CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comple	ete this form.	1 Filer ID (Ethics Commi 00051664		2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	JSE ONLY
OFFICEHOLDER NAME	The Honorable	Charles				
INAIVIE					Date Received	
					ELECTRONICA	ALLY FILED
	NICKNAME	LAST		SUFFIX	07/15/2025	
		Cunningham		Jr.		
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ CLUTE #: CIT	V.	ZID CODE	Date Hand-delivered or	· Nata Postmarkad
4 CANDIDATE / OFFICEHOLDER		/ SUITE #, CIT	Υ,	ZIP CODE	Date Hand-delivered of	Date i ostinarkeu
MAILING	PO Box 14352				Receipt #	Amount
ADDRESS					Receipt #	Amount
Change of Address	Humble, TX 77347				Date Processed	
'					Date Processed	
					Data Incomed	
					Date Imaged	
5 0445410H	140 (14D0 (14D	FIDOT				
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST		MI		
NAME	Mr.	Steve				
	NICKNAME	LAST		SUFFIX		
		Kusner				
6 CAMPAIGN	STREET ADDRESS (NO PO	DOV DI EASE):	Λ D-	Γ / SUITE #; CITY	; STA	TE; ZIP CODE
TREASURER	· ·	BOX PLEASE),	AP	1/3011E#, CIT	, 31A	TIE, ZIP CODE
ADDRESS	4319 Terrace Pines Dr.					
(Residence or Business)						
(Kingwood, TX 77345					
7 CAMPAIGN	AREA CODE PHON	E NUMBER E	EXTENSION			
TREASURER PHONE	(281) 446-0574					
THONE						
8 REPORT						
TYPE	January 15	30th day before	election	Runoff	15th day after car	
		- -		_	appointment (offic	
	X July 15	8th day before	election	Exceeded modified reporting limit	Final Report (Atta	ch C/OH-FR)
				Toporting innit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2025	TH	IROUGH	06/30/202	25	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	XP	rimary	Runoff	Other	
	03/03/2026					
		∐ ^G	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH	Γ (if known)	
	State Representative Distr	ict 127 Harris		State Represen	tative District 127	
		GO T	O PAGE 2			
I						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 15

13 C / OH NAME	Cunningham Jr., Cha	rles (The Honorable)	14 Filer ID (I 00051664	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendir These expenditures may have been made withou d officeholders are required to report this information	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
16 CONTRIBUTION TOTALS		L IZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELI		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 8,650.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 17,729.92
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 107,547.90
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	S OF THE LAST DAY	\$ 40,000.00
17 AFFIDAVIT	-			
		I swear, or affirm, under penal true and correct and includes under Title 15, Election Code.	all information required to	
			ole Charles Cunningha of Candidate or Officeholo	
		, and the second	or Caracaca or Cinecinolic	
AFFIX NO	TARY STAMP / SEAL ABO	OVE		
		aid	, this the	day
of	, 20, to ce	ertify which, witness my hand and seal of office.		
Signature of offi	cer administering	Printed name of officer administering	Title of officer	administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				JVER	3 of 15
	LER NAM	ME am Jr., Charles (The Honorable)	19 Filer ID 00051664	(Ethics	Commission Filers)
	CHEDUL AME OF		SU	IBTOTAL AMOUNT	
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	8,650.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	X	SCHEDULE E: LOANS		\$	40,000.00
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	17,729.92
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
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	DNS	\$	
12	· 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/15	
2	FILER NAME Cunningham	Jr., Charles (The Honorable)			3	Filer ID (Ethics Commission 00051664	on Filers)
4	Date 06/28/2025			7	Amount of Contribution (\$)	\$500.00	
_		Humble, TX 77339		5 1 (0 1 : :	<u></u>		
8	Engineer	pation / Job title (See Instructions)	9	Employer (See Instructions TXE	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 06/28/2025 Chambers, William (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00		
	Principal occu	Kingwood, TX 77339 pation / Job title (See Instructions)		Employer (See Instructions	 		
	Retired	,		Retired	,		
	Date 06/28/2025	Full name of contributor Flanagan, Robert Contributor address; City; Stat	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77018					
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions The Flanagan Company		.C	
	Date 06/28/2025	Full name of contributor Owens, Philip (Mr.) Contributor address; City; Stat Humble, TX 77396	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$50.00
Principal occupation / Job title (See Instructions) Retired Employe Retried		Employer (See Instructions Retried	5)				
Date Full name of contributor out-of-state PAC (ID#:) 06/27/2025 Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$5,000.00			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			1				

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1
	The Instructi	ion Guide explains how to complete this f	orı	n.	1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/15
2	FILER NAME Cunningham J	r., Charles (The Honorable)			3	Filer ID (Ethics Commission Filers) 00051664
4	06/27/2025	Full name of contributor out-of-state PAC (ID#:_ Weekley, Richard Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$) \$2,000.00
8	Principal occupa Homebuilder	Houston, TX 77055 tion / Job title (See Instructions)	9	Employer (See Instructions Weekley Homes	<u> </u> s)	

