

**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) 00042143	2 Total pages filed: 195		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST The Honorable .....	MI	OFFICE USE ONLY		
	NICKNAME	LAST Miller	SUFFIX	Date Received ELECTRONICALLY FILED 01/15/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 6407 S. US Hwy. 377 Stephenville, TX 76401			Date Hand-delivered or Date Postmarked		
				Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Mr.	MI			
	NICKNAME	LAST Ted ..... Nugent	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 7216 Fish Pond Rd. Waco, TX 76710		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION (254) 968-3535					
8 REPORT TYPE	<input checked="" 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 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 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
10 ELECTION	ELECTION DATE Month 03/03/2026		<input checked="" 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) Agriculture Commissioner			12 OFFICE SOUGHT (if known) Agriculture Commissioner		

**GO TO PAGE 2**

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM C/OH  
COVER SHEET PG 2**

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13 C / OH NAME	Miller, Sid (The Honorable)		14 Filer ID (Ethics Commission Filers) 00042143
15 NOTICE FROM POLITICAL COMMITTEE(S)	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.		
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 290,677.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>		\$ 405,197.81
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 102,525.01
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 45,050.00

**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 Sid Miller

\_\_\_\_\_  
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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<b>18</b> FILER NAME Miller, Sid (The Honorable)	<b>19</b> Filer ID (Ethics Commission Filers) 00042143
<b>20</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	
3. <input checked="" 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	
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	
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/43 Rpt: 4/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 12/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APRSA LLC	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77057-7381	
<b>8</b> Principal occupation / Job title (See Instructions) Self employed		<b>9</b> Employer (See Instructions) Self Employed
<b>Date</b> 12/07/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Abisalloum, George	<b>Amount of Contribution (\$)</b> \$2,000.00
	<b>Contributor address; City; State; Zip Code</b>  Cypress, TX 77429	
<b>Principal occupation / Job title (See Instructions)</b> Self employed		<b>Employer (See Instructions)</b> Self Employed
<b>Date</b> 10/30/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams , Dan	<b>Amount of Contribution (\$)</b> \$1,500.00
	<b>Contributor address; City; State; Zip Code</b>  Greenville, SC 29615	
<b>Principal occupation / Job title (See Instructions)</b> Self employed		<b>Employer (See Instructions)</b> Self Employed
<b>Date</b> 12/20/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Allwin Insurance Agency	<b>Amount of Contribution (\$)</b> \$500.00
	<b>Contributor address; City; State; Zip Code</b>  Houston, TX 77036-3467	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 08/19/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Baise, Gary	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Falls Church, VA 22043	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/43 Rpt: 5/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 10/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Bryan	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>6</b> Contributor address; City; State; Zip Code  Sudan, TX 79371	
<b>8</b> Principal occupation / Job title (See Instructions) Self		<b>9</b> Employer (See Instructions) Farmer
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barr, Larry	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Stephenville, TX 76401	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barr, Larry	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Stephenville, TX 76401	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barr, Larry	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Stephenville, TX 76401	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barr, Larry	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Stephenville, TX 76401	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/43 Rpt: 6/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 11/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barr, Larry	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Stephenville, TX 76401	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barr, Larry	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Stephenville, TX 76401	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Brian	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  Weimar, TX 78962	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bassetti III, James	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Edinburg, TX 78541-1987	
Principal occupation / Job title (See Instructions) Farmer		Employer (See Instructions) Little Bear Produce
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beauchamp, James	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Midland, TX 79707	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) MOTRAN Alliance

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/43 Rpt: 7/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 08/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Demetra	<b>7</b> Amount of Contribution (\$) \$1,000.00
	<b>6</b> Contributor address; City; State; Zip Code  Big Sandy, TX 75755	
<b>8</b> Principal occupation / Job title (See Instructions) Self employed		<b>9</b> Employer (See Instructions) Self Employed
<b>Date</b> 11/27/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Benavides, Lewis	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Crossroads, TX 76227	
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b> retired
<b>Date</b> 12/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Jake	<b>Amount of Contribution (\$)</b> \$1,000.00
	<b>Contributor address; City; State; Zip Code</b>  Canyon, TX 79015	
<b>Principal occupation / Job title (See Instructions)</b> Dairy farmer		<b>Employer (See Instructions)</b> Self Employed
<b>Date</b> 12/30/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergsma, Michael	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Corpus Christi, TX 78413	
<b>Principal occupation / Job title (See Instructions)</b> Geophysicist		<b>Employer (See Instructions)</b> M Squared Exploration
<b>Date</b> 09/24/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Bhuta, Tirth	<b>Amount of Contribution (\$)</b> \$250.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75023	
<b>Principal occupation / Job title (See Instructions)</b> Self employed		<b>Employer (See Instructions)</b> Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/43 Rpt: 8/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 10/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billot, Loyd ..... <b>6</b> Contributor address; City; State; Zip Code  Sour Lake, TX 77659	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>8</b> Principal occupation / Job title (See Instructions) retired	<b>9</b> Employer (See Instructions) retired
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billot, Loyd ..... Contributor address; City; State; Zip Code  Sour Lake, TX 77659	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billot, Loyd ..... Contributor address; City; State; Zip Code  Sour Lake, TX 77659	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billot, Loyd ..... Contributor address; City; State; Zip Code  Sour Lake, TX 77659	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boulos, Nicolas ..... Contributor address; City; State; Zip Code  Baytown, TX 77523-8886	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions) Self employed	Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/43 Rpt: 9/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 12/22/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouma, Brad & Barbara .....  <b>6</b> Contributor address; City; State; Zip Code  Plainview, TX 79073	<b>7</b> Amount of Contribution (\$) \$2,200.00
<b>8</b> Principal occupation / Job title (See Instructions) Dairyman		<b>9</b> Employer (See Instructions) Self Employed
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandon, Morales (CEO) .....  Contributor address; City; State; Zip Code  Garand, TX 75040	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Harvest Solar Inc
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, John .....  Contributor address; City; State; Zip Code  New Braunfels, TX 78132	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briggs, Lori .....  Contributor address; City; State; Zip Code  Big Sandy, TX 75755	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briggs, Lori .....  Contributor address; City; State; Zip Code  Big Sandy, TX 75755	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/43 Rpt: 10/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 09/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jason	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75215	
<b>8</b> Principal occupation / Job title (See Instructions) Self employed		<b>9</b> Employer (See Instructions) Self Employed
<b>Date</b> 09/10/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Buie, Herbert	<b>Amount of Contribution (\$)</b> \$500.00
	<b>Contributor address; City; State; Zip Code</b>  Tyler, TX 75701	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 07/21/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Byrd, Susan	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Marlin, TX 76661	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 09/15/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Calhoun Jr, James	<b>Amount of Contribution (\$)</b> \$500.00
	<b>Contributor address; City; State; Zip Code</b>  Weatherford, TX 76086	
<b>Principal occupation / Job title (See Instructions)</b> Rancher		<b>Employer (See Instructions)</b> Self Employed
<b>Date</b> 09/19/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavender, Joe	<b>Amount of Contribution (\$)</b> \$5,000.00
	<b>Contributor address; City; State; Zip Code</b>  Tyler, TX 75703	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Cavender Boots

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/43 Rpt: 11/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 12/07/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chammas, Michel	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77077	
<b>8</b> Principal occupation / Job title (See Instructions) President		<b>9</b> Employer (See Instructions) Chammas Cutters
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, Wen	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Austin, TX 78748	
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self Employed
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, Xia	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Katy, TX 77450	
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions) W Realty & Investment Group
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chilton Harper, Diane	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Pilot Point, TX 76258	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conover, Ted	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Tyler, TX 75703	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/43 Rpt: 12/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 07/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crooks, Betty	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  Kerrville , TX 78028	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
<b>Date</b> 11/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Crooks, Betty	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  Kerrville , TX 78028	
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b> retired
<b>Date</b> 09/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) DN CRE & Success Academy	<b>Amount of Contribution (\$)</b> \$250.00
	<b>Contributor address; City; State; Zip Code</b>  Sugarland, TX 77479	
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b> retired
<b>Date</b> 12/23/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) De Jong, D.A.	<b>Amount of Contribution (\$)</b> \$10,000.00
	<b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75220	
<b>Principal occupation / Job title (See Instructions)</b> Self employed		<b>Employer (See Instructions)</b> Self Employed
<b>Date</b> 11/21/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) DeJong, David	<b>Amount of Contribution (\$)</b> \$1,000.00
	<b>Contributor address; City; State; Zip Code</b>  Hico, TX 76457	
<b>Principal occupation / Job title (See Instructions)</b> Dairyman		<b>Employer (See Instructions)</b> Horizon Dairy

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/43 Rpt: 13/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 12/27/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeJong, David	<b>7</b> Amount of Contribution (\$) \$2,500.00
	<b>6</b> Contributor address; City; State; Zip Code  Hico, TX 76457	
<b>8</b> Principal occupation / Job title (See Instructions) Dairyman		<b>9</b> Employer (See Instructions) Horizon Dairy
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickens, Mona	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  San Antonio, TX 78217	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickens, Mona	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  San Antonio, TX 78217	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ding, Francis	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77024	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Domloj, Hugo	Amount of Contribution (\$) \$3,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77057	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) CIVE, Inc

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1: Sch: 11/43 Rpt: 14/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)			<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 11/22/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duda, Robert	<b>7</b> Amount of Contribution (\$) \$100.00	
	<b>6</b> Contributor address; City; State; Zip Code  Kyle, TX 78640		
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired	
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dukes-Strey, Jackie	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code  Morgan, TX 76671		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easley, Harold	Amount of Contribution (\$) \$25.00	
	Contributor address; City; State; Zip Code  Comanche, TX 76442		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easycom	Amount of Contribution (\$) \$500.00	
	Contributor address; City; State; Zip Code  Houston, TX 77056		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edge, Patrick	Amount of Contribution (\$) \$20.00	
	Contributor address; City; State; Zip Code  Houston, TX 77027		
Principal occupation / Job title (See Instructions) Candidate		Employer (See Instructions) Edge for Texas campaign	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/43 Rpt: 15/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 09/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edge, Patrick	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77027	
<b>8</b> Principal occupation / Job title (See Instructions) Candidate		<b>9</b> Employer (See Instructions) Edge for texas campain
<b>Date</b> 09/24/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Enright, John David	<b>Amount of Contribution (\$)</b> \$1,000.00
	<b>Contributor address; City; State; Zip Code</b>  Frisco, TX 75033	
<b>Principal occupation / Job title (See Instructions)</b> CEO		<b>Employer (See Instructions)</b> ClearCardio
<b>Date</b> 12/07/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Farah, Imad	<b>Amount of Contribution (\$)</b> \$1,500.00
	<b>Contributor address; City; State; Zip Code</b>  Houston, TX 77095	
<b>Principal occupation / Job title (See Instructions)</b> general manager		<b>Employer (See Instructions)</b> Fyi contracting llc
<b>Date</b> 09/29/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Theresa	<b>Amount of Contribution (\$)</b> \$250.00
	<b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75218	
<b>Principal occupation / Job title (See Instructions)</b> Self employed		<b>Employer (See Instructions)</b> Self Employed
<b>Date</b> 10/18/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Geesaman, Kathryn	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Flatonia, TX 78941	
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b> retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/43 Rpt: 16/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 11/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geesaman, Kathryn ..... <b>6</b> Contributor address; City; State; Zip Code  Flatonia, TX 78941	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>8</b> Principal occupation / Job title (See Instructions) retired	<b>9</b> Employer (See Instructions) retired
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geesaman, Kathryn ..... Contributor address; City; State; Zip Code  Flatonia, TX 78941	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs, Dan ..... Contributor address; City; State; Zip Code  Houston, TX 77066	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John ..... Contributor address; City; State; Zip Code  Lindale, TX 75771	Amount of Contribution (\$) \$200.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Christy ..... Contributor address; City; State; Zip Code  New Braunfels, TX 78132	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/43 Rpt: 17/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 10/25/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorman, Bob Sandy	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Waxahachie, TX 75165	
<b>8</b> Principal occupation / Job title (See Instructions) Supervisor Environmental Ed.		<b>9</b> Employer (See Instructions) Dallas ISD
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gowen, Connie	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Sherman, TX 75090	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graff, Stanley	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code  Dallas, TX 75219	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Graff Chevrolet
Date 11/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Robert L	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  Austin, TX 78756	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Robert L	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Austin, TX 78756	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/43 Rpt: 18/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 09/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammond, Greg	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Greenville, TX 75402	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hance, Kent	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code  Austin, TX 78701	
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Hance Scarborough
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harlow, Jason	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code  Dallas, TX 75247	
Principal occupation / Job title (See Instructions) Cattle sales		Employer (See Instructions) Self/Harlow Cattle
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Ryan	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Sudan, TX 79371	
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Farm
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrell, James	Amount of Contribution (\$) \$22.00
	Contributor address; City; State; Zip Code  Houston, TX 77004	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/43 Rpt: 19/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 09/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Sally	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Central Point, OR 97502-1641	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Ralph	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Cuero, TX 77954	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkinson, J.A.	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Horshoe Bay , TX 78657	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Richard	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Hickory Creek, TX 75065	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Hayes, Berry, White Vanzant, LLP
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heavin, Gary	Amount of Contribution (\$) \$25,000.00
	Contributor address; City; State; Zip Code  Gatesville, TX 76528	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/43 Rpt: 20/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 07/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Cecelia ..... <b>6</b> Contributor address; City; State; Zip Code  Freer, TX 78357	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>8</b> Principal occupation / Job title (See Instructions) <b>9</b> Employer (See Instructions)	
<b>Date</b> 08/21/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Cecelia ..... <b>Contributor address; City; State; Zip Code</b>  Freer, TX 78357	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Principal occupation / Job title (See Instructions)</b> <b>Employer (See Instructions)</b>	
<b>Date</b> 09/25/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Cecelia ..... <b>Contributor address; City; State; Zip Code</b>  Freer, TX 78357	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Principal occupation / Job title (See Instructions)</b> <b>Employer (See Instructions)</b> Retired	
<b>Date</b> 10/05/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Cecelia ..... <b>Contributor address; City; State; Zip Code</b>  Freer, TX 78357	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Principal occupation / Job title (See Instructions)</b> <b>Employer (See Instructions)</b> Retired	
<b>Date</b> 11/09/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Cecelia ..... <b>Contributor address; City; State; Zip Code</b>  Freer, TX 78357	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Principal occupation / Job title (See Instructions)</b> <b>Employer (See Instructions)</b> Retired	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/43 Rpt: 21/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 12/07/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Cecelia ..... <b>6</b> Contributor address; City; State; Zip Code  Freer, TX 78357	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>8</b> Principal occupation / Job title (See Instructions) Retired	<b>9</b> Employer (See Instructions) Retired
Date 12/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Cecelia ..... Contributor address; City; State; Zip Code  Freer, TX 78357	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hershey, Doug ..... Contributor address; City; State; Zip Code  Amarillo, TX 79159	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hershey, Doug ..... Contributor address; City; State; Zip Code  Amarillo, TX 79159	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Self employed	Employer (See Instructions) Self Employed
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hershey, Doug ..... Contributor address; City; State; Zip Code  Amarillo, TX 79159	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Self employed	Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/43 Rpt: 22/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hershey, Doug	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Amarillo, TX 79159	
<b>8</b> Principal occupation / Job title (See Instructions) Self employed		<b>9</b> Employer (See Instructions) Self Employed
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hewitt, Scott	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Big Sandy, TX 75755	
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self Employed
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holder, John	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Dripping Springs, TX 78620	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hootman, Joe	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Austin, TX 78758	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Edmund	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code  Stephenville, TX 76401	
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Self-Tanglewood Pharmacy

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/43 Rpt: 23/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 11/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudson, Ben (Mr.)	<b>7</b> Amount of Contribution (\$) \$2,500.00
	<b>6</b> Contributor address; City; State; Zip Code  Morgan Mill, TX 76465	
<b>8</b> Principal occupation / Job title (See Instructions) Owner and publisher of Track Magazine		<b>9</b> Employer (See Instructions) Self employed
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huffines, Phillip	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code  Dallas, TX 75205	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Peter	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Houston, TX 77024	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Peter	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Houston, TX 77024	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Peter	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Houston, TX 77024	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/43 Rpt: 24/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobson, Grace	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>6</b> Contributor address; City; State; Zip Code  The Woodlands, TX 77382	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janes, Dennis	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  San Antonio, TX 78247	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Reed	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code  Austin, TX 78701	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Johnson Johnson
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, Cathy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Haltom City, TX 76148	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaila, Sanjeev (Dr.)	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code  Atlanta, GA 30328	
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/43 Rpt: 25/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 12/07/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kanaan, Elias	<b>7</b> Amount of Contribution (\$) \$1,500.00
	<b>6</b> Contributor address; City; State; Zip Code  The Woodlands, TX 77382-1490	
<b>8</b> Principal occupation / Job title (See Instructions) Self employed		<b>9</b> Employer (See Instructions) Self Employed
Date 12/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karam, Maher and Lina	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Bellaire, TX 77401	
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) Texas Children's Hospital
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kemp, Katie	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Montgomery, TX 77356	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kemp, Katie	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Montgomery, TX 77356	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khoury, Pierre	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code  The Woodlands, TX 77381-3329	
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/43 Rpt: 26/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 10/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krellenstein, Jason	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  San Marcos, TX 78666	
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions) Self Employed
<b>Date</b> 08/01/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lecompte, Dianna	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Missouri City, TX 77459	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 08/10/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Ledbetter, Jearl	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Lockhart, TX 78644	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 09/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, C.C.	<b>Amount of Contribution (\$)</b> \$250.00
	<b>Contributor address; City; State; Zip Code</b>  Houston, TX 77036	
<b>Principal occupation / Job title (See Instructions)</b> Self employed		<b>Employer (See Instructions)</b> Self Employed
<b>Date</b> 09/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Wea Hwa	<b>Amount of Contribution (\$)</b> \$2,100.00
	<b>Contributor address; City; State; Zip Code</b>  Houston, TX 77063	
<b>Principal occupation / Job title (See Instructions)</b> Chairman		<b>Employer (See Instructions)</b> Southern News Group

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/43 Rpt: 27/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 12/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Wea Hwa	<b>7</b> Amount of Contribution (\$) \$2,000.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77063	
<b>8</b> Principal occupation / Job title (See Instructions) Chairman		<b>9</b> Employer (See Instructions) Southern News Group
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leidy, Kaye	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Cedar Creek, TX 78612	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leidy, Kaye	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Cedar Creek, TX 78612	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leidy, Kaye	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Cedar Creek, TX 78612	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leidy, Kaye	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Cedar Creek, TX 78612	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/43 Rpt: 28/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 12/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leidy, Kaye	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Cedar Creek, TX 78612	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Little, Robert	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Encinitas, CA 92024	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Logsdon, Ken	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Fairview, TX 75069	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maksoud, Michael	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77095-3587	
Principal occupation / Job title (See Instructions) Sr VP		Employer (See Instructions) Westood
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maler, Jerry	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code  Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/43 Rpt: 29/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 12/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maler, Jerry	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Canyon Lake, TX 78133	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Christopher	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code  McKinney, TX 75201	
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) GlenMartin
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLane, Jr., Drayton	Amount of Contribution (\$) \$25,000.00
	Contributor address; City; State; Zip Code  Temple, TX 76503	
Principal occupation / Job title (See Instructions) CEO/Grocer wholesale company		Employer (See Instructions) McLane Group
Date 07/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccoy, David	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Spring Branch, TX 78070	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellor, Craig	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  New Braunfels, TX 78130	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/43 Rpt: 30/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 11/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minder, Dorene	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Stephenville, TX 76401	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moffatt, Theressa	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Denton, TX 76210	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Brandon	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Garland, TX 75040	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Harvest Solar Inc
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Dale	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Victoria, TX 77904	
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self Employed
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neiman, Susan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  San Marcos, TX 78666	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/43 Rpt: 31/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 08/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Not Provided, Don	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Granbury, TX 76049	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Brien, Robert	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77057	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Saxet Petroleum
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Daulton	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Plano, TX 75094	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Consultant
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogle, John	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code  Tyler, TX 75711	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Ogle Construction
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oravetz III, Ashton	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Tyler, TX 75703	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/43 Rpt: 32/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshotse, Philip	<b>7</b> Amount of Contribution (\$) \$10,000.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77099	
<b>8</b> Principal occupation / Job title (See Instructions) Self employed		<b>9</b> Employer (See Instructions) Dotbox Studios LLC
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshotse, Philip	Amount of Contribution (\$) \$50,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77099	
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Dotbox Studios LLC
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pardue, Leslie	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code  Austin, TX 78737-4487	
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self Employed
Date 12/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Jeung Ho	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Irving , TX 75039	
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self Employed
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Patsy	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  La Grange, TX 78945	
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) Emedge Corp

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/43 Rpt: 33/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 09/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patton, Jr, Robert	<b>7</b> Amount of Contribution (\$) \$5,000.00
	<b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76107	
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) TCRG properties
<b>Date</b> 11/21/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Perot, Jr., Ross	<b>Amount of Contribution (\$)</b> \$20,000.00
	<b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75219	
<b>Principal occupation / Job title (See Instructions)</b> Real Estate Developer		<b>Employer (See Instructions)</b> Self
<b>Date</b> 10/18/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Perryman, Barbara	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75248	
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b> retired
<b>Date</b> 07/07/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Kristy	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Webster, TX 77598	
<b>Principal occupation / Job title (See Instructions)</b> Investor		<b>Employer (See Instructions)</b> Self Employed
<b>Date</b> 10/24/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, David	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  San Antonio, TX 78259	
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b> retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/43 Rpt: 34/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Gloria ..... <b>6</b> Contributor address; City; State; Zip Code  Taylor, TX 76574	<b>7</b> Amount of Contribution (\$) \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Self/Law Office of Tim Powers
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Tim ..... Contributor address; City; State; Zip Code  Denton, TX 76201	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self/Law Office of Tim Powers
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsay Rose, Carol Alison ..... Contributor address; City; State; Zip Code  Gainesville, TX 76240	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self Employed
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reams, Larry ..... Contributor address; City; State; Zip Code  Houston, TX 77059	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reams, Larry ..... Contributor address; City; State; Zip Code  Houston, TX 77059	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/43 Rpt: 35/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reams, Larry	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77059	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redalen, Richard	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code  Colleyville, TX 76034	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richards, Jeff	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Washington, IA 52353	
Principal occupation / Job title (See Instructions) Planning		Employer (See Instructions) GMR
Date 07/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robison, Scott	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Kempner, TX 76539	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schildknecht, Carter	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Lamesa, TX 79331	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/43 Rpt: 36/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 09/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Kimberly	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Venus, TX 76084	
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate Broker		<b>9</b> Employer (See Instructions) Just Call Shaw
<b>Date</b> 10/24/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Kimberly	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Venus, TX 76084	
<b>Principal occupation / Job title (See Instructions)</b> Real Estate Broker		<b>Employer (See Instructions)</b> Just Call Shaw
<b>Date</b> 11/24/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Kimberly	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Venus, TX 76084	
<b>Principal occupation / Job title (See Instructions)</b> Real Estate Broker		<b>Employer (See Instructions)</b> Just Call Shaw
<b>Date</b> 12/24/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Kimberly	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Venus, TX 76084	
<b>Principal occupation / Job title (See Instructions)</b> Real Estate Broker		<b>Employer (See Instructions)</b> Just Call Shaw
<b>Date</b> 10/06/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Eileen	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Crowley, TX 76036	
<b>Principal occupation / Job title (See Instructions)</b> Office Manager		<b>Employer (See Instructions)</b> Medical Clinic

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/43 Rpt: 37/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 12/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skaria, Mani	<b>7</b> Amount of Contribution (\$) \$2,500.00
	<b>6</b> Contributor address; City; State; Zip Code  McAllen, TX 78504	
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) US Citrus, LLC
<b>Date</b> 09/13/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Barry	<b>Amount of Contribution (\$)</b> \$500.00
	<b>Contributor address; City; State; Zip Code</b>  Winnsboro, TX 75494	
<b>Principal occupation / Job title (See Instructions)</b> Banker		<b>Employer (See Instructions)</b> Credit Union of Texas
<b>Date</b> 09/08/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Soules, John	<b>Amount of Contribution (\$)</b> \$500.00
	<b>Contributor address; City; State; Zip Code</b>  Tyler, TX 75703	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> John Soules Foods
<b>Date</b> 12/18/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Southern Crop Production Association	<b>Amount of Contribution (\$)</b> \$1,000.00
	<b>Contributor address; City; State; Zip Code</b>  Wetumpka, AL 36092	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/06/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, Deb	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  Boyd, TX 76023	
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b> retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/43 Rpt: 38/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 11/02/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, Deb ..... <b>6</b> Contributor address; City; State; Zip Code  Boyd, TX 76023	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stallard, Brett ..... Contributor address; City; State; Zip Code  Dallas, TX 75206	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) A Good Turn
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stearns, Julie ..... Contributor address; City; State; Zip Code  Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens, Randy ..... Contributor address; City; State; Zip Code  Comanche, TX 76442	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart , Parker ..... Contributor address; City; State; Zip Code  Claude , TX 79019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 36/43 Rpt: 39/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 07/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stickland, Jonathan	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Weatherford, TX 76087	
<b>8</b> Principal occupation / Job title (See Instructions) Marketing		<b>9</b> Employer (See Instructions) Mewbourne Oil Company
<b>Date</b> 09/05/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoltz, Michael	<b>Amount of Contribution (\$)</b> \$1,000.00
	<b>Contributor address; City; State; Zip Code</b>  Tyler, TX 75701	
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b> retired
<b>Date</b> 11/01/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Stringfellow, Michael	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Abilene, TX 79602	
<b>Principal occupation / Job title (See Instructions)</b> Self employed		<b>Employer (See Instructions)</b> Beekeeper
<b>Date</b> 10/24/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Stroope, Rhea	<b>Amount of Contribution (\$)</b> \$5,000.00
	<b>Contributor address; City; State; Zip Code</b>  Caddo Mills, TX 75135	
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b> retired
<b>Date</b> 11/04/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumrow, Karon	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Seminole, TX 79360	
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b> retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 37/43 Rpt: 40/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 12/22/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sun, Harry Teih-Han	<b>7</b> Amount of Contribution (\$) \$125.00
	<b>6</b> Contributor address; City; State; Zip Code  Missouri City, TX 77459	
<b>8</b> Principal occupation / Job title (See Instructions) Self employed		<b>9</b> Employer (See Instructions) Self Employed
<b>Date</b> 10/17/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Jeremy	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Apo, TX 09421	
<b>Principal occupation / Job title (See Instructions)</b> E8		<b>Employer (See Instructions)</b> US Navy
<b>Date</b> 12/19/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Jodey Arrington	<b>Amount of Contribution (\$)</b> \$2,000.00
	<b>Contributor address; City; State; Zip Code</b>  Washington, DC 22314	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 12/02/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Agricultural Aviation Assoc. AG-PAC	<b>Amount of Contribution (\$)</b> \$5,000.00
	<b>Contributor address; City; State; Zip Code</b>  Austin, TX 78768	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/02/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas International Produce Association	<b>Amount of Contribution (\$)</b> \$500.00
	<b>Contributor address; City; State; Zip Code</b>  Mission, TX 78572	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 38/43 Rpt: 41/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 10/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tibbetts, Mary John	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Voss, TX 76888	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 12/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tohme, Alberto	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Houston, TX 77056	
Principal occupation / Job title (See Instructions) Toxicologist		Employer (See Instructions) Tohme Consulting Associates
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tolin, Jean	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Weatherford, TX 76087	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tres Hermanos Foods LLC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Brownsville, TX 78526-3397	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Volleman, Frank Annette	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code  Gustine, TX 76455	
Principal occupation / Job title (See Instructions) Dairy farmer		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 39/43 Rpt: 42/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 10/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waldeck, Art	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Decatur, TX 76234	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waldrip, Dib	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  New Braunsfel, TX 78130	
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self Employed
Date 12/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Yan	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77082-2726	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welty, Doug	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Bulverde, TX 78163	
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self Employed
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wendland, Ken	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Kerrville, TX 78029	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 40/43 Rpt: 43/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wendland, Ken ..... <b>6</b> Contributor address; City; State; Zip Code  Kerrville, TX 78029	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>8</b> Principal occupation / Job title (See Instructions) <b>9</b> Employer (See Instructions)	
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wendland, Ken ..... Contributor address; City; State; Zip Code  Kerrville, TX 78029	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wendland, Ken ..... Contributor address; City; State; Zip Code  Kerrville, TX 78029	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions) Self employed R E consultant	
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wendland, Ken ..... Contributor address; City; State; Zip Code  Kerrville, TX 78029	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions) Self employed R E consultant	
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wendland, Ken ..... Contributor address; City; State; Zip Code  Kerrville, TX 78029	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions) Self employed R E consultant	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 41/43 Rpt: 44/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 12/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: West of Wall Street Film Company LLC	<b>7</b> Amount of Contribution (\$) \$2,500.00
	<b>6</b> Contributor address; City; State; Zip Code  Azle, TX 76020	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Windham, Jerry	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  College Station, TX 77842	
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) Self
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Witten, G Ronald	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Dallas, TX 75225	
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self Employed
Date 12/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Yammine, Michel	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code  Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) ScoNet
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Yang, Kevin	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Sugar land, TX 77479	
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 42/43 Rpt: 45/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 12/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yang, Kevin	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Sugar land, TX 77479	
<b>8</b> Principal occupation / Job title (See Instructions) Self employed		<b>9</b> Employer (See Instructions) Self Employed
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yida Holdings LLC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Houston, TX 77036	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yoe, Stephen	Amount of Contribution (\$) \$2,100.00
	Contributor address; City; State; Zip Code  Houston, TX 77083	
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions) Yoe CPA LLC
Date 12/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yoe, Stephen	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Houston, TX 77083	
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions) Yoe CPA LLC
Date 12/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yoe, Stephen	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Houston, TX 77083	
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions) Yoe CPA LLC

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1: Sch: 43/43 Rpt: 46/195
<b>2</b> FILER NAME Miller, Sid (The Honorable)			<b>3</b> Filer ID (Ethics Commission Filers) 00042143
<b>4</b> Date 12/19/2025	<b>5</b> Full name of contributor Zhou, Helen	<b>6</b> Contributor address; City; State; Zip Code Houston, TX 77036	<b>7</b> Amount of Contribution (\$) \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Self employed		<b>9</b> Employer (See Instructions) Self Employed	
<b>Date</b> 11/22/2025	<b>Full name of contributor</b> jarratt, James	<b>Contributor address; City; State; Zip Code</b> Granbury, TX 76048	<b>Amount of Contribution (\$)</b> \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	

**PLEDGED CONTRIBUTIONS****SCHEDULE B**

<b>The Instruction Guide explains how to complete this form.</b>			
<b>2 FILER NAME</b> Miller, Sid (The Honorable)			
<b>4 TOTAL OF UNITEMIZED PLEDGES</b> <b>\$</b> 0.00			
<b>5 Date</b> 12/31/2025	<b>6 Full name of pledgor</b> Barnes, Steven .....	<input type="checkbox"/> out-of-state PAC (ID#: _____)	<b>8 Amount of pledge (\$)</b> \$25,000.00
	<b>7 Pledgor Address;</b> Reno, NV 89523		<b>9 In-kind description (If applicable)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
<b>10 Principal occupation / Job title (See Instructions)</b> Self employed		<b>11 Employer (See Instructions)</b> Self Employed	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/28 Rpt: 48/195	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143	
4 Date 10/14/2025	5 Payee name CTM Magazine		
6 Amount (\$) \$300.00	7 Payee address; City; PO Box 360722  Dallas, TX 75336		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense advertising expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 07/02/2025	Payee name Caron, Leslie		
Amount (\$) \$2,000.00	Payee address; City; 1914 West Gray #106  Houston, TX 77019		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense July retainer fee	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 07/22/2025	Payee name Caron, Leslie		
Amount (\$) \$2,000.00	Payee address; City; 1914 West Gray #106  Houston, TX 77019		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense August retainer fee	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/28 Rpt: 49/195	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 07/31/2025	5 Payee name Caron, Leslie	
6 Amount (\$) \$800.00	7 Payee address; City; 1914 West Gray #106  Houston, TX 77019	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Commission on donation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Caron, Leslie	Office sought Office held
Date 08/21/2025	Payee name Caron, Leslie	
Amount (\$) \$2,000.00	Payee address; City; 1914 West Gray #106  Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fundraiser services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Caron, Leslie	Office sought Office held
Date 08/04/2025	Payee name Caron, Leslie	
Amount (\$) \$1,000.00	Payee address; City; 1914 West Gray #106  Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Commission
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Caron, Leslie	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/28 Rpt: 50/195	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 08/12/2025	5 Payee name Caron, Leslie	
6 Amount (\$) \$2,000.00	7 Payee address; City; 1914 West Gray #106  Houston, TX 77019	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fundraiser retainer
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Caron, Leslie	Office sought Office held
Date 12/19/2025	Payee name Caron, Leslie	
Amount (\$) \$400.00	Payee address; City; 1914 West Gray #106  Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 commission
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Caron, Leslie	Office sought Office held
Date 09/16/2025	Payee name Fogerty, Bruce	
Amount (\$) \$500.00	Payee address; City; Dallas, TX 75214	State; Zip Code  <b>REDACTED PER 254.0401, ELEC. CODE</b>
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Caron, Leslie	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/28 Rpt: 51/195	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 11/03/2025	5 Payee name Hallaron Media LLC dba Hallaron Advertising Agency	
6 Amount (\$) \$13,125.00	7 Payee address; City; State; Zip Code 2001 Timberloch PI Ste 500  The Woodlands, TX 77380	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense advertising expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Hallaron Media LLC dba Hallaron Advertising Agency	Office sought Office held
Date 11/13/2025	Payee name Hallaron Media LLC dba Hallaron Advertising Agency	
Amount (\$) \$13,125.00	Payee address; City; State; Zip Code 2001 Timberloch PI Ste 500  The Woodlands, TX 77380	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense advertising expenses
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Hallaron Media LLC dba Hallaron Advertising Agency	Office sought Office held
Date 11/19/2025	Payee name Hallaron Media LLC dba Hallaron Advertising Agency	
Amount (\$) \$13,125.00	Payee address; City; State; Zip Code 2001 Timberloch PI Ste 500  The Woodlands, TX 77380	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense advertising expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Hallaron Media LLC dba Hallaron Advertising Agency	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/28 Rpt: 52/195	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 11/28/2025	5 Payee name Hallaron Media LLC dba Hallaron Advertising Agency	
6 Amount (\$) \$13,125.00	7 Payee address; City; State; Zip Code 2001 Timberloch PI Ste 500  The Woodlands, TX 77380	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense advertising expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Hallaron Media LLC dba Hallaron Advertising Agency	Office sought Office held
Date 12/01/2025	Payee name Hallaron Media LLC dba Hallaron Advertising Agency	
Amount (\$) \$13,125.00	Payee address; City; State; Zip Code 2001 Timberloch PI Ste 500  The Woodlands, TX 77380	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense advertising expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Hallaron Media LLC dba Hallaron Advertising Agency	Office sought Office held
Date 12/09/2025	Payee name Hallaron Media LLC dba Hallaron Advertising Agency	
Amount (\$) \$13,125.00	Payee address; City; State; Zip Code 2001 Timberloch PI Ste 500  The Woodlands, TX 77380	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Hallaron Media LLC dba Hallaron Advertising Agency	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/28 Rpt: 53/195	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 12/17/2025	5 Payee name Hallaron Media LLC dba Hallaron Advertising Agency	
6 Amount (\$) \$13,125.00	7 Payee address; City; State; Zip Code 2001 Timberloch PI Ste 500  The Woodlands, TX 77380	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Hallaron Media LLC dba Hallaron Advertising Agency	Office sought Office held
Date 12/23/2025	Payee name Hallaron Media LLC dba Hallaron Advertising Agency	
Amount (\$) \$13,125.00	Payee address; City; State; Zip Code 2001 Timberloch PI Ste 500  The Woodlands, TX 77380	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense advertising expensed
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Hanes, Eva	Office sought Office held
Date 12/08/2025	Payee name Hanes, Eva	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 211 E.7th Street Ste 915 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Hanes, Eva	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/28 Rpt: 54/195	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 12/30/2025	5 Payee name Hanes, Eva	
6 Amount (\$) \$2,500.00	7 Payee address; City; 211 E.7th Street Ste 915 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense social media
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/08/2025	Payee name Haynes, Eva	
Amount (\$) \$1,250.00	Payee address; City; State; Zip Code  <b>REDACTED PER 254.0401, ELEC. CODE</b>  Austin, TX 78725	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense social media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/05/2025	Payee name Haynes, Eva	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code  <b>REDACTED PER 254.0401, ELEC. CODE</b>  Austin, TX 78725	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense social media
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/28 Rpt: 55/195	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 07/01/2025	5 Payee name Interbank	
6 Amount (\$) \$10.00	7 Payee address; City; State; Zip Code 200 W Lingleville Rd  STEPHENVILLE, TX 76401	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Katy Christian Magazine	Office sought Office held
Date 12/23/2025	Payee name Katy Christian Magazine	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 16350 Park Ten Pl,  Houston, TX 77084	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense advertising expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Miller, Sid (Commissioner)	Office sought Office held
Date 07/16/2025	Payee name Miller, Sid (Commissioner)	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 6407 S. US Highway 377  Stephenville, TX 76401	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Loan reimbursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Miller, Sid (Commissioner)	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/28 Rpt: 56/195	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 08/11/2025	5 Payee name Miller, Sid (Commissioner)	
6 Amount (\$) \$7,500.00	7 Payee address; City; State; Zip Code 6407 S. US Highway 377  Stephenville, TX 76401	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Loan reimbursement
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Miller, Sid (Commissioner)	Office sought Office held
Date 09/23/2025	Payee name Miller, Sid (Commissioner)	
Amount (\$) \$700.00	Payee address; City; State; Zip Code 6407 S. US Highway 377  Stephenville, TX 76401	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense loan reimbursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Miller, Sid (Commissioner)	Office sought Office held
Date 07/23/2025	Payee name North Texas Freedom Rally	
Amount (\$) \$250.00	Payee address; City; State; Zip Code PO Box 360722  Dallas, TX 75336	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Miller, Sid (Commissioner)	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/28 Rpt:	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 09/12/2025	5 Payee name North Texas Freedom Rally	
6 Amount (\$) \$250.00	7 Payee address; City; PO Box 360722  Dallas, TX 75336	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/24/2025	Payee name Republican Party of Texas	
Amount (\$) \$3,750.00	Payee address; City; PO Box 1627  Austin, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) filing fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense filing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/11/2025	Payee name Schrader, Cori	
Amount (\$) \$1,000.00	Payee address; City; 5620 Sambuco Street  Round Rock, TX 78665	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bookkeeping services
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/28 Rpt:	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 08/04/2025	5 Payee name Schrader, Cori	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 5620 Sambuco St  Round Rock, TX 78665	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bookkeeping services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Schrader, Cori	Office sought Office held
Date 09/03/2025	Payee name Schrader, Cori	
Amount (\$) \$1,024.24	Payee address; City; State; Zip Code 5620 Sambuco St  Round Rock, TX 78665	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bookkeeping service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Schrader, Cori	Office sought Office held
Date 09/30/2025	Payee name Schrader, Cori	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code  REDACTED PER 254.0401, ELEC. CODE  Round Rock, TX 78665	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bookkeeping services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Schrader, Cori	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/28 Rpt:	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 10/28/2025	5 Payee name Schrader, Cori	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code  <b>REDACTED PER 254.0401, ELEC. CODE</b>  Round Rock, TX 78665	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bookkeeping expenses
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Schrader, Cori	Office sought Office held
Date 12/01/2025	Payee name Schrader, Cori	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code  <b>REDACTED PER 254.0401, ELEC. CODE</b>  Round Rock, TX 78665	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bookkeeping services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Todd	Office sought Office held
Date 07/15/2025	Payee name Smith, Todd	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 12113 Coyote Call Way  Austin, TX 78725	
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 fees
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/28 Rpt:	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 07/17/2025	5 Payee name Smith, Todd	
6 Amount (\$) \$3,800.00	7 Payee address; City; State; Zip Code 12113 Coyote Call Way  Austin, TX 78725	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Commission on donation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/21/2025	Payee name Smith, Todd	
Amount (\$) \$1,050.00	Payee address; City; State; Zip Code 12113 Coyote Call Way  Austin, TX 78725	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Commission for donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/13/2025	Payee name Smith, Todd	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 12113 Coyote Call Way  Austin, TX 78725	
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 fees
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/28 Rpt:	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 09/13/2025	5 Payee name Smith, Todd	
6 Amount (\$) \$1,850.00	7 Payee address; City; State; Zip Code 12113 Coyote Call Way  Austin, TX 78725	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 commission
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/12/2025	Payee name Smith, Todd	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 12113 Coyote Call Way  Austin, TX 78725	
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
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/27/2025	Payee name Smith, Todd	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 12113 Coyote Call Way  Austin, TX 78725	
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 fee
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/28 Rpt:	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 09/16/2025	5 Payee name Smith, Todd	
6 Amount (\$) \$2,150.00	7 Payee address; City; State; Zip Code 12113 Coyote Call Way  Austin, TX 78725	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense commission
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/25/2025	Payee name Smith, Todd	
Amount (\$) \$1,350.00	Payee address; City; State; Zip Code 12113 Coyote Call Way  Austin, TX 78725	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense commission
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name Smith, Todd	
Amount (\$) \$360.00	Payee address; City; State; Zip Code 12113 Coyote Call Way  Austin, TX 78725	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense commission
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/28 Rpt:	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143	
4 Date 11/04/2025	5 Payee name Smith, Todd		
6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 12113 Coyote Call Way  Austin, TX 78725		
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 fees	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 11/25/2025	Payee name Smith, Todd		
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 12113 Coyote Call Way  Austin, TX 78725		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense commission	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 12/04/2025	Payee name Smith, Todd		
Amount (\$) \$300.00	Payee address; City; State; Zip Code 12113 Coyote Call Way  Austin, TX 78725		
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 fee	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/28 Rpt:	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 12/15/2025	5 Payee name Smith, Todd	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 12113 Coyote Call Way  Austin, TX 78725	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 commission
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/15/2025	Payee name Smith, Todd	
Amount (\$) \$350.00	Payee address; City; State; Zip Code 12113 Coyote Call Way  Austin, TX 78725	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 commission
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/30/2025	Payee name Smith, Todd	
Amount (\$) \$5,780.00	Payee address; City; State; Zip Code 12113 Coyote Call Way  Austin, TX 78725	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 commission
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/28 Rpt:	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 09/02/2025	5 Payee name Stovall, Melanie	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 7333 Valley View Lane #102  Dallas, TX 75240	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fundraiser planner
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/15/2025	Payee name Stovall, Melanie	
Amount (\$) \$1,900.06	Payee address; City; State; Zip Code 7333 Valley View Lane #102  Dallas, TX 75240	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event fundraising fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/29/2025	Payee name Stovall, Melanie	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 7333 Valley View Lane #102  Dallas, TX 75240	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense events and fundraising
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/28 Rpt:	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 11/20/2025	5 Payee name Stovall, Melanie	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 7333 Valley View Lane #102  Dallas, TX 75240	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event and fundraising fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/24/2025	Payee name Stovall, Melanie	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 7333 Valley View Lane #102  Dallas, TX 75240	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fundraising scheduling
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/24/2025	Payee name Texas Department of Agriculture	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1700 N Congress  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 use of exec suburban and some office supplies
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/28 Rpt:	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 12/02/2025	5 Payee name Thomas Graphics	
6 Amount (\$) \$1,566.38	7 Payee address; City; State; Zip Code 9501 N I H, 9501 N Interstate Hwy 35  Austin, TX 78753	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense cutting boards
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/13/2025	Payee name Valentine Direct Marketing LLC	
Amount (\$) \$818.38	Payee address; City; State; Zip Code 14243 Proton Rd  Farmers Branch, TX 75244	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/30/2025	Payee name Valentine Direct Marketing LLC	
Amount (\$) \$818.38	Payee address; City; State; Zip Code 14243 Proton Rd  Farmers Branch, TX 75244	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 services
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 21/28 Rpt:	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 10/27/2025	5 Payee name Valentine Direct Marketing LLC	
6 Amount (\$) \$162.38	7 Payee address; City; 14243 Proton Rd  Farmers Branch, TX 75244	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/15/2025	Payee name Valentine Direct Marketing	
Amount (\$) \$714.48	Payee address; City; 14243 Proton Rd  Farmers Branch, TX 75244	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/09/2025	Payee name Vici Media	
Amount (\$) \$222.49	Payee address; City; 5101 Bonneville Bend  Austin, TX 78744	
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 campaign website fee
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 22/28 Rpt:	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 08/08/2025	5 Payee name Vici Media	
6 Amount (\$) \$185.13	7 Payee address; City; 5101 Bonneville Bend  Austin, TX 78744	
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 Campaign website fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/17/2025	Payee name Vici Media	
Amount (\$) \$222.49	Payee address; City; 5101 Bonneville Bend  Austin, TX 78744	
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 campaign website fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/05/2025	Payee name Vici Media	
Amount (\$) \$374.75	Payee address; City; 5101 Bonneville Bend  Austin, TX 78744	
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 campaign website fees
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 23/28 Rpt:	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 07/07/2025	5 Payee name Visa Marriott Credit Card	
6 Amount (\$) \$9,470.22	7 Payee address; City; PO Box 94014  Palatine, IL 60094	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Card payment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/17/2025	Payee name Visa Marriott Credit Card	
Amount (\$) \$8,858.32	Payee address; City; PO Box 94014  Palatine, IL 60094	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/11/2025	Payee name Visa Marriott Credit Card	
Amount (\$) \$6,337.62	Payee address; City; PO Box 94014  Palatine, IL 60094	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 24/28 Rpt:	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 09/17/2025	5 Payee name Visa Marriott Credit Card	
6 Amount (\$) \$4,207.31	7 Payee address; City; PO Box 94014  Palatine, IL 60094	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card payment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/08/2025	Payee name Visa Marriott Credit Card	
Amount (\$) \$7,684.00	Payee address; City; PO Box 94014  Palatine, IL 60094	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/18/2025	Payee name Visa Marriott Credit Card	
Amount (\$) \$8,968.20	Payee address; City; PO Box 94014  Palatine, IL 60094	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card payment
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 25/28 Rpt:	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 09/12/2025	5 Payee name Visa Marriott Credit Card	
6 Amount (\$) \$6,337.62	7 Payee address; City; PO Box 94014  Palatine, IL 60094	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card payment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/19/2025	Payee name Visa Marriott Credit Card	
Amount (\$) \$4,207.31	Payee address; City; PO Box 94014  Palatine, IL 60094	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/03/2025	Payee name Visa Marriott Credit Card	
Amount (\$) \$8,627.87	Payee address; City; PO Box 94014  Palatine, IL 60094	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card payment
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 26/28 Rpt:	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 10/10/2025	5 Payee name Visa Marriott Credit Card	
6 Amount (\$) \$8,433.91	7 Payee address; City; PO Box 94014  Palatine, IL 60094	State; Zip Code
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
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/03/2025	Payee name Visa Marriott Credit Card	
Amount (\$) \$10,058.95	Payee address; City; PO Box 94014  Palatine, IL 60094	State; Zip Code
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
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/21/2025	Payee name Visa Marriott Credit Card	
Amount (\$) \$9,113.06	Payee address; City; PO Box 94014  Palatine, IL 60094	State; Zip Code
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
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 27/28 Rpt:	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 10/02/2025	5 Payee name Visa Marriott Credit Card	
6 Amount (\$) \$8,627.87	7 Payee address; City; PO Box 94014  Palatine, IL 60094	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card payment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/09/2025	Payee name Visa Marriott Credit Card	
Amount (\$) \$174.77	Payee address; City; PO Box 94014  Palatine, IL 60094	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/09/2025	Payee name Visa Marriott Credit Card	
Amount (\$) \$8,433.91	Payee address; City; PO Box 94014  Palatine, IL 60094	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card payment
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 28/28 Rpt:	2 FILER NAME Miller, Sid (The Honorable)	3 Filer ID (Ethics Commission Filers) 00042143
4 Date 11/01/2025	5 Payee name Visa Marriott Credit Card	
6 Amount (\$) \$10,058.95	7 Payee address; City; PO Box 94014  Palatine, IL 60094	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card payment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/20/2025	Payee name Visa Marriott Credit Card	
Amount (\$) \$9,113.06	Payee address; City; PO Box 94014  Palatine, IL 60094	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/17/2025	Payee name Visa Marriott Credit Card	
Amount (\$) \$9,175.83	Payee address; City; PO Box 94014  Palatine, IL 60094	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution Chase Bank		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$125.00	(b) Date of Charge 09/19/2025	(c) Date(s) Credit Card Issuer Paid 10/01/2025
7 PAYEE	(a) Payee name Condolences.com		(b) Payee address; City, State, Zip Code PO Box 3207  Ogdon, UT 84409
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) Gift/Awards/Memorials Expense		(b) Description memorial flowers
	(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 \$15.97	(b) Date of Charge 09/19/2025	(c) Date(s) Credit Card Issuer Paid 10/01/2025
PAYEE	(a) Payee name Sonic San Antonio		(b) Payee address; City, State, Zip Code 5510 Babcock Rd  San Antonio, TX 78240
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 Meal with campagin staff
	(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 \$69.58	(b) Date of Charge 09/19/2025	(c) Date(s) Credit Card Issuer Paid 10/01/2025
PAYEE	(a) Payee name Curio Hotels Washington DC		(b) Payee address; City, State, Zip Code 222 M St N  Washington, DC 20002
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 Campaign Staff meal
	(c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <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: 2/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$175.00	(b) Date of Charge 09/21/2025	(c) Date(s) Credit Card Issuer Paid 10/01/2025
7 PAYEE	(a) Payee name Circle K Lampasas		(b) Payee address; City, State, Zip Code 207 N Key Ave Lampasas, TX 76550
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 In District		(b) Description fuel for campaign car
			(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 \$2.99	(b) Date of Charge 09/25/2025	(c) Date(s) Credit Card Issuer Paid 10/01/2025
PAYEE	(a) Payee name Apple, Inc.		(b) Payee address; City, State, Zip Code 1 Infinite Loop Cupertino, CA 95014
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 for iPhoone and iPad
			(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 \$2.12	(b) Date of Charge 09/28/2025	(c) Date(s) Credit Card Issuer Paid 10/01/2025
PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description internet storage
			(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: 3/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$15.00	(b) Date of Charge 09/28/2025	(c) Date(s) Credit Card Issuer Paid 10/01/2025
7 PAYEE	(a) Payee name Canva		(b) Payee address; City, State, Zip Code 3212 E. Caesar St Bldg 1, Ste 1300 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 design program subscription
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$25.58	(b) Date of Charge 10/01/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description internet storage
(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 \$73.64	(b) Date of Charge 10/03/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Hard Eight BBQ Stephenville		(b) Payee address; City, State, Zip Code 1091 Glen Rose Rd Stephenville, TX 76401
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 meal with constituents
(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: 4/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$26.33	(b) Date of Charge 10/05/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
7 PAYEE	(a) Payee name SiriusXM		(b) Payee address; City, State, Zip Code 8650 S Freeport Pkwy  Irving, TX 75063
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) Transportation Equipment And Related Expense		(b) Description Subscription fee
(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 \$19.61	(b) Date of Charge 10/04/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Staples		(b) Payee address; City, State, Zip Code 200 Wolf Nursery Road  Stephenville, TX 76401
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 supplies
(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 \$5,775.00	(b) Date of Charge 10/05/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Texas First Politics, llc		(b) Payee address; City, State, Zip Code 2824 Wooded Acres Drive  Waco, TX 76710
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 services
(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: 5/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$21.02	(b) Date of Charge 10/07/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
7 PAYEE	(a) Payee name IONOS Inc.		(b) Payee address; City, State, Zip Code 100 North 18th Street Suite 400 Philadelphia, PA 19103
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 hosting
	(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 \$9.96	(b) Date of Charge 10/05/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name The Epoch Times		(b) Payee address; City, State, Zip Code 229 West 28th Street, Floor 6  New York, NY 10001
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 subscription fee
	(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 \$106.74	(b) Date of Charge 10/07/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Microsoft.com		(b) Payee address; City, State, Zip Code 2624 NE University Village St  Seattle, WA 98105
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 subscription fee
	(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: 6/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$200.00	(b) Date of Charge 10/08/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
7 PAYEE	(a) Payee name NTTA		(b) Payee address; City, State, Zip Code 5900 W Plano Pkwy  Plano, TX 75093
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 In District		(b) Description toll fees
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought      Office held
PAYMENT	(a) Amount Charged \$13.87	(b) Date of Charge 10/09/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Apple, Inc.		(b) Payee address; City, State, Zip Code 1 Infinite Loop  Cupertino, CA 95014
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 for iPhone and iPad
			(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 \$637.67	(b) Date of Charge 10/09/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name MailChimp		(b) Payee address; City, State, Zip Code 405 N. Angier Avenue NE  Atlanta, GA 30312
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description email blasts service
			(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: 7/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$675.00	(b) Date of Charge 10/12/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
7 PAYEE	(a) Payee name Cisco Ag Boosters Inc		(b) Payee address; City, State, Zip Code 3318 Highway 2945  Cisco, TX 76437-6011
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) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description donation
	(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 \$143.27	(b) Date of Charge 10/10/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Pathway		(b) Payee address; City, State, Zip Code PO Box 1298  Joshua, TX 76058
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 internet service provider with a phone line
	(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 \$96.00	(b) Date of Charge 10/13/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name NTTA		(b) Payee address; City, State, Zip Code 5900 W Plano Pkwy  Plano, TX 75093
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 In District		(b) Description parking fee
	(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: 8/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$11.96	(b) Date of Charge 10/13/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
7 PAYEE	(a) Payee name SAEXP News		(b) Payee address; City, State, Zip Code 301 Avenue E  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) Office Overhead/Rental Expense		(b) Description subscription fee
	(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 \$14.83	(b) Date of Charge 10/15/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name P Terrys		(b) Payee address; City, State, Zip Code 12301 N Mopac Expy, Aust  Austin, TX 78758
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 meal with campaign staff
	(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 \$108.84	(b) Date of Charge 10/15/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name PF Changs Austin		(b) Payee address; City, State, Zip Code 10114 Jollyville Road  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) Food/Beverage Expense		(b) Description meal with campaign staff
	(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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 9/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$415.08	(b) Date of Charge 10/16/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
7 PAYEE	(a) Payee name Courtyard Austin		(b) Payee address; City, State, Zip Code 300 East 4th Street 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 In District		(b) Description meeting with campaign consultant, Family Land Heritage in New Braunfels
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$19.73	(b) Date of Charge 10/19/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name R&R Bar-B Que		(b) Payee address; City, State, Zip Code 110 Morgan Mill Road Stephenville, TX 76401
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 meal with constituents
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$40.05	(b) Date of Charge 10/21/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Intuit		(b) Payee address; City, State, Zip Code 2632 Marine Way Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description bookkeeping service subscription fee
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: 10/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$61.25	(b) Date of Charge 11/01/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
7 PAYEE	(a) Payee name HEB Stephenville		(b) Payee address; City, State, Zip Code 2150 W. Washington Street  Stephenville, TX 76401
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) Transportation Equipment And Related Expense		(b) Description car wash for campaign car
(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 \$10.00	(b) Date of Charge 09/21/2025	(c) Date(s) Credit Card Issuer Paid 10/01/2025
PAYEE	(a) Payee name Sundance Square		(b) Payee address; City, State, Zip Code 425 Houston St, Suite 250  Fort Worth, TX 76102
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 In District		(b) Description parking fee
(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 \$85.26	(b) Date of Charge 09/20/2025	(c) Date(s) Credit Card Issuer Paid 10/01/2025
PAYEE	(a) Payee name OnStar		(b) Payee address; City, State, Zip Code PO Box 1027  Warren, MI 48090
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Description Monthly service
(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: 11/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$36.89	(b) Date of Charge 09/21/2025	(c) Date(s) Credit Card Issuer Paid 10/01/2025
7 PAYEE	(a) Payee name Intuit		(b) Payee address; City, State, Zip Code 2632 Marine Way  Mountain View, CA 94043
8 PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description bookkeeping service fee
(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 \$46.52	(b) Date of Charge 09/20/2025	(c) Date(s) Credit Card Issuer Paid 10/01/2025
PAYEE	(a) Payee name The UPS Store		(b) Payee address; City, State, Zip Code 409 W Front St #100  Hutto, TX 78634
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 shipping fee
(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 \$60.00	(b) Date of Charge 09/24/2025	(c) Date(s) Credit Card Issuer Paid 10/01/2025
PAYEE	(a) Payee name HCTRA EZ TAG		(b) Payee address; City, State, Zip Code 3343 East Sam Houston Pkwy S  Pasadena, TX 77505
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 In District		(b) Description toll fees for campaign car
(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: 12/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$175.00	(b) Date of Charge 10/02/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
7 PAYEE	(a) Payee name Sunoco San Antonio		(b) Payee address; City, State, Zip Code 4602 Thousand Oaks Dr San Antonio, TX 78233
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 In District		(b) Description fuel for campaign car
(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 \$1,603.71	(b) Date of Charge 10/02/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Andy's Tire Service		(b) Payee address; City, State, Zip Code 1380 N. Graham St. Stephenville, TX 76401
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Description vehicle maitenance and tires for campaign car
(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 \$30.38	(b) Date of Charge 10/02/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Ol South Pancake House Fort		(b) Payee address; City, State, Zip Code 1509 S. University Dr. Fort Worth, TX 76107
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 meal with constituents
(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: 13/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$61.36	(b) Date of Charge 10/03/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
7 PAYEE	(a) Payee name Nextlink Broadband		(b) Payee address; City, State, Zip Code 2132 Tin Top Road Suite 200 Weatherford, TX 76086
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 internet service provider
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
PAYMENT	(a) Amount Charged \$281.44	(b) Date of Charge 10/04/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Staples		(b) Payee address; City, State, Zip Code 200 Wolf Nursery Road Stephenville, TX 76401
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
PAYMENT	(a) Amount Charged \$29.90	(b) Date of Charge 10/06/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Hilton Houston Post Oak Hotel		(b) Payee address; City, State, Zip Code 2001 Post Oak Blvd Houtson, TX 77056
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 In District		(b) Description meal with campaign staff
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(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: 14/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$25.07	(b) Date of Charge 10/08/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
7 PAYEE	(a) Payee name O'Reilly Auto Parts		(b) Payee address; City, State, Zip Code 2609 West Washington Stephenville, TX 76401
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) Transportation Equipment And Related Expense		(b) Description vehicle maintenance for campaign car
(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 \$132.00	(b) Date of Charge 10/07/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Murphy USA Stephenville		(b) Payee address; City, State, Zip Code 151 N Wolfe Nursery Rd Stephenville, TX 76401
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 In District		(b) Description fuel for campaign car
(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 \$35.94	(b) Date of Charge 10/08/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Round Rock Donuts		(b) Payee address; City, State, Zip Code 106 W Liberty Ave Round Rock, TX 78667
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 donuts for TDA
(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: 15/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$14.99	(b) Date of Charge 10/11/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
7 PAYEE	(a) Payee name MagalInfo TV		(b) Payee address; City, State, Zip Code 235 E. 45th St.  New York, NY 10017
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 subscription fee
	(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 \$4.32	(b) Date of Charge 10/13/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Twitter, Inc.		(b) Payee address; City, State, Zip Code 1355 Market Street Suite 900 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description social media
	(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 \$40.00	(b) Date of Charge 10/13/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Twitter, Inc.		(b) Payee address; City, State, Zip Code 1355 Market Street Suite 900 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description social media
	(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: 16/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$29.42	(b) Date of Charge 10/16/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
7 PAYEE	(a) Payee name Buffet King		(b) Payee address; City, State, Zip Code 5451 N Interstate Hwy 35  Austin, TX 78723
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 meal with constituents
(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 \$49.98	(b) Date of Charge 10/17/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Hacienda Comino Real		(b) Payee address; City, State, Zip Code 16 N Patrick St  Dublin, TX 76446
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 meal with constituents
(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 \$175.00	(b) Date of Charge 10/20/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Allsups Stephenville #249		(b) Payee address; City, State, Zip Code 150 E South Loop  STEPHENVILLE, TX 76401
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 In District		(b) Description fuel for campaign car
(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: 17/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$14.00	(b) Date of Charge 10/19/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
7 PAYEE	(a) Payee name Kwick Kar Lube and Tune		(b) Payee address; City, State, Zip Code 1595 N Graham St  Stephenville, TX 76401
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) Transportation Equipment And Related Expense		(b) Description additive for campaign car
(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 \$1,562.81	(b) Date of Charge 10/23/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Denton County Republican Party		(b) Payee address; City, State, Zip Code PO Box 187  Denton, TX 76202
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Lincoln Reagn Dinner table
(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 \$2.99	(b) Date of Charge 10/25/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Apple, Inc.		(b) Payee address; City, State, Zip Code 1 Infinite Loop  Cupertino, CA 95014
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 for iPhone and iPad
(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: 18/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$127.45	(b) Date of Charge 10/24/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
7 PAYEE	(a) Payee name El Mexicano Grill		(b) Payee address; City, State, Zip Code 114 E Franklin St  Waxahachie, TX 75165
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 meal with TDA staff
	(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 \$134.12	(b) Date of Charge 10/26/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Atkins Seafood		(b) Payee address; City, State, Zip Code 400 W Main St  Waxahachie, TX 75165
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 meal with TDA staff
	(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 \$18.16	(b) Date of Charge 10/26/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Whataburger Venus		(b) Payee address; City, State, Zip Code 101 US-67 UNIT B  Venus, TX 76084
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 meal with campaign staff
	(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: 19/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$66.40	(b) Date of Charge 10/27/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
7 PAYEE	(a) Payee name SP Evolved Chargers		(b) Payee address; City, State, Zip Code 9854 National Boulevard Los Angeles, CA 90034
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 charging bank
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
PAYMENT	(a) Amount Charged \$2.12	(b) Date of Charge 10/28/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Internet storage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
PAYMENT	(a) Amount Charged \$1,850.00	(b) Date of Charge 10/28/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Ag Women Connect		(b) Payee address; City, State, Zip Code 7530 Woodrow Road Wolfforth, TX 79382
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 donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(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 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: 20/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$87.66	(b) Date of Charge 10/28/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
7 PAYEE	(a) Payee name AT&T Store		(b) Payee address; City, State, Zip Code 2811 W. Washington  Stephenville, TX 76401
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 phone services
	(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 \$541.24	(b) Date of Charge 10/28/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name AT&T Store		(b) Payee address; City, State, Zip Code 2811 W. Washington  Stephenville, TX 76401
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 campaign cell phone purchase
	(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 \$199.38	(b) Date of Charge 10/30/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Allsups Stephenville #249		(b) Payee address; City, State, Zip Code 150 E South Loop  STEPHENVILLE, TX 76401
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 In District		(b) Description fuel for campaign car
	(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: 21/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$28.55	(b) Date of Charge 11/02/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
7 PAYEE	(a) Payee name El Corral Supermarket and		(b) Payee address; City, State, Zip Code 1050 E Washington St  Stephenville, TX 76401
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 Meal with constituent
			(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 \$61.39	(b) Date of Charge 11/03/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
PAYEE	(a) Payee name Nextlink Broadband		(b) Payee address; City, State, Zip Code 2132 Tin Top Road Suite 200 Weatherford, TX 76086
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 internet service provider
			(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 \$323.40	(b) Date of Charge 11/04/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
PAYEE	(a) Payee name Kwick Kar Lube and Tune		(b) Payee address; City, State, Zip Code 1595 N Graham St  Stephenville, TX 76401
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Description oil change and tune for campaign car
			(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: 22/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$175.00	(b) Date of Charge 11/04/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
7 PAYEE	(a) Payee name Murphy USA Stephenville		(b) Payee address; City, State, Zip Code 151 N Wolfe Nursery Rd Stephenville, TX 76401
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 In District		(b) Description fuel for campaign car
(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 \$125.00	(b) Date of Charge 10/07/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Jackson's Detailing and Truck		(b) Payee address; City, State, Zip Code 3030 Northwest Loop Stephenville, TX 76401
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Description detail service for campaign car
(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 \$52.17	(b) Date of Charge 10/16/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Sunoco Lampasas		(b) Payee address; City, State, Zip Code 801 N Key Avenue Lampasas, TX 76550
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 In District		(b) Description fuel for campaign car
(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: 23/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$12.24	(b) Date of Charge 10/18/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
7 PAYEE	(a) Payee name Overton Hotel Lubbock		(b) Payee address; City, State, Zip Code 2322 Mac Davis Ln  Lubbock, TX 79401
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 meal with campaign staff
(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 \$1,001.18	(b) Date of Charge 09/22/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Caron, Leslie		(b) Payee address; City, State, Zip Code 1914 West Gray #106  Houston, TX 77019
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description commission
(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 \$16.70	(b) Date of Charge 10/20/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Allsups Stephenville #249		(b) Payee address; City, State, Zip Code 150 E South Loop  STEPHENVILLE, TX 76401
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 In District		(b) Description fuel for campaign car
(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: 24/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$85.26	(b) Date of Charge 10/20/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
7 PAYEE	(a) Payee name OnStar		(b) Payee address; City, State, Zip Code PO Box 1027  Warren, MI 48090
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) Transportation Equipment And Related Expense		(b) Description monthly service
(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 \$896.26	(b) Date of Charge 10/22/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Cobratec Knives		(b) Payee address; City, State, Zip Code 411 W. Morgan  Meridian, TX 76665
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 auction items
(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 \$10.83	(b) Date of Charge 10/24/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name PCA Dallas Metro		(b) Payee address; City, State, Zip Code 1310 Elm Street  Dallas, TX 75223
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 In District		(b) Description parking fee
(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: 25/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$129.52	(b) Date of Charge 10/28/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
7 PAYEE	(a) Payee name Pappadeaux Seafood FW		(b) Payee address; City, State, Zip Code 2708 West Freeway  Fort Worth, TX 76102
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 meal with constituent
(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 \$15.00	(b) Date of Charge 10/28/2025	(c) Date(s) Credit Card Issuer Paid 10/31/2025
PAYEE	(a) Payee name Canva		(b) Payee address; City, State, Zip Code 3212 E. Caesar St Bldg 1, Ste 1300 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) Office Overhead/Rental Expense		(b) Description design program subscription
(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 \$25.58	(b) Date of Charge 11/01/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 Amphitheatre Pkwy  Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description internet storage
(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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 26/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$253.87	(b) Date of Charge 11/05/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
7 PAYEE	(a) Payee name SiriusXM		(b) Payee address; City, State, Zip Code 8650 S Freeport Pkwy  Irving, TX 75063
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) Transportation Equipment And Related Expense		(b) Description subscription fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
PAYMENT	(a) Amount Charged \$55.17	(b) Date of Charge 11/01/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
PAYEE	(a) Payee name Rex's Bar and Grill		(b) Payee address; City, State, Zip Code 1501 S University Dr  Fort Worth, TX 76107
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 meal with campaign staff
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
PAYMENT	(a) Amount Charged \$9.96	(b) Date of Charge 11/02/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
PAYEE	(a) Payee name The Epoch Times		(b) Payee address; City, State, Zip Code 229 West 28th Street, Floor 6  New York, NY 10001
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 subscription service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(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 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: 27/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$6.50	(b) Date of Charge 11/21/2025	(c) Date(s) Credit Card Issuer Paid 11/30/2025
7 PAYEE	(a) Payee name The Driskill		(b) Payee address; City, State, Zip Code 604 Brazos 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 Coffee with constituents
(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 \$49.22	(b) Date of Charge 11/21/2025	(c) Date(s) Credit Card Issuer Paid 11/30/2025
PAYEE	(a) Payee name Ciscos Bakery & Restaurant		(b) Payee address; City, State, Zip Code 1511 E. 6th 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 meal with constituents
(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 \$415.08	(b) Date of Charge 11/22/2025	(c) Date(s) Credit Card Issuer Paid 11/30/2025
PAYEE	(a) Payee name Residence Inn Austin Downtown		(b) Payee address; City, State, Zip Code 300 E 4th 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) Travel In District		(b) Description meeting with campaign team, file for re-election
(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: 28/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$21.36	(b) Date of Charge 11/25/2025	(c) Date(s) Credit Card Issuer Paid 11/30/2025
7 PAYEE	(a) Payee name Apple, Inc.		(b) Payee address; City, State, Zip Code 1 Infinite Loop Cupertino, CA 95014
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 for iPhone and iPad
(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 \$2.99	(b) Date of Charge 11/25/2025	(c) Date(s) Credit Card Issuer Paid 11/30/2025
PAYEE	(a) Payee name Apple, Inc.		(b) Payee address; City, State, Zip Code 1 Infinite Loop Cupertino, CA 95014
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 for iPhone and iPad
(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 \$15.00	(b) Date of Charge 11/28/2025	(c) Date(s) Credit Card Issuer Paid 11/30/2025
PAYEE	(a) Payee name Canva		(b) Payee address; City, State, Zip Code 3212 E. Caesar St Bldg 1, Ste 1300 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) Office Overhead/Rental Expense		(b) Description design program subscription
(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: 29/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$325.00	(b) Date of Charge 12/03/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
7 PAYEE	(a) Payee name legislative solutions		(b) Payee address; City, State, Zip Code 807 Brazos St Ste 714 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) Consulting Expense		(b) Description consulting fee
(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 \$23.70	(b) Date of Charge 11/30/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
PAYEE	(a) Payee name Pack and Mail Plus		(b) Payee address; City, State, Zip Code 2792 W. Washington St. Stephenville, TX 76401
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 shipping
(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 \$37.80	(b) Date of Charge 12/02/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
PAYEE	(a) Payee name ParkWhiz		(b) Payee address; City, State, Zip Code 117 W 4th 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) Travel In District		(b) Description parking fee
(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: 30/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$200.37	(b) Date of Charge 12/02/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
7 PAYEE	(a) Payee name Cast Iron		(b) Payee address; City, State, Zip Code 1300 Houston S  Fort Worth, TX 76102
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 meal with constituents
(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 \$61.39	(b) Date of Charge 12/03/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
PAYEE	(a) Payee name Nextlink Broadband		(b) Payee address; City, State, Zip Code 2132 Tin Top Road Suite 200 Weatherford, TX 76086
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 Internet service provider
(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 \$21.02	(b) Date of Charge 12/07/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
PAYEE	(a) Payee name IONOS Inc.		(b) Payee address; City, State, Zip Code 100 North 18th Street Suite 400 Philadelphia, PA 19103
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 hosting
(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: 31/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$35.05	(b) Date of Charge 12/07/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
7 PAYEE	(a) Payee name Sunoco Lampasas		(b) Payee address; City, State, Zip Code 801 N Key Avenue Lampasas, TX 76550
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 In District		(b) Description fuel for campaign car
			(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 \$15.96	(b) Date of Charge 12/08/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
PAYEE	(a) Payee name SAEXP News		(b) Payee address; City, State, Zip Code 301 Avenue E 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) Office Overhead/Rental Expense		(b) Description subscription fee
			(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 \$637.67	(b) Date of Charge 12/09/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
PAYEE	(a) Payee name MailChimp		(b) Payee address; City, State, Zip Code 405 N. Angier Avenue NE Atlanta, GA 30312
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description email blasts service
			(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: 32/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$143.27	(b) Date of Charge 12/10/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
7 PAYEE	(a) Payee name Pathway		(b) Payee address; City, State, Zip Code PO Box 1298  Joshua, TX 76058
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 internet service provider with a phone line
(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 \$243.85	(b) Date of Charge 12/09/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
PAYEE	(a) Payee name Residence Inn Austin Downtown		(b) Payee address; City, State, Zip Code 300 E 4th 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) Travel In District		(b) Description meeting with campaign graphic designer
(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 \$14.99	(b) Date of Charge 12/11/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
PAYEE	(a) Payee name MagalInfo TV		(b) Payee address; City, State, Zip Code 235 E. 45th St.  New York, NY 10017
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 subscription fee
(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: 33/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$41.44	(b) Date of Charge 11/06/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
7 PAYEE	(a) Payee name Jasper's Cafe		(b) Payee address; City, State, Zip Code 26512 US-377  Bluff Dale, TX 76433
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 meal with constituents
(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 \$6,262.50	(b) Date of Charge 11/07/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
PAYEE	(a) Payee name Texas First Politics, llc		(b) Payee address; City, State, Zip Code 2824 Wooded Acres Drive  Waco, TX 76710
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 services
(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 \$27.38	(b) Date of Charge 11/07/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
PAYEE	(a) Payee name Jefe's Bar and Grill		(b) Payee address; City, State, Zip Code 102 W Ikard S  Henrietta, TX 76365
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 meal with campaign staff
(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: 34/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$13.87	(b) Date of Charge 11/08/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
7 PAYEE	(a) Payee name Apple, Inc.		(b) Payee address; City, State, Zip Code 1 Infinite Loop Cupertino, CA 95014
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 for iPhone and iPad
(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 \$14.99	(b) Date of Charge 11/11/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
PAYEE	(a) Payee name Magainfo TV		(b) Payee address; City, State, Zip Code 235 E. 45th St. New York, NY 10017
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 subscription service
(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 \$40.00	(b) Date of Charge 11/13/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
PAYEE	(a) Payee name Twitter, Inc.		(b) Payee address; City, State, Zip Code 1355 Market Street Suite 900 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description social media
(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: 35/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$85.26	(b) Date of Charge 11/20/2025	(c) Date(s) Credit Card Issuer Paid 11/30/2025
7 PAYEE	(a) Payee name OnStar		(b) Payee address; City, State, Zip Code PO Box 1027  Warren, MI 48090
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) Transportation Equipment And Related Expense		(b) Description monthly service
(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 \$87.11	(b) Date of Charge 11/20/2025	(c) Date(s) Credit Card Issuer Paid 11/30/2025
PAYEE	(a) Payee name Ciscos Bakery & Restaurant		(b) Payee address; City, State, Zip Code 1511 E. 6th 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 meal with campaign staff
(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 \$3.40	(b) Date of Charge 12/01/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
PAYEE	(a) Payee name SiriusXM		(b) Payee address; City, State, Zip Code 8650 S Freeport Pkwy  Irving, TX 75063
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Description subscription fee
(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: 36/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$25.58	(b) Date of Charge 12/01/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
7 PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description internet storage fee
(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 \$27.56	(b) Date of Charge 12/16/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
PAYEE	(a) Payee name Buc-ee's Waller TX		(b) Payee address; City, State, Zip Code 40900 US Highway 290 Waller, TX 77484
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 In District		(b) Description fuel for campaign car
(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 \$622.62	(b) Date of Charge 12/19/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
PAYEE	(a) Payee name Residence Inn Austin Downtown		(b) Payee address; City, State, Zip Code 300 E 4th 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) Travel In District		(b) Description Campaign meetings
(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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 37/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$108.84	(b) Date of Charge 12/20/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
7 PAYEE	(a) Payee name Buc-ee's Waller TX		(b) Payee address; City, State, Zip Code 40900 US Highway 290  Waller, TX 77484
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 In District		(b) Description fuel for campaign car
			(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 \$564.07	(b) Date of Charge 12/21/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
PAYEE	(a) Payee name Los Vaqueros		(b) Payee address; City, State, Zip Code 804 W Center St,  Kyle, TX 78640
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meal with constituents
			(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 \$40.05	(b) Date of Charge 12/21/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
PAYEE	(a) Payee name Intuit		(b) Payee address; City, State, Zip Code 2632 Marine Way  Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description bookkeeping service subscription
			(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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 38/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$2.99	(b) Date of Charge 12/25/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
7 PAYEE	(a) Payee name Apple, Inc.		(b) Payee address; City, State, Zip Code 1 Infinite Loop Cupertino, CA 95014
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 for iPhone and iPad
			(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 \$58.30	(b) Date of Charge 12/26/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
PAYEE	(a) Payee name FedEx		(b) Payee address; City, State, Zip Code PO Box 660481 Dallas, TX 75265
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 shipping
			(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 \$81.00	(b) Date of Charge 11/08/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
PAYEE	(a) Payee name AT&T Store		(b) Payee address; City, State, Zip Code 2811 W. Washington Stephenville, TX 76401
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 cell phone service
			(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: 39/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$356.05	(b) Date of Charge 11/08/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
7 PAYEE	(a) Payee name IONOS Inc.		(b) Payee address; City, State, Zip Code 100 North 18th Street Suite 400 Philadelphia, PA 19103
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 hosting
			(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 \$637.67	(b) Date of Charge 11/09/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
PAYEE	(a) Payee name MailChimp		(b) Payee address; City, State, Zip Code 405 N. Angier Avenue NE Atlanta, GA 30312
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description email blasts service
			(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 \$143.27	(b) Date of Charge 11/09/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
PAYEE	(a) Payee name Pathway		(b) Payee address; City, State, Zip Code PO Box 1298 Joshua, TX 76058
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 internet service provider and phone line
			(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: 40/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$11.96	(b) Date of Charge 11/10/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
7 PAYEE	(a) Payee name SAEXP News		(b) Payee address; City, State, Zip Code 301 Avenue E  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) Office Overhead/Rental Expense		(b) Description subscription fee
(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 \$4.32	(b) Date of Charge 11/13/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
PAYEE	(a) Payee name Twitter, Inc.		(b) Payee address; City, State, Zip Code 1355 Market Street Suite 900 San Francisco, CA 94103
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description social media
(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 \$198.63	(b) Date of Charge 11/12/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
PAYEE	(a) Payee name Murphy USA Stephenville		(b) Payee address; City, State, Zip Code 151 N Wolfe Nursery Rd  Stephenville, TX 76401
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 In District		(b) Description fuel for campaign car
(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: 41/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$14.00	(b) Date of Charge 11/12/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
7 PAYEE	(a) Payee name Kwick Kar Lube and Tune		(b) Payee address; City, State, Zip Code 1595 N Graham St  Stephenville, TX 76401
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) Transportation Equipment And Related Expense		(b) Description additive for campaign car
(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 \$22.39	(b) Date of Charge 11/13/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
PAYEE	(a) Payee name Doc's Sports Grill		(b) Payee address; City, State, Zip Code 220 N Mason St  Bowie, TX 76230
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 meal with campaign staff
(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 \$146.14	(b) Date of Charge 11/20/2025	(c) Date(s) Credit Card Issuer Paid 11/30/2025
PAYEE	(a) Payee name AT&T Store		(b) Payee address; City, State, Zip Code 2811 W. Washington  Stephenville, TX 76401
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 campaign cell phone service
(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: 42/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$175.00	(b) Date of Charge 11/20/2025	(c) Date(s) Credit Card Issuer Paid 11/30/2025
7 PAYEE	(a) Payee name Circle K Lampasas		(b) Payee address; City, State, Zip Code 207 N Key Ave Lampasas, TX 76550
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 In District		(b) Description fuel for campaign car
(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 \$50.00	(b) Date of Charge 11/22/2025	(c) Date(s) Credit Card Issuer Paid 11/30/2025
PAYEE	(a) Payee name Goode Company BBQ Houston		(b) Payee address; City, State, Zip Code 8911 Katy Freeway Houston, TX 77024
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 meal with campaign staff
(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 \$40.05	(b) Date of Charge 11/21/2025	(c) Date(s) Credit Card Issuer Paid 11/30/2025
PAYEE	(a) Payee name Intuit		(b) Payee address; City, State, Zip Code 2632 Marine Way Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description bookkeeping services subscription
(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: 43/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$63.99	(b) Date of Charge 11/22/2025	(c) Date(s) Credit Card Issuer Paid 11/30/2025
7 PAYEE	(a) Payee name Goode Company BBQ Houston		(b) Payee address; City, State, Zip Code 8911 Katy Freeway  Houston, TX 77024
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 meal with constituents
	(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 \$22.02	(b) Date of Charge 11/26/2025	(c) Date(s) Credit Card Issuer Paid 11/30/2025
PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 Amphitheatre Pkwy  Mountain View, CA 94043
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description internet storage
	(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 \$22.02	(b) Date of Charge 11/26/2025	(c) Date(s) Credit Card Issuer Paid 11/30/2025
PAYEE	(a) Payee name Amazon		(b) Payee address; City, State, Zip Code PO Box 81226  Seattle, WA 98108
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 supplies
	(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: 44/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$2.12	(b) Date of Charge 11/28/2025	(c) Date(s) Credit Card Issuer Paid 11/30/2025
7 PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description internet storage
(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 \$51.41	(b) Date of Charge 11/30/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
PAYEE	(a) Payee name Greer's Ranch Cafe		(b) Payee address; City, State, Zip Code 190 West College Street Stephenville, TX 76401
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 meal with constituent
(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 \$9.96	(b) Date of Charge 11/30/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
PAYEE	(a) Payee name The Epoch Times		(b) Payee address; City, State, Zip Code 229 West 28th Street, Floor 6 New York, NY 10001
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 subscription fee
(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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 45/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$61.95	(b) Date of Charge 12/03/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
7 PAYEE	(a) Payee name Wicked Butcher		(b) Payee address; City, State, Zip Code 512 Main St Fort Worth, TX 76102
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description meal with constituents
	(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 \$52.66	(b) Date of Charge 12/05/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
PAYEE	(a) Payee name SiriusXM		(b) Payee address; City, State, Zip Code 8650 S Freeport Pkwy Irving, TX 75063
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Description subscription service
	(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 \$52.08	(b) Date of Charge 12/05/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
PAYEE	(a) Payee name Purple Goat		(b) Payee address; City, State, Zip Code 2025 E. Washington St. Stephenville, TX 76401
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description meeting with congressional candidate
	(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: 46/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$175.00	(b) Date of Charge 12/06/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
7 PAYEE	(a) Payee name Love's Weatherford		(b) Payee address; City, State, Zip Code 1203 South Old Highway 81  Weatherford, TX 76086
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 In District		(b) Description fuel for campaign car
			(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 \$29.81	(b) Date of Charge 12/11/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
PAYEE	(a) Payee name Pappadeaux Pharr		(b) Payee address; City, State, Zip Code 1610 W Expy 83  Pharr, TX 78577
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 meal with campaign staff
			(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 \$175.00	(b) Date of Charge 12/13/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
PAYEE	(a) Payee name Texaco Boyd		(b) Payee address; City, State, Zip Code 217 E Rock Island Ave  Boyd, TX 76023
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 In District		(b) Description fuel for campaign car
			(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: 47/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$140.00	(b) Date of Charge 12/11/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
7 PAYEE	(a) Payee name Pecans by Karen		(b) Payee address; City, State, Zip Code 1104 Peregrine Dr  Friendswood, TX 77546
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) Gift/Awards/Memorials Expense		(b) Description TDA exec staff Christmas gift
(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 \$103.90	(b) Date of Charge 12/11/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
PAYEE	(a) Payee name Ciscos Bakery & Restaurant		(b) Payee address; City, State, Zip Code 1511 E. 6th 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 meal with campaign staff
(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 \$14.60	(b) Date of Charge 12/14/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
PAYEE	(a) Payee name Amazon		(b) Payee address; City, State, Zip Code PO Box 81226  Seattle, WA 98108
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 Christmas gift for TDA exec staff
(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: 48/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$35.68	(b) Date of Charge 12/14/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
7 PAYEE	(a) Payee name Mary's Cafe		(b) Payee address; City, State, Zip Code 119 Grant Avenue Strawn, TX 78475
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 meal with constituents
(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 \$136.40	(b) Date of Charge 12/15/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
PAYEE	(a) Payee name Kwick Kar Lube and Tune		(b) Payee address; City, State, Zip Code 1595 N Graham St Stephenville, TX 76401
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Description service for campaign car
(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 \$41.13	(b) Date of Charge 12/16/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
PAYEE	(a) Payee name Ciscos Bakery & Restaurant		(b) Payee address; City, State, Zip Code 1511 E. 6th 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 meal with campaign staff
(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: 49/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$59.90	(b) Date of Charge 12/17/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
7 PAYEE	(a) Payee name Round Rock Donuts		(b) Payee address; City, State, Zip Code 106 W Liberty Ave  Round Rock, TX 78667
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 donuts for TDA staff
(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 \$44.32	(b) Date of Charge 12/13/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
PAYEE	(a) Payee name Twitter, Inc.		(b) Payee address; City, State, Zip Code 1355 Market Street Suite 900 San Francisco, CA 94103
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description social media
(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 \$207.54	(b) Date of Charge 12/11/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
PAYEE	(a) Payee name Courtyard Austin		(b) Payee address; City, State, Zip Code 300 East 4th Street  Austin, TX 78701
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description meeting with campaign staff
(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: 50/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$4,612.50	(b) Date of Charge 12/12/2025	(c) Date(s) Credit Card Issuer Paid 12/15/2025
7 PAYEE	(a) Payee name Texas First Politics, llc		(b) Payee address; City, State, Zip Code 2824 Wooded Acres Drive  Waco, TX 76710
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 services
	(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 \$24.62	(b) Date of Charge 12/15/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
PAYEE	(a) Payee name Chili's Grill & Bar Granbury		(b) Payee address; City, State, Zip Code 1000 E Hwy 377  Granbury, TX 76048
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 meal with campaign staff
	(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 \$7.22	(b) Date of Charge 12/15/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
PAYEE	(a) Payee name Walmart		(b) Payee address; City, State, Zip Code 4700 E Palm Valley Road  Round Rock, TX 78665
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 Christmas cards for TDA staff
	(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: 51/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$10.90	(b) Date of Charge 12/15/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
7 PAYEE	(a) Payee name USPS Hutto		(b) Payee address; City, State, Zip Code 388 Exchange Blvd  Hutto, TX 78634-9998
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 shipping
	(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 \$1,000.00	(b) Date of Charge 12/16/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
PAYEE	(a) Payee name Houston Livestock Show &		(b) Payee address; City, State, Zip Code PO Box 20070  Houston, TX 77225
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description advertising expense
	(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 \$311.48	(b) Date of Charge 12/17/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
PAYEE	(a) Payee name Southwest Airlines		(b) Payee address; City, State, Zip Code 2702 Love Field Dr.  Dallas, TX 75235
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description airfare to Dallas
	(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: 52/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$34.00	(b) Date of Charge 12/18/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
7 PAYEE	(a) Payee name Southwest Airlines		(b) Payee address; City, State, Zip Code 2702 Love Field Dr.  Dallas, TX 75235
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 In District		(b) Description Early bird check in  (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 \$13.48	(b) Date of Charge 12/18/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
PAYEE	(a) Payee name Exxon		(b) Payee address; City, State, Zip Code 1690 N Graham Street  Stehenville, TX 76401
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Description additive for campaign car  (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 \$85.26	(b) Date of Charge 12/20/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
PAYEE	(a) Payee name OnStar		(b) Payee address; City, State, Zip Code PO Box 1027  Warren, MI 48090
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Description Monthly service  (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: 53/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$267.08	(b) Date of Charge 12/20/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
7 PAYEE	(a) Payee name Residence Inn Austin Downtown		(b) Payee address; City, State, Zip Code 300 E 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) Travel In District		(b) Description campaign meetings
			(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 \$42.69	(b) Date of Charge 12/21/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
PAYEE	(a) Payee name Apple, Inc.		(b) Payee address; City, State, Zip Code 1 Infinite Loop Cupertino, CA 95014
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 for iPhone and iPad
			(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 \$15.00	(b) Date of Charge 12/28/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
PAYEE	(a) Payee name Canva		(b) Payee address; City, State, Zip Code 3212 E. Caesar St Bldg 1, Ste 1300 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) Office Overhead/Rental Expense		(b) Description design program subscription
			(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: 54/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$9.96	(b) Date of Charge 12/28/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
7 PAYEE	(a) Payee name The Epoch Times		(b) Payee address; City, State, Zip Code 229 West 28th Street, Floor 6  New York, NY 10001
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 subscription service
	(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 \$126.59	(b) Date of Charge 12/28/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
PAYEE	(a) Payee name Cotton Patch Cafe		(b) Payee address; City, State, Zip Code 2869 W Washington St  Stephenville, TX 76041
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 meal with constituents
	(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 \$21.68	(b) Date of Charge 12/31/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
PAYEE	(a) Payee name Staples		(b) Payee address; City, State, Zip Code 200 Wolf Nursery Road  Stephenville, TX 76401
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 supplies
	(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: 55/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$175.00	(b) Date of Charge 12/16/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
7 PAYEE	(a) Payee name Buc-ee's Waller TX		(b) Payee address; City, State, Zip Code 40900 US Highway 290  Waller, TX 77484
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 In District		(b) Description fuel for campaign car
			(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 \$45.60	(b) Date of Charge 12/18/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
PAYEE	(a) Payee name Arturo's Underground Cafe		(b) Payee address; City, State, Zip Code 314 W 17th 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 meal with campaign staff
			(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 \$79.53	(b) Date of Charge 12/19/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
PAYEE	(a) Payee name Ciscos Bakery & Restaurant		(b) Payee address; City, State, Zip Code 1511 E. 6th 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 meal with constituents
			(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: 56/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$2.12	(b) Date of Charge 12/28/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
7 PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description internet storage
(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 \$43.38	(b) Date of Charge 12/30/2025	(c) Date(s) Credit Card Issuer Paid 12/31/2025
PAYEE	(a) Payee name Peacocks Restaurant		(b) Payee address; City, State, Zip Code 1615 Loop 377 Stephenville, TX 76401
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 meal with campaign staff
(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 \$25.58	(b) Date of Charge 07/01/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Internet storage
(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: 57/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$100.00	(b) Date of Charge 07/01/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
7 PAYEE	(a) Payee name United Airlines		(b) Payee address; City, State, Zip Code 17431 John F Kennedy Blvd  Houston, TX 77032
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 Baggage fees
(c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$16.11	(b) Date of Charge 07/02/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name Chicken Express Stephenville		(b) Payee address; City, State, Zip Code 2850 W Washington St  STEPHENVILLE, TX 76401
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 Meal with constituent
(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 \$192.00	(b) Date of Charge 07/02/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name DWF Airport Parking		(b) Payee address; City, State, Zip Code 2400 Aviation Drive  DFW Airport, TX 75261
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 Airport parking fee
(c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <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: 58/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$22.98	(b) Date of Charge 07/03/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
7 PAYEE	(a) Payee name Modern Market		(b) Payee address; City, State, Zip Code 8500 Pena Blvd Denver, CO 80249
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 Meal with TDA Staff
			(c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$106.74	(b) Date of Charge 07/03/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name Apple, Inc.		(b) Payee address; City, State, Zip Code 1 Infinite Loop Cupertino, CA 95014
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 for iPhone and iPad
			(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 \$61.39	(b) Date of Charge 07/03/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name Nextlink Broadband		(b) Payee address; City, State, Zip Code 2132 Tin Top Road Suite 200 Weatherford, TX 76086
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 Internet service provider
			(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: 59/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$40.00	(b) Date of Charge 07/02/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
7 PAYEE	(a) Payee name United Airlines		(b) Payee address; City, State, Zip Code 17431 John F Kennedy Blvd  Houston, TX 77032
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 Baggage fee
(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 \$175.00	(b) Date of Charge 07/04/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name QT Weatherford		(b) Payee address; City, State, Zip Code 2001 S Bowie Dr.  Weatherford, TX 76086
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 In District		(b) Description Fuel for campaign car
(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 \$28.10	(b) Date of Charge 07/04/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name QT Weatherford		(b) Payee address; City, State, Zip Code 2001 S Bowie Dr.  Weatherford, TX 76086
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 In District		(b) Description fuel for campaign car
(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: 60/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$33.62	(b) Date of Charge 07/04/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
7 PAYEE	(a) Payee name Prairie Star		(b) Payee address; City, State, Zip Code 225 Hill St  Albany, TX 76430
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 meal with constituent
(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 \$24.00	(b) Date of Charge 07/04/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name Trail Drive Management Corp.		(b) Payee address; City, State, Zip Code 1911 Montgomery Street  Fort Worth, TX 76107
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 In District		(b) Description parking fee
(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 \$108.44	(b) Date of Charge 07/06/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name HEB Stephenville		(b) Payee address; City, State, Zip Code 2150 W. Washington Street  Stephenville, TX 76401
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 In District		(b) Description fuel for campaign car
(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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 61/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$12.00	(b) Date of Charge 07/08/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
7 PAYEE	(a) Payee name Kwick Kar Lube and Tune		(b) Payee address; City, State, Zip Code 1595 N Graham St  Stephenville, TX 76401
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) Transportation Equipment And Related Expense		(b) Description campaign car maintenance
			(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 \$3,900.00	(b) Date of Charge 07/08/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name Texas First Politics, llc		(b) Payee address; City, State, Zip Code 2824 Wooded Acres Drive  Waco, TX 76710
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 and social media
			(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 \$303.31	(b) Date of Charge 07/08/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name Holiday Inn Beach Resort		(b) Payee address; City, State, Zip Code 100 Padre Blvd  South Padre, TX 78597
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 In District		(b) Description constituent meetings in Brownsville
			(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: 62/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$637.67	(b) Date of Charge 07/09/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
7 PAYEE	(a) Payee name MailChimp		(b) Payee address; City, State, Zip Code 405 N. Angier Avenue NE  Atlanta, GA 30312
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) Advertising Expense		(b) Description Email blasts service
(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 \$141.96	(b) Date of Charge 07/11/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name Winstop Event		(b) Payee address; City, State, Zip Code 889 S Hwy 281 Suite 10  Event, TX 76525
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 In District		(b) Description fuel for campaign car
(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 \$89.99	(b) Date of Charge 07/11/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name Mamacita's Kerrville		(b) Payee address; City, State, Zip Code 215 Junction Hwy,  Kerrville, TX 78028
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 meal with TDA staff
(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: 63/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$18.18	(b) Date of Charge 07/13/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
7 PAYEE	(a) Payee name Golden Chick Stephenville		(b) Payee address; City, State, Zip Code 1112 West Washington Street  STEPHENVILLE, TX 76401
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 campaign staff meal
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
PAYMENT	(a) Amount Charged \$76.86	(b) Date of Charge 07/13/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name Walmart Stephenville		(b) Payee address; City, State, Zip Code 2765 W Washington St  STEPHENVILLE, TX 76401
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 In District		(b) Description fuel for campaign car
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
PAYMENT	(a) Amount Charged \$9.96	(b) Date of Charge 07/13/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name The Epoch Times		(b) Payee address; City, State, Zip Code 229 West 28th Street, Floor 6  New York, NY 10001
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 subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(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: 64/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$487.48	(b) Date of Charge 07/13/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
7 PAYEE	(a) Payee name American Airlines		(b) Payee address; City, State, Zip Code 4500 Toll Plaza Drive Louisville, KY 40209
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 In District		(b) Description airfare
(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 \$164.14	(b) Date of Charge 07/17/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
PAYEE	(a) Payee name Residence Inn Austin Downtown		(b) Payee address; City, State, Zip Code 300 E 4th 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) Travel In District		(b) Description meeting with campaign consultant
(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 \$2,060.00	(b) Date of Charge 07/17/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
PAYEE	(a) Payee name Caron, Leslie		(b) Payee address; City, State, Zip Code 1914 West Gray #106 Houston, TX 77019
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description commission on donation
(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: 65/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$103.00	(b) Date of Charge 07/09/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
7 PAYEE	(a) Payee name VENMO		(b) Payee address; City, State, Zip Code 95 Morton Street Floor 5 New York, NY 10014
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description transaction fee
	(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 \$103.00	(b) Date of Charge 07/18/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
PAYEE	(a) Payee name VENMO		(b) Payee address; City, State, Zip Code 95 Morton Street Floor 5 New York, NY 10014
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description transaction fee
	(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 \$36.89	(b) Date of Charge 07/21/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
PAYEE	(a) Payee name Intuit		(b) Payee address; City, State, Zip Code 2632 Marine Way  Mountain View, CA 94043
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description bookkeeping software subscription
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
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: 66/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$11.96	(b) Date of Charge 07/21/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
7 PAYEE	(a) Payee name SAEXP News		(b) Payee address; City, State, Zip Code 301 Avenue E  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) Office Overhead/Rental Expense		(b) Description subscription
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought      Office held
PAYMENT	(a) Amount Charged \$316.52	(b) Date of Charge 07/22/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
PAYEE	(a) Payee name Marriott JW Hill Resort		(b) Payee address; City, State, Zip Code 23808 Resort Pkwy  San Antonio, TX 78261
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 meal with constituents
			(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 \$14.74	(b) Date of Charge 07/30/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
PAYEE	(a) Payee name ParkWhiz		(b) Payee address; City, State, Zip Code 117 W 4th 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) Travel In District		(b) Description parking fee
			(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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 67/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$175.00	(b) Date of Charge 08/01/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
7 PAYEE	(a) Payee name Sunoco Lampasas		(b) Payee address; City, State, Zip Code 801 N Key Avenue Lampasas, TX 76550
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District  (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		(b) Description fuel for campaign car  <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 \$175.00	(b) Date of Charge 08/03/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name Buc-ee's Fort Worth		(b) Payee address; City, State, Zip Code 15901 N. Freeway Fort Worth, TX 76177
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District  (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		(b) Description fuel for campaign car  <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 \$61.39	(b) Date of Charge 08/03/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name Nextlink Broadband		(b) Payee address; City, State, Zip Code 2132 Tin Top Road Suite 200 Weatherford, TX 76086
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		(b) Description internet service provider  <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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 68/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$107.00	(b) Date of Charge 08/04/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
7 PAYEE	(a) Payee name Kwick Kar Lube and Tune		(b) Payee address; City, State, Zip Code 1595 N Graham St  Stephenville, TX 76401
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) Transportation Equipment And Related Expense		(b) Description campaign car maintenance
			(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 \$342.28	(b) Date of Charge 08/05/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name SiriusXM		(b) Payee address; City, State, Zip Code 8650 S Freeport Pkwy  Irving, TX 75063
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Description subscription fee
			(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 \$21.02	(b) Date of Charge 08/07/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name IONOS Inc.		(b) Payee address; City, State, Zip Code 100 North 18th Street Suite 400 Philadelphia, PA 19103
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 hosting
			(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: 69/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$10.66	(b) Date of Charge 08/08/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
7 PAYEE	(a) Payee name Apple, Inc.		(b) Payee address; City, State, Zip Code 1 Infinite Loop Cupertino, CA 95014
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 for iphone and ipad
(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 \$25.04	(b) Date of Charge 08/09/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name The Texan Goliad		(b) Payee address; City, State, Zip Code 534 E Pearl St Goliad, TX 77963
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 In District		(b) Description fuel for campaign car
(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 \$46.50	(b) Date of Charge 08/11/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market St. San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description uber fee
(c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 70/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$111.65	(b) Date of Charge 08/10/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
7 PAYEE	(a) Payee name La Quinta Victoria		(b) Payee address; City, State, Zip Code 3107 S Laurent St  Victoria, TX 77901
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District  (b) Description meeting with constituents  (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 \$14.99	(b) Date of Charge 08/11/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name MagalInfo TV		(b) Payee address; City, State, Zip Code 235 E. 45th St.  New York, NY 10017
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description subscription  (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 \$50.00	(b) Date of Charge 08/11/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name United Airlines		(b) Payee address; City, State, Zip Code 17431 John F Kennedy Blvd  Houston, TX 77032
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District  (c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		(b) Description baggage fee
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: 71/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$31.26	(b) Date of Charge 08/13/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
7 PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market St. San Francisco, CA 94103
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 uber fee
(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 \$4.32	(b) Date of Charge 08/13/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name Twitter, Inc.		(b) Payee address; City, State, Zip Code 1355 Market Street Suite 900 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Social media
(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 \$86.80	(b) Date of Charge 08/11/2025	(c) Date(s) Credit Card Issuer Paid 08/11/2025
PAYEE	(a) Payee name Cattlemans Fort Worth		(b) Payee address; City, State, Zip Code 2458 N. Main Fort Worth, TX 76108
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 meal with constituents
(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: 72/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$40.00	(b) Date of Charge 08/11/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
7 PAYEE	(a) Payee name United Airlines		(b) Payee address; City, State, Zip Code 17431 John F Kennedy Blvd  Houston, TX 77032
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 baggage fees
		(c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought      Office held
PAYMENT	(a) Amount Charged \$40.91	(b) Date of Charge 08/13/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market St.  San Francisco, CA 94103
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description uber fee
		(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 \$10.70	(b) Date of Charge 08/13/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name USPS Austin		(b) Payee address; City, State, Zip Code 111 E 17th St  Austin, TX 78701-9997
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 shipping fees
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought      Office held

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 73/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$55.32	(b) Date of Charge 08/15/2025	(c) Date(s) Credit Card Issuer Paid 08/25/2025
7 PAYEE	(a) Payee name Tumble 22		(b) Payee address; City, State, Zip Code 2304 Lake Austin Blvd  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) Food/Beverage Expense		(b) Description meal with TDA staff
(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 \$175.00	(b) Date of Charge 08/19/2025	(c) Date(s) Credit Card Issuer Paid 08/25/2025
PAYEE	(a) Payee name Circle K Lampasas		(b) Payee address; City, State, Zip Code 207 N Key Ave  Lampasas, TX 76550
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 In District		(b) Description fuel for campaign car
(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 \$19.29	(b) Date of Charge 07/04/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name Chevron San Antonio		(b) Payee address; City, State, Zip Code 2899 Thousand Oaks Dr.  San Antonio, TX 78232
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description fuel for campaign car
(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: 74/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$45.83	(b) Date of Charge 07/08/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
7 PAYEE	(a) Payee name Caleb Garcia Staghorn		(b) Payee address; City, State, Zip Code 1019 N 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 with TDA staff
(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 \$40.00	(b) Date of Charge 07/13/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name Twitter, Inc.		(b) Payee address; City, State, Zip Code 1355 Market Street Suite 900 San Francisco, CA 94103
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Social Media
(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 \$291.18	(b) Date of Charge 07/23/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
PAYEE	(a) Payee name Southwest Airlines		(b) Payee address; City, State, Zip Code 2702 Love Field Dr.  Dallas, TX 75235
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description airfare
(c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <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: 75/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$12.00	(b) Date of Charge 07/24/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
7 PAYEE	(a) Payee name Kwick Kar Lube and Tune		(b) Payee address; City, State, Zip Code 1595 N Graham St  Stephenville, TX 76401
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) Transportation Equipment And Related Expense		(b) Description campaign car maintenance
(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 \$2.99	(b) Date of Charge 07/25/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
PAYEE	(a) Payee name Apple, Inc.		(b) Payee address; City, State, Zip Code 1 Infinite Loop  Cupertino, CA 95014
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 for iphone and ipad
(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 \$26.33	(b) Date of Charge 07/25/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
PAYEE	(a) Payee name SiriusXM		(b) Payee address; City, State, Zip Code 8650 S Freeport Pkwy  Irving, TX 75063
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Description subscription
(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: 76/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$88.65	(b) Date of Charge 07/28/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
7 PAYEE	(a) Payee name Azteca Mexican Grill		(b) Payee address; City, State, Zip Code 3024 W Washington  Stephenville, TX 76401
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 meal with campaign staff
	(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 \$2.12	(b) Date of Charge 07/28/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 Amphitheatre Pkwy  Mountain View, CA 94043
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description internet storage
	(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 \$450.00	(b) Date of Charge 07/29/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
PAYEE	(a) Payee name Collin County Conservative		(b) Payee address; City, State, Zip Code 5600 Hampshire Drive  McKinney, TX 75070
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description campaign table
	(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: 77/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$134.25	(b) Date of Charge 08/09/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
7 PAYEE	(a) Payee name Holiday Inn Express		(b) Payee address; City, State, Zip Code 200 Holiday Ln  Nacogdoches, TX 75964
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 In District		(b) Description Lodging
			(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 \$637.67	(b) Date of Charge 08/09/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name MailChimp		(b) Payee address; City, State, Zip Code 405 N. Angier Avenue NE  Atlanta, GA 30312
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description email blasts services
			(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 \$143.27	(b) Date of Charge 08/10/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name Pathway		(b) Payee address; City, State, Zip Code PO Box 1298  Joshua, TX 76058
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 internet service provider with a phone line
			(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: 78/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$417.45	(b) Date of Charge 08/11/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
7 PAYEE	(a) Payee name Hilton Houston Post Oak Hotel		(b) Payee address; City, State, Zip Code 2001 Post Oak Blvd  Houtson, TX 77056
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 In District		(b) Description Lodging
			(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 \$9.96	(b) