State Senator D	ISHICL 15	
		GO T	O PAGE 2			
		GO I	O FAGE 2			

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM C/OH COVER SHEET PG 2

2 of 14

13 C / OH NAME	Trahan Jr., Joseph L.	<b>14</b> Filer ID (00088214	(Ethics Commission Filers)				
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without to d officeholders are required to report this information	the candidate's or office	eholder's knowledge or			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
	GENERAL						
		COMMITTEE ADDRESS					
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS				
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00			
	5)	<b>\$</b> 10.00					
EXPENDITURE TOTALS	3. TOTAL UNITEM		\$ 0.00				
	4. TOTAL POLITIC		<b>\$</b> 344.89				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	<b>\$</b> 7.35			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	<b>\$</b> 45,358.00			
<b>17</b> AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.					
		Mr. Jo	seph L. Trahan Jr.				
			Candidate or Officehol	der			
AFFIX NO	TARY STAMP / SEAL AB	OVE					
Sworn to and subscribed before me, by the said, this the day							
of	, 20, to ce	ertify which, witness my hand and seal of office.					
Signature of office	cer administering	Printed name of officer administering	Title of officer	r administering oath			

### **SUBTOTALS - C/OH**

# FORM C/OH COVER SHEET PG 3

			C	OVER SHEET PG 3 3 of 14
	ER NAN ahan Jr	ME ., Joseph L. (Mr.)	<b>19</b> Filer ID 00088214	(Ethics Commission Filers)
		E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 10.00
2.		\$		
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	Х	SCHEDULE E: LOANS		\$ 348.00
5.	Х	<b>\$</b> 344.89		
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
12	. 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

	MONETARY POLITIC	NS	S	CHEDULE A1	
	The Instruction Guide explai	ns how to complete this for	rm.	1 Total pages Sche Sch: 1/1 Rpt: 4/	
2	FILER NAME Trahan Jr., Joseph L. (Mr.)			3 Filer ID (Ethics 00088214	Commission Filers)
4	Date  06/10/2025  5 Full name of contrib  Alex, Smith  6 Contributor address	7 Amount of Contri	bution (\$) \$10.00		
8	Austoin, TX 7870  Principal occupation / Job title (See Interest		Employer (See Instructions self	ns)	

	LOANS							SCHEDULE	E	
	The Instructio	n Guide explains ho	w to compl	ete this f	orm.	1	•	ges Schedule E: 5 Rpt: 5/14		
2	FILER NAME					3		(Ethics Commission Filers	s)	
	Trahan Jr., Jose	ph L. (Mr.)					000882		-,	
4	TOTAL OF UN	IITEMIZED LOANS						\$		
5	Date of loan	7 Name of lender	По	ut-of-state PA			)	9 Loan Amount (\$)		
	01/01/2025	JL Trahan Corp						1	5.00	
6	Is lender a financial institution?	8 Lender address;	City;	State;	Zip Code			10 Interest Rate	12	
	No							11 Maturity Date		
		Houston, TX 77098						06/30/2025		
12	Principal occupation	on / Job title (See Instruction	s)		13 Employer (See Instru	ictions)				
14	Description of Coll	ateral			<b>15</b> Check if personal fur	ids were	deposited	into political account		
X None								(See Instructions)		
16	GUARANTOR INFORMATION	17 Name of guarantor						19 Amount Guaranteed (\$	5)	
	X not applicable	<b>18</b> Guarantor address;	City;	State;	Zip Code					
20	Principal occupation	on			21 Employer (See Instru	ictions)				
	Date of loan	Name of lender	o	ut-of-state PA	C (ID#:		)	Loan Amount (\$)		
	01/12/2025	JL Trahan Corp						\$5	0.00	
	Is lender a financial institution?	Lender address;	City;	State;	Zip Code			Interest Rate	12	
	No							Maturity Date		
		Houston, TX 77098						06/30/2025		
	Principal occupation	on / Job title (See Instruction	s)		Employer (See Instru	ictions)				
	Description of Coll	ateral			Check if personal fur	ids were	deposited	into political account		
	X None							(See Instructions)		
	GUARANTOR INFORMATION	Name of guarantor						Amount Guaranteed (\$	5)	
	X not applicable	Guarantor address;	City;	State;	Zip Code					
	Principal occupation	<u>l</u> on			Employer (See Instru	ıctions)				

	LOANS							SCHEDULE E	
	The Instruction	n Guide explains ho	w to co	omplete this f	orm.	1	•	Total pages Schedule E: Sch: 2/5 Rpt: 6/14	
2	FILER NAME Trahan Jr., Jose	ph L. (Mr.)				3	Filer ID	(Ethics Commission Filers)	
4	TOTAL OF UN	ITEMIZED LOANS						\$	
5	Date of loan	7 Name of lender		out-of-state PA	C (ID#:	9 Loan Amount (\$)			
	01/16/2025	JL Trahan Corp						\$124.00	
6	Is lender a financial institution?	8 Lender address;	City;	State;	Zip Code			10 Interest Rate 12 11 Maturity Date	
	No	Houston, TX 77098						06/30/2025	
12	2 Principal occupation / Job title (See Instructions)  13 Employer (See Instructions)								
14	Description of Coll  X None		15 Check if personal funds v	vere	deposite	d into political account (See Instructions)			
16	16 GUARANTOR 17 Name of guarantor						19 Amount Guaranteed (\$)		
	INFORMATION  X not applicable	18 Guarantor address;	City;	State;	Zip Code				
20	Principal occupation	on			21 Employer (See Instruction	าร)		1	
	Date of loan	Name of lender		out-of-state PA	C (ID#:			Loan Amount (\$)	
	01/26/2025	JL Trahan Corp						\$50.00	
	Is lender a financial institution?	Lender address;	City;	State;	Zip Code			Interest Rate	
	No	Houston TV 77000						Maturity Date	
	Principal occupation	Houston, TX 77098 on / Job title (See Instruction	ne)		Employer (See Instruction	ne)		06/30/2025	
	i inicipal occupatio	on 7 sob title (See manuchor	13)		Employer (See mandeno	13)			
	Description of Coll  X None	ateral			Check if personal funds v	vere	deposite	d into political account (See Instructions)	
	GUARANTOR INFORMATION	Name of guarantor						Amount Guaranteed (\$)	
	X not applicable	Guarantor address;	City;	State;	Zip Code				
	Principal occupation	on			Employer (See Instruction	าร)			

	LOANS							SCHEDULE E	
	The Instructio	n Guide explains ho	w to co	omplete this f	orm.	1	Total pages Schedule E: Sch: 3/5 Rpt: 7/14		
2	FILER NAME Trahan Jr., Jose	ph L. (Mr.)				3	Filer ID	(Ethics Commission Filers)	
4	TOTAL OF UN	ITEMIZED LOANS						\$	
5	Date of loan	7 Name of lender		out-of-state PA	C (ID#:		)	9 Loan Amount (\$)	
	02/04/2025	JL Trahan Corp		_				\$10.0	0
6	Is lender a financial institution?	8 Lender address;	City;	State;	Zip Code			10 Interest Rate 1 11 Maturity Date	.2
	No	Houston, TX 77098						06/30/2025	
12	2 Principal occupation / Job title (See Instructions)  13 Employer (See Instructions)							l	
14	Description of Coll  X None	ateral		15 Check if personal funds	were	deposited	l into political account (See Instructions)		
16	16 GUARANTOR 17 Name of guarantor						19 Amount Guaranteed (\$)	_	
	INFORMATION								
	X not applicable	<b>18</b> Guarantor address;	City;	State;	Zip Code				
20	Principal occupation	on			21 Employer (See Instruction	ons)			
	Date of loan	Name of lender		out-of-state PA	C (ID#:		)	Loan Amount (\$)	_
	02/04/2025	JL Trahan Corp						\$4.0	0
	Is lender a financial institution?	Lender address;	City;	State;	Zip Code			Interest Rate	.2
	No							Maturity Date	
		Houston, TX 77098						06/30/2025	
	Principal occupation	on / Job title (See Instruction	ns)		Employer (See Instruction	ons)			
	Description of Coll  X None	ateral			Check if personal funds	were	deposited	l into political account (See Instructions)	
	GUARANTOR INFORMATION	Name of guarantor						Amount Guaranteed (\$)	
	X not applicable	Guarantor address;	City;	State;	Zip Code				
	Principal occupation	on			Employer (See Instruction	ons)		ı	

	LOANS							SCHEDULE E	
	The Instruction	n Guide explains ho	w to co	omplete this f	orm.	1		Total pages Schedule E: Sch: 4/5 Rpt: 8/14	
2	FILER NAME Trahan Jr., Jose	ph L. (Mr.)				3	Filer ID	(Ethics Commission Filers)	
4	TOTAL OF UN	ITEMIZED LOANS				<u>1</u>		\$	
5	Date of loan	7 Name of lender		out-of-state PA	C (ID#:			9 Loan Amount (\$)	
	02/04/2025	JL Trahan Corp		_				\$12.00	
6	Is lender a financial institution?	8 Lender address;	City;	State;	Zip Code			<ul><li>10 Interest Rate</li><li>12</li><li>11 Maturity Date</li></ul>	
	No	Houston, TX 77098						06/30/2025	
12	2 Principal occupation / Job title (See Instructions)  13 Employer (See Instructions)							ı	
14	Description of Coll  X None	ateral		15 Check if personal funds v	were	deposite	d into political account (See Instructions)		
16	16 GUARANTOR 17 Name of guarantor						19 Amount Guaranteed (\$)		
	INFORMATION  X not applicable	<b>18</b> Guarantor address;	City;	State;	Zip Code				
					·				
20	Principal occupation	on			21 Employer (See Instruction	ns)			
	Date of loan	Name of lender		out-of-state PA	C (ID#:			Loan Amount (\$)	
	02/05/2025	JL Trahan Corp						\$12.00	
	Is lender a financial institution?	Lender address;	City;	State;	Zip Code			Interest Rate	
	No							Maturity Date	
		Houston, TX 77098						06/30/2025	
	Principal occupation	on / Job title (See Instruction	ns)		Employer (See Instructio	ns)			
	Description of Coll  X None	ateral			Check if personal funds	were	deposite	d into political account (See Instructions)	
	GUARANTOR INFORMATION	Name of guarantor						Amount Guaranteed (\$)	
	X not applicable	Guarantor address;	City;	State;	Zip Code				
	Principal occupation	on			Employer (See Instructio	ns)		•	

