

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00083435	2 Total pages filed: 31								
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI The Honorable Jared S.		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/15/2025								
	NICKNAME LAST SUFFIX Robinson										
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE <div style="background-color: black; color: white; text-align: center; padding: 5px;"> REDACTED PER 254.0313, GOV'T CODE </div>		Date Hand-delivered or Date Postmarked								
			Receipt # Amount								
			Date Processed								
			Date Imaged								
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Beth J.										
	NICKNAME LAST SUFFIX Robinson										
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <div style="background-color: black; color: white; text-align: center; padding: 5px;"> REDACTED PER 254.0313, GOV'T CODE </div>										
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (713) 560-5506										
8 REPORT TYPE	<table style="width: 100%;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</td> </tr> <tr> <td><input checked="" type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded modified reporting limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH-FR)</td> </tr> </table>			<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded modified reporting limit	<input type="checkbox"/> Final Report (Attach C/OH-FR)
<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)								
<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded modified reporting limit	<input type="checkbox"/> Final Report (Attach C/OH-FR)								
9 PERIOD COVERED	Month Day Year Month Day Year 01/01/2025 THROUGH 06/30/2025										
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special								
11 OFFICE	OFFICE HELD (if any) District Judge District 405 Galveston		12 OFFICE SOUGHT (if known)								

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

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13 C / OH NAME Robinson, Jared S. (The Honorable)	14 Filer ID (Ethics Commission Filers) 00083435
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 45,150.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$ 12,883.46
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 118,320.46
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,400.00

17 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.		
<div style="display: flex; justify-content: center; align-items: center;"><div style="text-align: center; margin-right: 20px;">The Honorable Jared S. Robinson</div><div style="border-bottom: 1px solid black; width: 300px;"></div></div> <div style="text-align: center;">Signature of Candidate or Officeholder</div>		
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 - JC/OH

FORM JC/OH
COVER SHEET PG 3

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18 FILER NAME Robinson, Jared S. (The Honorable)		19 Filer ID (Ethics Commission Filers) 00083435
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 44,150.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,000.00
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 12,883.46
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/14 Rpt: 4/31
2 FILER NAME Robinson, Jared S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083435
4 Date 02/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Caroline <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Buzbee Law Firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anthony G. Buzbee, LP <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beeton Shabot, LLC <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/14 Rpt: 5/31
2 FILER NAME Robinson, Jared S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083435
4 Date 02/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brock, Jack <hr/> 6 Contributor address; City; State; Zip Code Galveston, TX 77551	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Mills Shirley, LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burwell Nebout Trial Lawyers <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos Garza PLLC <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/14 Rpt: 6/31
2 FILER NAME Robinson, Jared S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083435
4 Date 02/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ciavaglia, Mark (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Texas City, TX 77590	7 Amount of Contribution (\$) \$1,500.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm LGBS, LLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dibrell, CG <hr/> Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Retired		Contributor's Job Title Judge
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DuCote, James <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office Of James Ducote		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/14 Rpt: 7/31
2 FILER NAME Robinson, Jared S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083435
4 Date 02/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eiland and Bonnin, PC <hr/> 6 Contributor address; City; State; Zip Code Galveston, TX 77550	7 Amount of Contribution (\$) <div style="text-align: right;">\$2,500.00</div>
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greer, Herz & Adams, LLP <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) <div style="text-align: right;">\$2,500.00</div>
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Brett <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) <div style="text-align: right;">\$2,500.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Buzbee Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/14 Rpt: 8/31
2 FILER NAME Robinson, Jared S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083435
4 Date 02/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hindman, Margaret (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Galveston, TX 77553	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Law Office of Margaret Hindman		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ibrahim, Mohammed <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$1,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Ibrahim and Elliott LLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson & Associates, Attorneys at Law, PLLC <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/14 Rpt: 9/31
2 FILER NAME Robinson, Jared S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083435
4 Date 02/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kevin C. Rekoff, Attorney At Law <hr/> 6 Contributor address; City; State; Zip Code Galveston, TX 77550	7 Amount of Contribution (\$) \$1,500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office Of Michael Guarino <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of J.L. Carpenter <hr/> Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/14 Rpt: 10/31
2 FILER NAME Robinson, Jared S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083435
4 Date 02/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Jeff Kilgore <hr/> 6 Contributor address; City; State; Zip Code Galveston, TX 77550	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Michael Russo <hr/> Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark Diaz and Associates, LLC <hr/> Contributor address; City; State; Zip Code Galveston, TX 77571	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/14 Rpt: 11/31
2 FILER NAME Robinson, Jared S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083435
4 Date 02/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark W. Stevens, Attorney <hr/> 6 Contributor address; City; State; Zip Code Galveston, TX 77552	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGuire Injury Law, PLLC <hr/> Contributor address; City; State; Zip Code Santa Fe, TX 77510	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLeod, Alexander, Powel & Apffel <hr/> Contributor address; City; State; Zip Code Galveston, TX 77553	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/14 Rpt: 12/31
2 FILER NAME Robinson, Jared S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083435
4 Date 02/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills Shirley LLP <hr/> 6 Contributor address; City; State; Zip Code Galveston, TX 77550	7 Amount of Contribution (\$) \$2,500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Musemeche Law PC <hr/> Contributor address; City; State; Zip Code Webster, TX 77598	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patrick R. Jackson PLC <hr/> Contributor address; City; State; Zip Code Bossier City, LA 71111	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/14 Rpt: 13/31
2 FILER NAME Robinson, Jared S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083435
4 Date 02/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Nick <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77019	7 Amount of Contribution (\$) \$50.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Olson and Olson LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Beeton, Shabot & McConnell LLC <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith Law Firm <hr/> Contributor address; City; State; Zip Code Alvin, TX 77511	Amount of Contribution (\$) \$1,500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

SCHEDULE A(J)1

Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.f10d0fd8

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 12/14 Rpt: 15/31
2 FILER NAME Robinson, Jared S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083435
4 Date 02/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Crew Law Firm, P.C. <hr/> 6 Contributor address; City; State; Zip Code League City, TX 77573	7 Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$2,500.00</div>
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Metzger Law Firm, PLLC <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$500.00</div>
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thornton Law Firm <hr/> Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$500.00</div>
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 13/14 Rpt: 16/31
2 FILER NAME Robinson, Jared S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083435
4 Date 02/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd, Alton <hr/> 6 Contributor address; City; State; Zip Code Friendswood, TX 77546	7 Amount of Contribution (\$) <div style="text-align: right;">\$500.00</div>
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Law Office Of Alton C. Todd		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Ismael <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) <div style="text-align: right;">\$500.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Ismael Trevino		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, David <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) <div style="text-align: right;">\$500.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office Of David Walker		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 14/14 Rpt: 17/31
2 FILER NAME Robinson, Jared S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083435
4 Date 02/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, Emily <hr/> 6 Contributor address; City; State; Zip Code League City, TX 77573	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm LGBS, LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Marc <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Galveston Central Appraisal District		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zende Del & Associates, PLLC <hr/> Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 18/31	
2 FILER NAME Robinson, Jared S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083435	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/26/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apffel Legal, PLLC 7 Contributor address; City; State; Zip Code Galveston, TX 77550	8 Amount of contribution (\$) \$1,000.00	9 In-kind contribution description Food and Beverages
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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: 1/12 Rpt: 19/31	2 FILER NAME Robinson, Jared S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00083435
4 Date 03/10/2025	5 Payee name Academy Sports and Outdoors	
6 Amount (\$) \$132.46	7 Payee address; City; State; Zip Code 4523 Fort Crockett Blvd Galveston, TX 77551	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Canopy
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/06/2025	Candidate/Officeholder name Anedot	
Amount (\$) \$20.30	Payee address; City; State; Zip Code 1920 McKinney Ave 7th Floor Dallas, TX 75201	
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 Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/07/2025	Candidate/Officeholder name Anedot	
Amount (\$) \$822.60	Payee address; City; State; Zip Code 1920 McKinney Ave 7th Floor Dallas, TX 75201	
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 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: 2/12 Rpt: 20/31	2 FILER NAME Robinson, Jared S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00083435
4 Date 02/14/2025	5 Payee name Black Pearl	
6 Amount (\$) \$96.76	7 Payee address; City; State; Zip Code 327 23rd St Galveston, TX 77551	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/05/2025	Candidate/Officeholder name Office sought Office held	
Payee name Black Pearl		
Amount (\$) \$54.93	Payee address; City; State; Zip Code 327 23rd St Galveston, TX 77551	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Lunch
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/12/2025	Candidate/Officeholder name Office sought Office held	
Payee name CVS		
Amount (\$) \$4.86	Payee address; City; State; Zip Code 6128 Broadway St Galveston, TX 77551	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Card
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: 3/12 Rpt: 21/31	2 FILER NAME Robinson, Jared S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00083435
4 Date 03/31/2025	5 Payee name Clear Creek Republican Women	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code PO Box 2171 League City, TX 77574	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/02/2025	Payee name Coastal Conservation of America	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 6919 PortWest Drive Suite 100 Houston, TX 77024	
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 Event Donation/sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/02/2025	Payee name Coastal Conservation of America	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 6919 PortWest Drive Suite 100 Houston, TX 77024	
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 Membership Fees
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: 4/12 Rpt: 22/31	2 FILER NAME Robinson, Jared S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00083435
4 Date 05/19/2025	5 Payee name Coastal Conservation of America	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 6919 PortWest Drive Suite 100 Houston, TX 77024	
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 Donation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/07/2025	Payee name Dropbox	
Amount (\$) \$127.79	Payee address; City; State; Zip Code 1800 Owens Street San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Data Storage/Exchange	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Data Storage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/10/2025	Payee name Ducks Unlimited	
Amount (\$) \$265.00	Payee address; City; State; Zip Code 1 Waterfowl Way Memphis, TN 38120	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation/Sponsorship
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: 5/12 Rpt: 23/31	2 FILER NAME Robinson, Jared S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00083435
4 Date 05/19/2025	5 Payee name Ducks Unlimited	
6 Amount (\$) \$104.00	7 Payee address; City; State; Zip Code 1 Waterfowl Way Memphis, TN 38120	
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 Donation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/22/2025	Candidate/Officeholder name Family Promise Of Galveston County	
Amount (\$) \$500.00	Office sought 14553 Highway 3 Webster, TX 77598	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation/Sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/02/2025	Candidate/Officeholder name Friends Of Friendswood Church	
Amount (\$) \$150.00	Office sought 502 S. Friendswood Dr Friendswood, TX 77546	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Room Rental
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: 6/12 Rpt: 24/31	2 FILER NAME Robinson, Jared S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00083435
4 Date 01/28/2025	5 Payee name Friendswood ISD Education Foundation	
6 Amount (\$) \$104.17	7 Payee address; City; State; Zip Code 302 Laurel Drive Friendswood, TX 77546	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ISD Gala
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/22/2025	Payee name Friendswood ISD Education Foundation	
Amount (\$) \$49.50	Payee address; City; State; Zip Code 302 Laurel Drive Friendswood, TX 77546	
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 Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/23/2025	Payee name Friendswood ISD Education Foundation	
Amount (\$) \$153.60	Payee address; City; State; Zip Code 302 Laurel Drive Friendswood, TX 77546	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/12 Rpt: 25/31	2 FILER NAME Robinson, Jared S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00083435
4 Date 04/18/2025	5 Payee name Friendswood Mustangs Booster Club	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 702 Greenbriar Dr Friendswood, TX 77546	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/27/2025	Payee name Friendswood Youth Baseball	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code Renwick Park 205 Stadium Drive Friendswood, TX 77546	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising/Sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/28/2025	Payee name Friendswood Youth Baseball	
Amount (\$) \$125.00	Payee address; City; State; Zip Code Renwick Park 205 Stadium Drive Friendswood, TX 77546	
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 Donation
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: 8/12 Rpt: 26/31	2 FILER NAME Robinson, Jared S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00083435
4 Date 01/03/2025	5 Payee name Gaido's Seafood Restaurant	
6 Amount (\$) \$242.43	7 Payee address; City; State; Zip Code 3828 Seawall Blvd Galveston, TX 77551	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Court Staff Holiday Lunch
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/21/2025	Payee name Galveston Republican Women	
Amount (\$) \$35.00	Payee address; City; State; Zip Code 101 14th St. Galveston, TX 77550	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 GRW Lunch
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/23/2025	Payee name Koop's BBQ Kitchen	
Amount (\$) \$101.97	Payee address; City; State; Zip Code 4501 Broadway Street Galveston, TX 77571	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lunch
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: 9/12 Rpt: 27/31	2 FILER NAME Robinson, Jared S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00083435
4 Date 03/24/2025	5 Payee name Kroger	
6 Amount (\$) \$172.39	7 Payee address; City; State; Zip Code 5730 Seawall Blvd Galveston, TX 77551	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Appreciation Gifts
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/27/2025	Payee name Marucci Sports LLC	
Amount (\$) \$584.54	Payee address; City; State; Zip Code 5818 McCann Dr Baton Rouge, LA 70809	
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 Donation - LSU
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/27/2025	Payee name Matt's El Rancho	
Amount (\$) \$183.18	Payee address; City; State; Zip Code 2613 S. Lamar Blvd Austin, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TADJ Dinner
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: 10/12 Rpt: 28/31	2 FILER NAME Robinson, Jared S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00083435
4 Date 02/14/2025	5 Payee name Midtown Tavern	
6 Amount (\$) \$59.81	7 Payee address; City; State; Zip Code 5806 Stewart Rd Galveston, TX 77551	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Clerk Retirement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/18/2025	Payee name NBCH	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 12955 Starkey Rd Suite 3900 Largo, FL 33773	
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 Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/03/2025	Payee name National Multiple Sclerosis Society	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 733 3rd Ave Floor 3 New York, NY 10017	
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 Donation
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: 11/12 Rpt: 29/31	2 FILER NAME Robinson, Jared S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00083435
4 Date 01/17/2025	5 Payee name Parabellum Media, LLC	
6 Amount (\$) \$3,000.00	7 Payee address; City; State; Zip Code 1005 Congress Ave Austin, TX 78701	
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 Campaign Consultant Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/02/2025	Payee name Parabellum Media, LLC	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 1005 Congress Ave Austin, TX 78701	
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 Campaign Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/27/2025	Payee name Saltgrass Steakhouse	
Amount (\$) \$142.67	Payee address; City; State; Zip Code 1502 Seawall Blvd Galveston, TX 77550	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lunch
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: 12/12 Rpt: 30/31	2 FILER NAME Robinson, Jared S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00083435
4 Date 03/14/2025	5 Payee name Texas Association of District Judges	
6 Amount (\$) \$2,572.50	7 Payee address; City; State; Zip Code PO Box 1748 Austin, TX 78767	
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 Association Donation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/13/2025	Payee name Tyra, Richard (Mr.)	
Amount (\$) \$140.00	Payee address; City; State; Zip Code 10230 FM 2004 Santa Fe, TX 77510	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/16/2025	Payee name USPS	
Amount (\$) \$188.00	Payee address; City; State; Zip Code 310 Morningside Dr Friendswood , TX 77546	
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 PO Box
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

OUTSTANDING LOANS

SCHEDULE **L**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule L:
Sch: 1/1 Rpt: 31/31

2 FILER NAME

Robinson, Jared S. (The Honorable)

3 Filer ID (Ethics Commission Filers)
00083435

LENDER
INFORMATION

4 Name of lender
Robinson, Jared

5 Lender address; City; State; Zip Code

Friendswood, TX 77546

GUARANTOR
INFORMATION

6 Name of guarantor

☒ not applicable

7 Guarantor address; City; State; Zip Code