	LOANS				SCHEDULE E	
	The Instruction	on Guide explains how to complete this f	orm.	I	Total pages Schedule E: Sch: 1/1 Rpt: 6/15	
2	FILER NAME Cunningham Jr.	, Charles (The Honorable)		3 Filer ID 000516	(Ethics Commission Filers)	
4	TOTAL OF UN	IITEMIZED LOANS		l	\$	
5	Date of loan 01/01/2025	7 Name of lender Out-of-state PA Cunningham, Charles	C (ID#:)	9 Loan Amount (\$) \$40,000.00	
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate	
	No	Humble, TX 77338			11 Maturity Date	
12	Principal occupation	on / Job title (See Instructions)	13 Employer (See Instructions CenterPoint	5)		
14	Description of Coll X None	lateral	15 Check if personal funds we	ere deposited	d into political account (See Instructions)	
16	GUARANTOR INFORMATION	17 Name of guarantor			19 Amount Guaranteed (\$)	
	X not applicable	18 Guarantor address; City; State;	Zip Code			
20	Principal occupation	<u>I</u> on	21 Employer (See Instructions	5)		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category net 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: 1/9 Rpt: 7/15	Cunningham Jr., Charles (The Honorable) 00051664
4	Date	5 Payee name
	02/10/2025	Benavides, Roel
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	1200 Barton Hills Dr Apt 213
		Austin, TX 78704
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LAPENDITORE	Check if Austin, TX, officeholder living expense
		Contract Labor
_	0 1 0 0 1 1 1 1	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/10/2025	Benavides Jr., Roel (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1200 Barton Hills Dr Apt 213
		Austin, TX 78704
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Contract Labor
		Contract East.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/03/2025	Benavides Jr., Roel (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	1200 Barton Hills Dr Apt 213
	Ψ1,500.00	1200 Batton Fillis Di Apt 213
		Austin TV 70704
		Austin, TX 78704
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Contract Labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Final Services Salaries/Manes/Contract Labor

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
Ŀ			
1	Total pages Schedule F1: Sch: 2/9 Rpt: 8/15	2 FILER NAME Cunningham Jr., Charles (The Honorable)	3 Filer ID (Ethics Commission Filers) 00051664
┝	Data	F 0	
4		5 Payee name	
l	04/28/2025	Benavides Jr., Roel (Mr.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
ľ	, ,		
l	\$156.58	1200 Barton Hills Dr Apt 213	
l			
l		Austin, TX 78704	
ᆫ		Addill, 17, 70704	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF		utside of Texas. Complete Schedule T.
l	EXPENDITURE		TX, officeholder living expense
l		Contract Labo	r
l			
⊢			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
l	expenditure to benefit C/O	1	
F	Date	Davies name	
l		Payee name	
	02/25/2025	Calvert, Cynthia (Mrs.)	
	Amount (\$)	Payee address; City; State; Zip Code	
l	\$1,035.00	2927 Eagle Creek	
l	41,000.00	2021 2dg/0 0100K	
l			
		Kingwood, TX 77345	
Н	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF		utside of Texas. Complete Schedule T.
l	EXPENDITURE	Salaries/ Wages/Contract Eabor	TX, officeholder living expense
l		Contract Labo	
		Contract Labo	II
L			
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	₹	
⊨	5 :		
	Date	Payee name	
	04/18/2025	Clayton Spangler Photographic Design	
	Amount (\$)	Payee address; City; State; Zip Code	
l	\$549.00	5318 Chestnut Ave South	
l	ΨΟ 10.00	oolo oncommento ocum	
1			
		Charleston, WV 25309	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF	, , , , , , , , , , , , , , , , , , ,	utside of Texas. Complete Schedule T.
l	EXPENDITURE	Office Overficaci/Nertical Experise	TX, officeholder living expense
l			17, onicendider living expense
		Office Picture	
L			
Γ	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	₹	
\vdash			
ĺ			
1			
•			

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to co	-	ete this form.
1	Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)
	Sch: 3/9 Rpt: 9/15	Cunningham Jr., Charles (The Honorable)		00051664
4	Date	5 Payee name		
	02/24/2025	ConstantContact		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$138.58	1601 Trapelo Road		
		Waltham, MA 02451		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Advertising
				Advertising
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
ľ	expenditure to benefit C/OI		giit	Cilide Held
	Date	Payee name		
	03/13/2025	ConstantContact		
	Amount (\$)	Payee address; City; State; Zip Co	do	
	\$138.58	1601 Trapelo Road	ue	
	Ψ130.30	1001 Hapelo Roau		
		Molthom MA 024E1		
		Waltham, MA 02451		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense		Check if Austin, TX, officeholder living expense
				Advertising
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	04/13/2025	ConstantContact		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$138.58	1601 Trapelo Road		
		Waltham, MA 02451		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Advertising
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI		J -	

SCHEDULE F1

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

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

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

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

Candidate/Officenoider/Po	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F	1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/9 Rpt: 10/15	Cunningham Jr., Charles (The Honorable) 00051664
4 Date	5 Payee name
05/13/2025	ConstantContact
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$138.5	1601 Trapelo Road
	Waltham, MA 02451
8 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
	Advertising
9 Complete ONLY if direct	
expenditure to benefit C	У/ОН
Date	Payee name
06/13/2025	ConstantContact
Amount (\$)	Payee address; City; State; Zip Code
\$138.5	8 1601 Trapelo Road
	Waltham, MA 02451
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
	Check if Austin, TX, officeholder living expense Advertising
	Auvertising
Complete ONLY if direct	t Candidate/Officeholder name Office sought Office held
expenditure to benefit C	
Date	Payee name
06/11/2025	Harris County Republican Party
Amount (\$)	Payee address; City; State; Zip Code
\$1,200.0	
Ψ1,200.0	5 5550 Naty Freeway, Suite 445
	Houston, TX 77024
PURPOSE	Tu.
OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Event Sponsorship
Complete ONLY if direct expenditure to benefit C	
experiulture to benefit C	,, _{,,,,,} ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	l 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: 5/9 Rpt: 11/15	Cunningham Jr., Charles (The Honorable) 00051664
4	Date	5 Payee name
	03/24/2025	Humble Christian School
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	16202
		Wilson Rd.
		Humble, TX 77396
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Sponsorship
		Sponsorship
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/21/2025	Kingwood Area Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	P.O. Box 5906
		Houston, TX 77325
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		March Lunch Sponsorship
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
L	03/21/2025	Kingwood Tea Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	2261 Northpark Dr #109
		Kingwood, TX 77339
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Advertising
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/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: 6/9 Rpt: 12/15	Cunningham Jr., Charles (The Honorable) 00051664
4	Date	5 Payee name
	06/09/2025	Kingwood Tea Party
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$200.00	2261 Northpark Dr #109
		Kingwood, TX 77339
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Advertising
		Advertising
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_		
	Date	Payee name
	03/04/2025	Mammoth Marketing Group
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,121.44	4500 Bissonnet Street
		Bellaire, TX 77401
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Advertising
		Advertising
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	D :	
	Date	Payee name
	05/23/2025	Partnership Lake Houston
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	110 W Main Street
		Humble, TX 77338
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Advertising
		Auvertiality
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
sing Expense 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
Legal Services

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)							
	Sch: 7/9 Rpt: 13/15	Cunningham Jr., Charles (The Honorable) 00051664							
4	Date	5 Payee name							
	05/23/2025	Partnership Lake Houston							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$395.00	110 W Main Street							
		Humble, TX 77338							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Advertising Expense							
		Check if Austin, TX, officeholder living expense							
		Advertising							
Ļ	Complete ONLY if disent	Condidate/Officeholder name Office county							
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
	Date	Payee name							
	01/16/2025	State Preservation Board							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$130.00	201 E 14th Street							
		Austin, TX 78701							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE		Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.							
		Check if Austin, TX, officeholder living expense TV Installation							
		1 V Instanction							
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI								
-	Data	Davies same							
	Date	Payee name Texas Conservative Coalition							
	02/07/2025								
	Amount (\$)	Payee address; City; State; Zip Code							
	\$2,000.00	PO Box 2659							
		Austin, TX 78768							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.							
		Check if Austin, TX, officeholder living expense Membership							
		Methiberanip							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI								

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F1: Sch: 8/9 Rpt: 14/15	2 FILER NAME Cunningham Jr., Charles (The Honorable) 3 Filer ID (Ethics Commission Filers) 00051664								
4	Date 06/05/2025	5 Payee name Texas Energy Climate Caucus								
6	Amount (\$) \$200.00	7 Payee address; City; State; Zip Code P. O. Box 301074 Austin, TX 78703								
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership								
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held								
	Date 03/04/2025	Payee name Texas House Republican Caucus								
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 13305 Austin, TX 78711								
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership								
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH									
	Date 03/25/2025	Payee name Texas Legislative Black Caucus								
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1108 Lavaca Suite 110								
		Austin, TX 78701								
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership								
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held								

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 B Candidate/Officeholder/Politica Credit Card Payment			mmittee	Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/C			e se s/Contract Labor		Travel Out of District OTHER (enter a category not listed above)		
				The Instruction Gu	ide explains l	how to comple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAMI	E				3	Filer ID	(Ethics Commiss	ion Filers)
	Sch: 9/9 Rpt: 15/15		Cunningha	m Jr., Charles (T	he Honoral	ole)			00051664		
4	Date	5	Payee name					<u> </u>			
	01/03/2025		Wei, Wenfa								
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip Code					
	\$2,100.00		14116 Sag	e Blossom Dr							
			Manor, TX	78653							
8	PURPOSE	(a	Category (S	See Categories listed at th	e top of this sch	edule) (b)	Description				
	OF			rhead/Rental Exp		, l	Check if travel	outs	ide of Texas. Co	nplete Schedule T.	
	EXPENDITURE			·			_		, officeholder livir	g expense	
							Rental Exper	nse	!		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	ficeholder name	C	Office sought			Office h	eld	