	LOANS							SCHEDULE E	
	The Instruction	n Guide explains ho	w to co	omplete this f	orm.	1		Total pages Schedule E: Sch: 5/5 Rpt: 9/14	
2	FILER NAME Trahan Jr., Jose	ph L. (Mr.)				3	Filer ID 000882	(Ethics Commission Filers)	
4	TOTAL OF UN	ITEMIZED LOANS						\$	
5	Date of loan	7 Name of lender		out-of-state PA	C (ID#:		)	9 Loan Amount (\$)	
	02/05/2025	JL Trahan Corp						\$30.00	
6	Is lender a financial institution?	8 Lender address;	City;	State;	Zip Code			10 Interest Rate 12 11 Maturity Date	
	No	Houston, TX 77098						06/30/2025	
12	12 Principal occupation / Job title (See Instructions)  13 Employer (See Instructions)							<u>I</u>	
14	Description of Coll  X None	ateral			15 Check if personal funds	were	deposited	I into political account (See Instructions)	
16	16 GUARANTOR 17 Name of guarantor						19 Amount Guaranteed (\$)		
	INFORMATION  X not applicable	<b>18</b> Guarantor address;	City;	State;	Zip Code				
20	Principal occupation	on			21 Employer (See Instruction	ons)		I	
	Date of loan	Name of lender		out-of-state PA	C (ID#:			Loan Amount (\$)	
	02/05/2025	JL Trahan Corp						\$21.00	
	Is lender a financial institution?	Lender address;	City;	State;	Zip Code			Interest Rate	
	No	Houston TV 77000						Maturity Date 06/30/2025	
	Principal occupation	Houston, TX 77098 on / Job title (See Instruction	ne)		Employer (See Instruction	nne)		06/30/2025	
	i moipai oodapaii		,		Employer (Geo mondone	J.10)			
	Description of Coll  X None	ateral			Check if personal funds	were	deposited	l into political account (See Instructions)	
	GUARANTOR INFORMATION	Name of guarantor						Amount Guaranteed (\$)	
	X not applicable	Guarantor address;	City;	State;	Zip Code				
	Principal occupation	on			Employer (See Instruction	ons)			

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/5 Rpt: 10/14	Trahan Jr., Joseph L. (Mr.)
4	Date	5 Payee name
	01/27/2025	Benihana of Tokyo Restaurant
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$96.65	9707 Westheimer Rd
		Houston, TX 77042
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		campaign fundraising
9	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
_		
	Date	Payee name
	01/09/2025	LOOM Software
	Amount (\$)	Payee address; City; State; Zip Code
	\$80.00	140 2nd Street,
		3rd Floor
		san fransisco, CA 94105
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		loom software for campaign marketing
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/24/2025	Lizards Pub
	Amount (\$)	Payee address; City; State; Zip Code
	\$26.11	2715 Sackett ST
		Houston, TX 77098
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Event Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		campaign team meet
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held  Traban Jacob Secretary of State District 15
	parameter administration of the	Trahan, Joseph Secretary of State District 15

#### SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/5 Rpt: 11/14	Trahan Jr., Joseph L. (Mr.) 00088214
4	Date	5 Payee name
	06/30/2025	Stripe Merchant Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15.43	354 Oyster Point Blvd
		South San Francisco, CA 94080
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  merchant service fee
		meronant service rec
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	5 .	
	Date	Payee name
	01/02/2025	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.93	1725 Third Street
		San Francisco , CA 95158
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  UBER
		OBEIX
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	5 .	
	Date	Payee name
	01/02/2025	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$27.73	1725 Third Street
		San Francisco , CA 95158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		travel to event
_	Operation ONE V. C. F	Open Higher (Office health are nown)
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held  Trahan, Joseph State Senator District 15
		Trahan, Joseph State Senator District 15

#### 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)

Cre	dit Card Paymen	ıt	The Instruction Guide e	explains how to comp	lete this form.				
1 Tota	al pages Sch	edule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)		
So	ch: 3/5 Rpt:	12/14	Trahan Jr., Joseph L. (Mr.)			00088214			
4 Date	Э		5 Payee name		•				
06/1	13/2025		Uber						
6 Amo	ount (\$)		7 Payee address; City;	State; Zip Code	!				
		\$21.04	1725 Third Street						
			San Francisco , CA 95158						
8 1	PURPOSE		(a) Category (See Categories listed at the top	of this schedule) (b	) Description				
FX	OF PENDITURE	=	Travel In District	,	Check if travel out:				
	. LIIDII OIL	-			Check if Austin, The travel to campa	K, officeholder living	g expense		
					liavei lo campa	igii eveni			
<b>9</b> Com	nplete <u>ONLY</u>	if direct	Candidate/Officeholder name	Office sough	<u> </u>	Office he	ald		
	enditure to be				f State District 15		Siu .		
Date	2		·						
	31/2025		Payee name Wells Fargo						
			<u> </u>	State; Zip Code					
AIIIC	ount (\$)	\$10.00	Payee address; City; 3803 Westheimer Rd	State, Zip Code					
		Φ10.00	3003 Westileillei Ku						
			Houston TV 77027						
			Houston, TX 77027						
•	PURPOSE OF		(a) Category (See Categories listed at the top	of this schedule)	Description  Check if travel out	side of Teyes Com	nlete Schedule T		
EX	PENDITURE	Ī	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
					Monthly bank fe	ee			
	nplete ONLY		Candidate/Officeholder name	Office sough	t	Office he	eld		
expe	enditure to be	enefit C/O	-						
Date	<del></del>		Payee name						
02/2	28/2025		Wells Fargo						
Amo	ount (\$)		Payee address; City;	State; Zip Code	!				
		\$10.00	3803 Westheimer Rd						
			Houston, TX 77027						
ı	PURPOSE		(a) Category (See Categories listed at the top	of this schedule) (b	) Description				
EY	OF PENDITURE	=	Accounting/Banking	,	Check if travel out:	side of Texas. Com	plete Schedule T.		
LX	FENDITORE	-			ш	K, officeholder living	g expense		
					monthly Acct fe	е			
Com	anlote ONL V	if direct	Candidate/Officeholder name	Office court	<u> </u>	Office he	nld		
	nplete <u>ONLY</u> enditure to be			Office sough	ι	Office ne	eiu		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ense Event Expense Loan Repayment/Reimbu

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

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)								
	Sch: 4/5 Rpt: 13/14	Trahan Jr., Joseph L. (Mr.)								
4	Date	5 Payee name								
	03/31/2025	Wells Fargo								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$10.00									
		Houston, TX 77027								
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.								
	EXPENDITORE	Check if Austin, TX, officeholder living expense								
		monthly acct fee								
_										
9	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH									
	Date	Payee name								
	04/30/2025	Wells Fargo								
	Amount (\$)	Payee address; City; State; Zip Code								
\$10.00 3803 Westheimer Rd										
		Houston, TX 77027								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
OF EXPENDITURE		Accounting/Banking Check if travel outside of Texas. Complete Schedule T.								
		Check if Austin, TX, officeholder living expense  monthly acct fee								
		monthly accriee								
Complete ONLY if direct Candidate/Officeholder name Office sought Office held										
	expenditure to benefit C/O									
	Data	Description								
	Date 05/31/2025	Payee name Wells Fargo								
Amount (\$) Payee address; City; State; Zip Code										
	\$10.00	3803 Westheimer Rd								
		Houston, TX 77027								
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense								
		monthly acct fee								
		,								
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/O	<b>o</b>								

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			mmittee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains		Polling Expense Printing Expense Salaries/Wages/Contract Labor how to complete this form.			Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)	
┰	Total pages Schedule F1:	2	FII FR NAM				-	3	Filer ID	(Ethics Commission Filers)	
-	Sch: 5/5 Rpt: 14/14	_		, Joseph L. (Mr.)					00088214	(,	
4	Date	5	Payee name	<del></del>							
	06/30/2025		Wells Farg								
6	Amount (\$)	7 Payee address; City; State; Zip Code									
	\$10.00	3803 Westheimer Rd									
			Houston, T	X 77027							
8	PURPOSE	(a)	Category (	See Categories listed at the to	op of this sch	edule) (	b) Description				
	OF EXPENDITURE		Accounting			Check if travel outside of Texas. Complete Schedule T.					
	LXI LINDITORL								officeholder living	expense	
							monthly a	acct ree	}		
L											
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Of	ficeholder name	С	Office soug	ht		Office he	eld	