

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00051797	2 Total pages filed: 44								
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width: 100%;"> <tr> <td style="width: 30%;">MS / MRS / MR The Honorable</td> <td style="width: 30%;">FIRST Ryan A.</td> <td style="width: 40%;">MI MI</td> </tr> </table>		MS / MRS / MR The Honorable	FIRST Ryan A.	MI MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/15/2025					
	MS / MRS / MR The Honorable	FIRST Ryan A.	MI MI								
<table style="width: 100%;"> <tr> <td style="width: 30%;">NICKNAME</td> <td style="width: 30%;">LAST Guillen</td> <td style="width: 40%;">SUFFIX</td> </tr> </table>		NICKNAME	LAST Guillen	SUFFIX							
NICKNAME	LAST Guillen	SUFFIX									
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE P.O. Box 1024 Austin, TX 78767		Date Hand-delivered or Date Postmarked <table style="width: 100%;"> <tr> <td style="width: 50%;">Receipt #</td> <td style="width: 50%;">Amount</td> </tr> </table> Date Processed Date Imaged	Receipt #	Amount						
	Receipt #	Amount									
5 CAMPAIGN TREASURER NAME	<table style="width: 100%;"> <tr> <td style="width: 30%;">MS / MRS / MR Ms.</td> <td style="width: 30%;">FIRST Dalinda L.</td> <td style="width: 40%;">MI MI</td> </tr> </table>			MS / MRS / MR Ms.	FIRST Dalinda L.	MI MI					
	MS / MRS / MR Ms.	FIRST Dalinda L.	MI MI								
<table style="width: 100%;"> <tr> <td style="width: 30%;">NICKNAME</td> <td style="width: 30%;">LAST Guillen</td> <td style="width: 40%;">SUFFIX</td> </tr> </table>			NICKNAME	LAST Guillen	SUFFIX						
NICKNAME	LAST Guillen	SUFFIX									
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2504 Sable Palm Dr Rio Grande City, TX 78582										
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (956) 437-4136										
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	<table style="width: 100%;"> <tr> <td style="width: 30%;">ELECTION DATE Month Day Year</td> <td style="width: 70%;">ELECTION TYPE</td> </tr> <tr> <td></td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special </td> </tr> </table>			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				
	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) State Representative District 31										
	12 OFFICE SOUGHT (if known) State Representative District 31										

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Guillen, Ryan A. (The Honorable)	14 Filer ID (Ethics Commission Filers) 00051797
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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 checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME TEXAS BANKERS ASSOCIATION - BANKPAC COMMITTEE ADDRESS 203 W. 10TH ST AUSTIN, TX 78701 COMMITTEE CAMPAIGN TREASURER NAME EMBERY, CELESTE COMMITTEE CAMPAIGN TREASURER ADDRESS 203 W. 10TH ST AUSTIN, TX 78701

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)	\$ 29,390.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 1,568.53
	4. TOTAL POLITICAL EXPENDITURES	\$ 48,201.84
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 966,254.02
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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.

The Honorable Ryan A. Guillen

 Signature of Candidate or Officeholder

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

Printed name of officer administering

Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Guillen, Ryan A. (The Honorable)		19 Filer ID 00051797	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	29,000.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	390.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	37,211.35
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	10,205.71
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	784.78
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 checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	334.42

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/5 Rpt: 4/44
2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 Date 06/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BORDAS, MARK (Mr.) <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78746	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) AEGIS ADVOCACY LLC
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAPITAL LEADERSHIP FUND <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEAT PAC <hr/> Contributor address; City; State; Zip Code ST AUSTIN, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURBOW, KELLY (Mr.) <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAIRBANKS, LAUREN (Mrs.) <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) FOUNDER		Employer (See Instructions) MOONTOWER PUBLIC AFFAIRS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/5 Rpt: 5/44
2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 Date 06/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLCO PAC <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAREDO FIRE PAC <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78041	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONGBOW CONSULTING PARTNERS LLC <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAURO, KYLE (Mr.) <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78747	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) HILLCO PARTNERS
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCADAMS, JAMES (Mr.) <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) PARTNER		Employer (See Instructions) TEXAS LOBBY STRATEGIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/5 Rpt: 6/44
2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 Date 06/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOAK CASEY PAC <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLITICAL ACTION COMMITTEE OF THE INDEPENDENT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78768	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, RENE (Mr.) <hr/> Contributor address; City; State; Zip Code EDINBURG, TX 78539	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) PATHFINDER
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIVERO, HECTOR (Mr.) <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) TEXAS CHEMISTRY COUNCIL
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALDANA, AMANDA (Mrs.) <hr/> Contributor address; City; State; Zip Code PHARR, TX 78577	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) PATHFINDER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/5 Rpt: 7/44
2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 Date 06/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEIDLITS, CURTIS (Mr.) <hr/> 6 Contributor address; City; State; Zip Code HORSESHOE BAY, TX 78657	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) FOCUSED ADVOCACY
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXANS FOR LAWSUIT REFORM PAC <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXAS BEVERAGE ALLIANCE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXAS CHEMISTRY COUNCIL/ TEXAS CHEMICAL ALLIANCE FREE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXAS LOBBY STRATEGIES <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/5 Rpt: 8/44
2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 Date 06/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXAS MANUFACTURED HOUSING ASSOC., INC. <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78759	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXAS MEDICAL ASSOCIATION PAC <hr/> Contributor address; City; State; Zip Code STREET AUSTIN, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDEZ, JERRY (Mr.) <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78711	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEEKLEY, RICHARD (Mr.) <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) WEEKLEY HOMES
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHOLESALE BEER DISTRIBUTORS OF TEXAS BW-PAC <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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: 9/44	
2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 06/30/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERRA, MARIO (Mr.) 7 Contributor address; City; State; Zip Code MISSION, TX 78573	8 Amount of contribution (\$) \$140.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	9 In-kind contribution description
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) STARR HOME HEALTH		11 Employer (FOR NON-JUDICIAL) (See instructions) ADMINISTRATOR	
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)			
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXAS BANKERS ASSOCIATION BANKPAC Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of contribution (\$) \$250.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description FUNDRAISING RECEPTION EXPENSE FOR CAMPAIGN/OFFICEHOL
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
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: 1/9 Rpt: 10/44	2 FILER NAME Guillen, Ryan A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00051797
4 Date 01/17/2025	5 Payee name BERGER, BECKY (Mrs.)	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 349 PRIVATE ROAD 2006 SCHULENBERG, TX 78956	
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 COMMUNITY ORGANIZATION DONATION EXPENSE FOR CAMPAIGN/OFFICEHOLDER
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/01/2025	Payee name CHASE CARDMEMBER SERVICES	
Amount (\$) \$1,566.82	Payee address; City; State; Zip Code PO BOX 94014 PALATINE, TX 60094	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD PAYMENT EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/01/2025	Payee name CHASE CARDMEMBER SERVICES	
Amount (\$) \$2,427.66	Payee address; City; State; Zip Code PO BOX 94014 PALATINE, TX 60094	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD PAYMENT EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/9 Rpt: 11/44	2 FILER NAME Guillen, Ryan A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00051797
4 Date 06/01/2025	5 Payee name CHASE CARDMEMBER SERVICES	
6 Amount (\$) \$2,671.05	7 Payee address; City; State; Zip Code PO BOX 94014 PALATINE, TX 60094	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD PAYMENT EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/02/2025	Payee name CHASE CARDMEMBER SERVICES	
Amount (\$) \$567.01	Payee address; City; State; Zip Code PO BOX 94014 PALATINE, TX 60094	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD PAYMENT EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/02/2025	Payee name CHASE CARDMEMBER SERVICES	
Amount (\$) \$1,458.10	Payee address; City; State; Zip Code PO BOX 94014 PALATINE, TX 60094	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD PAYMENT EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
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: 3/9 Rpt: 12/44	2 FILER NAME Guillen, Ryan A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00051797
4 Date 06/30/2025	5 Payee name CHASE CARDMEMBER SERVICES	
6 Amount (\$) \$1,062.65	7 Payee address; City; State; Zip Code PO BOX 94014 PALATINE, TX 60094	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD PAYMENT EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2025	Payee name GUILLEN, RYAN (The Honorable)	
Amount (\$) \$5,153.12	Payee address; City; State; Zip Code 2504 SABLE PALM DR RIO GRANDE CITY, TX 78582	
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 MILEAGE REIMBURSEMENT EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES (24757
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2025	Payee name GUILLEN, RYAN (The Honorable)	
Amount (\$) \$784.78	Payee address; City; State; Zip Code 2504 SABLE PALM DR RIO GRANDE CITY, TX 78582	
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 TELECOMMUNICATION SERVICE REIMBURSEMENT EXPENSE FOR
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: 4/9 Rpt: 13/44	2 FILER NAME Guillen, Ryan A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00051797
4 Date 01/01/2025	5 Payee name MEXICAN-AMERICAN LEGISLATIVE CAUCUS	
6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 1122 COLORADO ST #107 AUSTIN, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAUCUS DUES EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/16/2025	Payee name MEXICAN-AMERICAN LEGISLATIVE CAUCUS	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 1122 COLORADO ST #107 AUSTIN, TX 78701	
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 CAUCUS DUES EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/04/2025	Payee name PELICAN CAMPAIGN CONSULTING	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code PO BOX 26326 AUSTIN, TX 78755	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CONSULTING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
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: 5/9 Rpt: 14/44	2 FILER NAME Guillen, Ryan A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00051797
4 Date 02/15/2025	5 Payee name PELICAN CAMPAIGN CONSULTING	
6 Amount (\$) \$3,500.00	7 Payee address; City; State; Zip Code PO BOX 26326 AUSTIN, TX 78755	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CONSULTING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/15/2025	Payee name PELICAN CAMPAIGN CONSULTING	
Amount (\$) \$3,500.00	Payee address; City; State; Zip Code PO BOX 26326 AUSTIN, TX 78755	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CONSULTING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/15/2025	Payee name PELICAN CAMPAIGN CONSULTING	
Amount (\$) \$3,500.00	Payee address; City; State; Zip Code PO BOX 26326 AUSTIN, TX 78755	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CONSULTING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
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: 6/9 Rpt: 15/44	2 FILER NAME Guillen, Ryan A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00051797
4 Date 03/15/2025	5 Payee name PELICAN CAMPAIGN CONSULTING	
6 Amount (\$) \$3,500.00	7 Payee address; City; State; Zip Code PO BOX 26326 AUSTIN, TX 78755	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CONSULTING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/31/2025	Payee name ROMO-ARRIAGA, VERONICA (Mrs.)	
Amount (\$) \$125.00	Payee address; City; State; Zip Code 1984 US HIGHWAY 181 N FLORESVILLE, TX 78114	
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 COMMUNITY ORGANIZATION DONATION EXPENSE FOR CAMPAIGN/OFFICEHOLDER
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/29/2025	Payee name SIGNWORKS	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 308 W MAIN ST RIO GRANDE CITY, TX 78582	
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 PRINTING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
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: 7/9 Rpt: 16/44	2 FILER NAME Guillen, Ryan A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00051797
4 Date 03/27/2025	5 Payee name TEXAS CORRECTIONAL INDUSTRIES	
6 Amount (\$) \$441.66	7 Payee address; City; State; Zip Code 8801 S 1ST ST AUSTIN, TX 78748	
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 COMMUNITY ORGANIZATION DONATION EXPENSE FOR CAMPAIGN/OFFICEHOLDER
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/15/2025	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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAUCUS DUES EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/01/2025	Payee name USPS	
Amount (\$) \$170.00	Payee address; City; State; Zip Code 823 CONGRESS AVE. STE 150 AUSTIN, TX 78701	
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 PERMIT FEE EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
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: 8/9 Rpt: 17/44	2 FILER NAME Guillen, Ryan A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00051797
4 Date 03/27/2025	5 Payee name WILSON COUNTY REPUBLICAN PARTY	
6 Amount (\$) \$335.00	7 Payee address; City; State; Zip Code 1427 3RD ST. FLORESVILLE, TX 78114	
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 COMMUNITY ORGANIZATION DONATION EXPENSE FOR CAMPAIGN/OFFICEHOLDER
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/26/2025	Payee name WINRED	
Amount (\$) \$19.70	Payee address; City; State; Zip Code PO BOX 9891 ARLINGTON, VA 22219	
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 ONLINE CAMPAIGN FUNDRAISING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/26/2025	Payee name WINRED	
Amount (\$) \$19.70	Payee address; City; State; Zip Code PO BOX 9891 ARLINGTON, VA 22219	
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 ONLINE CAMPAIGN FUNDRAISING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
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: 9/9 Rpt: 18/44	2 FILER NAME Guillen, Ryan A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00051797
4 Date 05/26/2025	5 Payee name WINRED	
6 Amount (\$) \$19.70	7 Payee address; City; State; Zip Code PO BOX 9891 ARLINGTON, VA 22219	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ONLINE CAMPAIGN FUNDRAISING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/26/2025	Payee name WINRED	
Amount (\$) \$39.40	Payee address; City; State; Zip Code PO BOX 9891 ARLINGTON, VA 22219	
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 ONLINE CAMPAIGN FUNDRAISING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/23 Rpt: 19/44	2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 CREDIT CARD ISSUER	Name of financial institution Chase Bank		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53
6 PAYMENT	(a) Amount Charged \$15.00	(b) Date of Charge 03/19/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name ACCESS VALET PARKING		(b) Payee address; City, State, Zip Code 117 W 4TH ST AUSTIN, TX 78701
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description PARKING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$51.00	(b) Date of Charge 02/24/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name ANGIE`S MEXICAN		(b) Payee address; City, State, Zip Code 1307 E7TH STREET AUSTIN, TX 78702
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$150.41	(b) Date of Charge 05/05/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name BEN WHITE FLORIST		(b) Payee address; City, State, Zip Code 3200 S CONGRESS AVE AUSTIN, TX 78704
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description MEMORIAL EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 2/23 Rpt: 20/44	2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53
6 PAYMENT	(a) Amount Charged \$4.76	(b) Date of Charge 02/23/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name BILL MILLER BAR-B-Q		(b) Payee address; City, State, Zip Code 301 SOUTH MAIN STREET PLEASANTON, TX 78064
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$16.24	(b) Date of Charge 01/10/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name CAPITOL GIFTSHOP		(b) Payee address; City, State, Zip Code 1100 N CONGRESS AVE AUSTIN, TX 78701
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description SUPPLIES EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$97.00	(b) Date of Charge 05/11/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name CHUY'S		(b) Payee address; City, State, Zip Code 1728 BARTON SPRINGS RD AUSTIN, TX 78704
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description STAFF MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 3/23 Rpt: 21/44	2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53
6 PAYMENT	(a) Amount Charged \$48.73	(b) Date of Charge 04/05/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name CISCO'S RESTAURANT		(b) Payee address; City, State, Zip Code 1511 E 6TH ST AUSTIN, TX 78702
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$65.78	(b) Date of Charge 04/17/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name CRACKER BARREL		(b) Payee address; City, State, Zip Code 550 CO RD 117 BUDA, TX 78610
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description STAFF MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$49.13	(b) Date of Charge 01/23/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name CRACKER BARREL		(b) Payee address; City, State, Zip Code 550 CO RD 117 BUDA, TX 78610
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description STAFF MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 4/23 Rpt: 22/44	2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53
6 PAYMENT	(a) Amount Charged \$33.28	(b) Date of Charge 04/20/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name DAIRY QUEEN		(b) Payee address; City, State, Zip Code 5344 TX-44 FREER, TX 78357
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$173.93	(b) Date of Charge 05/28/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name EVENTSURED		(b) Payee address; City, State, Zip Code 3553 WEST CHESTER PIKE #418 NEWTOWN SQUARE, PA 19073
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description EVENT EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$414.24	(b) Date of Charge 05/23/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name GINA'S ON CONGRESS		(b) Payee address; City, State, Zip Code 314 CONGRESS AVE. AUSTIN, TX 78701
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 5/23 Rpt: 23/44		2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53	
6 PAYMENT		(a) Amount Charged \$268.18	(b) Date of Charge 06/09/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name GRAND HYATT SAN ANTONIO		(b) Payee address; City, State, Zip Code 600 E MARKET ST SAN ANTONIO, TX 78205	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description LODGING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$63.87	(b) Date of Charge 06/09/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name GRAND HYATT SAN ANTONIO		(b) Payee address; City, State, Zip Code 600 E MARKET ST SAN ANTONIO, TX 78205	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description LODGING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$44.10	(b) Date of Charge 04/18/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name H-E-B GAS		(b) Payee address; City, State, Zip Code 4031 EAST HWY 83 RIO GRANDE CITY, TX 78582	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description STAFF FUEL EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 6/23 Rpt: 24/44	2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53
6 PAYMENT	(a) Amount Charged \$113.89	(b) Date of Charge 01/10/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name HAMPTON INN AUSTIN		(b) Payee address; City, State, Zip Code 200 SAN JACINTO BLVD AUSTIN, TX 78701
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description STAFF LODGING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$196.54	(b) Date of Charge 04/26/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name HILTON HOTELS		(b) Payee address; City, State, Zip Code 200 S ALAMO ST SAN ANTONIO, TX 78205
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description LODGING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$64.95	(b) Date of Charge 01/13/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name HOBBY-LOBBY		(b) Payee address; City, State, Zip Code 1501 E. WHITESTONE BLDG D CEDAR PARK, TX 78613
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description WALL DISPLAY EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 7/23 Rpt: 25/44	2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53
6 PAYMENT	(a) Amount Charged \$5.93	(b) Date of Charge 01/13/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name HOBBY-LOBBY		(b) Payee address; City, State, Zip Code 10900 RESEARCH BLVD SVRD SB UNIT D AUSTIN, TX 78759
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description WALL DISPLAY EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$27.95	(b) Date of Charge 05/28/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name HOBBY-LOBBY		(b) Payee address; City, State, Zip Code 10900 RESEARCH BLVD SVRD SB UNIT D AUSTIN, TX 78759
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description WALL DISPLAY EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$112.84	(b) Date of Charge 06/22/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name HOUSTON MARRIOTT HOBBY		(b) Payee address; City, State, Zip Code 9100 GULF FWY HOUSTON, TX 77017
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description LODGING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 8/23 Rpt: 26/44	2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53
6 PAYMENT	(a) Amount Charged \$588.75	(b) Date of Charge 04/13/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name III FORKS		(b) Payee address; City, State, Zip Code 111 LAVACA ST AUSTIN, TX 78701
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$166.00	(b) Date of Charge 04/27/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name KOME SUSHI KITCHEN		(b) Payee address; City, State, Zip Code 5301 AIRPORT BLVD #100 AUSTIN, TX 78751
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$12.48	(b) Date of Charge 02/14/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name LA REYNERA BAKERY		(b) Payee address; City, State, Zip Code 4762 E US HWY 83 SUITE 1 RIO GRANDE CITY, TX 78582
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 9/23 Rpt: 27/44	2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53
6 PAYMENT	(a) Amount Charged \$37.63	(b) Date of Charge 01/27/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name LAS LOMITAS CAFE		(b) Payee address; City, State, Zip Code 401 S SMITH ST HEBBRONVILLE, TX 78361
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$27.06	(b) Date of Charge 06/26/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name LAZ PARKING		(b) Payee address; City, State, Zip Code 15 LEWIS STREET HARTFORD, CT 06103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description PARKING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$27.06	(b) Date of Charge 02/27/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name LAZ PARKING		(b) Payee address; City, State, Zip Code 15 LEWIS STREET HARTFORD, CT 06103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description PARKING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 10/23 Rpt: 28/44	2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53
6 PAYMENT	(a) Amount Charged \$118.00	(b) Date of Charge 06/30/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name LIAM'S STEAK HOUSE		(b) Payee address; City, State, Zip Code 4495 FRONTAGE RD 77/83 BROWNSVILLE, TX 78597
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$19.40	(b) Date of Charge 02/02/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name LIBERTY CAFE		(b) Payee address; City, State, Zip Code 420 CAROLYN ST FREER, TX 78357
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$39.60	(b) Date of Charge 05/04/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name LIBERTY CAFE		(b) Payee address; City, State, Zip Code 420 CAROLYN ST FREER, TX 78357
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 11/23 Rpt: 29/44	2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53
6 PAYMENT	(a) Amount Charged \$44.87	(b) Date of Charge 03/30/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name LIBERTY CAFE		(b) Payee address; City, State, Zip Code 420 CAROLYN ST FREER, TX 78357
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$134.20	(b) Date of Charge 04/26/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name LINE HOTEL - AUSTIN FOOD		(b) Payee address; City, State, Zip Code 111 E CESAR CHAVEZ ST AUSITN, TX 78701
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$55.00	(b) Date of Charge 03/01/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name LIVE OAK RESTAURANT		(b) Payee address; City, State, Zip Code 305 S HARBORTH AVE THREE RIVERS, TX 78071
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 12/23 Rpt: 30/44		2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53	
6 PAYMENT		(a) Amount Charged \$55.17	(b) Date of Charge 05/03/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name LIVE OAK RESTAURANT		(b) Payee address; City, State, Zip Code 305 S HARBORTH AVE THREE RIVERS, TX 78071	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$50.97	(b) Date of Charge 03/04/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name LIVE OAK RESTAURANT		(b) Payee address; City, State, Zip Code 305 S HARBORTH AVE THREE RIVERS, TX 78071	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$48.00	(b) Date of Charge 02/18/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name LIVE OAK RESTAURANT		(b) Payee address; City, State, Zip Code 305 S HARBORTH AVE THREE RIVERS, TX 78071	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 13/23 Rpt: 31/44		2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53	
6 PAYMENT		(a) Amount Charged \$23.78	(b) Date of Charge 03/01/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name MCCOYS		(b) Payee address; City, State, Zip Code 4759 E US HWY 83 RIO GRANDE CITY, TX 78582	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description OFFICE REPAIR SUPPLY EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$1,084.26	(b) Date of Charge 05/23/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name NYFIFTH		(b) Payee address; City, State, Zip Code 39737 PASEO PADRE PKWY SUITE C1 FREMONT, CA 94538	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description END OF SESSION GIFTS EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$75.00	(b) Date of Charge 06/04/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name SPRINGHILL RESTAURANT		(b) Payee address; City, State, Zip Code 2505 W PECAN ST PFLUGERVILLE, TX 78660	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 14/23 Rpt: 32/44	2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53
6 PAYMENT	(a) Amount Charged \$26.00	(b) Date of Charge 03/22/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name SPRINGHILL RESTAURANT		(b) Payee address; City, State, Zip Code 2505 W PECAN ST PFLUGERVILLE, TX 78660
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$16.78	(b) Date of Charge 02/05/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name THE CAPITOL GRILL		(b) Payee address; City, State, Zip Code 1100 N CONGRESS AVE AUSTIN, TX 78701
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$10.82	(b) Date of Charge 04/10/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name THE CAPITOL GRILL		(b) Payee address; City, State, Zip Code 1100 N CONGRESS AVE AUSTIN, TX 78701
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 15/23 Rpt: 33/44	2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53
6 PAYMENT	(a) Amount Charged \$10.82	(b) Date of Charge 04/15/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name THE CAPITOL GRILL		(b) Payee address; City, State, Zip Code 1100 N CONGRESS AVE AUSTIN, TX 78701
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$10.28	(b) Date of Charge 01/30/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name THE CAPITOL GRILL		(b) Payee address; City, State, Zip Code 1100 N CONGRESS AVE AUSTIN, TX 78701
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$35.00	(b) Date of Charge 01/10/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name THE WALLER		(b) Payee address; City, State, Zip Code 1104 SABINE ST AUSTIN, TX 78701
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description APPLICATION FEE EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 16/23 Rpt: 34/44	2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53
6 PAYMENT	(a) Amount Charged \$175.00	(b) Date of Charge 01/13/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name THE WALLER		(b) Payee address; City, State, Zip Code 1104 SABINE ST AUSTIN, TX 78701
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description APPLICATION FEE EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$47.80	(b) Date of Charge 06/10/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name TWISTED SISTAS CO		(b) Payee address; City, State, Zip Code 216 FM 3167 RIO GRANDE CITY, TX 78582
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$10.08	(b) Date of Charge 06/10/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name TWISTED SISTAS CO		(b) Payee address; City, State, Zip Code 216 FM 3167 RIO GRANDE CITY, TX 78582
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 17/23 Rpt: 35/44	2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53
6 PAYMENT	(a) Amount Charged \$200.00	(b) Date of Charge 02/07/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name TEXAS ENERGY & CLIMATE		(b) Payee address; City, State, Zip Code P.O. BOX 301074 AUSTIN, TX 78703
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description CAUCUS DUES EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$202.50	(b) Date of Charge 06/01/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name US STORAGE-FLORESVILLE		(b) Payee address; City, State, Zip Code 512 10TH STREET FLORESVILLE, TX 78114
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description STORAGE FEE EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$202.50	(b) Date of Charge 05/01/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name US STORAGE-FLORESVILLE		(b) Payee address; City, State, Zip Code 512 10TH STREET FLORESVILLE, TX 78114
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description STORAGE FEE EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 18/23 Rpt: 36/44		2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53	
6 PAYMENT		(a) Amount Charged \$202.50	(b) Date of Charge 04/01/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name US STORAGE-FLORESVILLE		(b) Payee address; City, State, Zip Code 512 10TH STREET FLORESVILLE, TX 78114	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description STORAGE FEE EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$202.50	(b) Date of Charge 03/01/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name US STORAGE-FLORESVILLE		(b) Payee address; City, State, Zip Code 512 10TH STREET FLORESVILLE, TX 78114	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description STORAGE FEE EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$202.50	(b) Date of Charge 02/01/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name US STORAGE-FLORESVILLE		(b) Payee address; City, State, Zip Code 512 10TH STREET FLORESVILLE, TX 78114	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description STORAGE FEE EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 19/23 Rpt: 37/44	2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53
6 PAYMENT	(a) Amount Charged \$181.50	(b) Date of Charge 01/02/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name US STORAGE-FLORESVILLE		(b) Payee address; City, State, Zip Code 512 10TH STREET FLORESVILLE, TX 78114
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description STORAGE FEE EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$138.52	(b) Date of Charge 05/04/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name VERACRUZ ALL NATURAL		(b) Payee address; City, State, Zip Code 1700 GUADALUPE ST AUSTIN, TX 78701
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$733.94	(b) Date of Charge 04/12/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name WAL-MART		(b) Payee address; City, State, Zip Code 11923 US-290 MANOR, TX 78653
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description SUPPLIES EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 20/23 Rpt: 38/44	2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53
6 PAYMENT	(a) Amount Charged \$58.30	(b) Date of Charge 01/29/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name WALGREENS		(b) Payee address; City, State, Zip Code 1144 AIRPORT BLVD AUSTIN, TX 78702
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description PHOTO PRINTING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$100.37	(b) Date of Charge 01/13/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name WALGREENS		(b) Payee address; City, State, Zip Code 2501 S LAMAR BLVD AUSTIN, TX 78704
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description PHOTO PRINTING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$7.34	(b) Date of Charge 01/11/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name WHATABURGER		(b) Payee address; City, State, Zip Code 101 BYPASS 281 FALFURRIAS, TX 78355
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description STAFF MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 21/23 Rpt: 39/44		2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53	
6 PAYMENT		(a) Amount Charged \$28.79	(b) Date of Charge 03/28/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name WHATABURGER		(b) Payee address; City, State, Zip Code 101 BYPASS 281 FALFURRIAS, TX 78355	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description STAFF MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$441.66	(b) Date of Charge 03/11/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name WIX.COM		(b) Payee address; City, State, Zip Code 501 TERY A FRANCOIS BLVD FL 6 SAN FRANCISCO, CA 94158	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description WEBSITE DEVELOPMENT EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$233.82	(b) Date of Charge 03/20/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name WIX.COM		(b) Payee address; City, State, Zip Code 501 TERY A FRANCOIS BLVD FL 6 SAN FRANCISCO, CA 94158	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description WEBSITE DEVELOPMENT EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 22/23 Rpt: 40/44		2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53	
6 PAYMENT		(a) Amount Charged \$58.98	(b) Date of Charge 02/23/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name WIX.COM		(b) Payee address; City, State, Zip Code 501 TERY A FRANCOIS BLVD FL 6 SAN FRANCISCO, CA 94158	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description WEBSITE DEVELOPMENT EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$118.92	(b) Date of Charge 05/10/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name WU CHOW		(b) Payee address; City, State, Zip Code 500 W 5TH ST #168 AUSTIN, TX 78701	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description MEETING EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$16.23	(b) Date of Charge 06/01/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name AT HOME STORES ONLINE		(b) Payee address; City, State, Zip Code 9000 CYPRESS WATERS BLVD COPPELL, TX 75019	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description WALL DISPLAY EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 23/23 Rpt: 41/44	2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,568.53
6 PAYMENT	(a) Amount Charged \$338.75	(b) Date of Charge 01/09/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name AMAZON		(b) Payee address; City, State, Zip Code 410 TERRY AVENUE NORTH SEATTLE, WA 98109
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description WALL DISPLAY EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 G: Sch: 1/2 Rpt: 42/44		2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797	
4 Date 01/18/2025		5 Payee name AT&T MOBILITY			
6 Amount (\$) \$128.22 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code PO BOX 5015 CAROL STREAM, IL 60198			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TELECOMMUNICATION SERVICE EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/18/2025		Payee name AT&T MOBILITY			
Amount (\$) \$128.27 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code PO BOX 5015 CAROL STREAM, IL 60198			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TELECOMMUNICATION SERVICE EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/18/2025		Payee name AT&T MOBILITY			
Amount (\$) \$128.27 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code PO BOX 5015 CAROL STREAM, IL 60198			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TELECOMMUNICATION SERVICE EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 G: Sch: 2/2 Rpt: 43/44		2 FILER NAME Guillen, Ryan A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00051797	
4 Date 04/18/2025		5 Payee name AT&T MOBILITY			
6 Amount (\$) \$133.34 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code PO BOX 5015 CAROL STREAM, IL 60198			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TELECOMMUNICATION SERVICE EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held
Date 05/18/2025		Payee name AT&T MOBILITY			
Amount (\$) \$133.34 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code PO BOX 5015 CAROL STREAM, IL 60198			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TELECOMMUNICATION SERVICE EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held
Date 06/18/2025		Payee name AT&T MOBILITY			
Amount (\$) \$133.34 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code PO BOX 5015 CAROL STREAM, IL 60198			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TELECOMMUNICATION SERVICE EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held

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

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
Sch: 1/1 Rpt: 44/44

2 FILER NAME

Guillen, Ryan A. (The Honorable)

3 Filer ID (Ethics Commission Filers)
00051797

4 Date

02/23/2025

5 Name of person from whom amount is received

AMAZON

8 Amount (\$)

\$334.42

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

SEATTLE, WA 98109

7 Purpose for which amount is received

☐ Check if political contribution returned to filer

REIMBURSEMENT FOR WALL DISPLAY EXPENSE FOR CAMPAIGN/OFFICEHOLDER PURPOSES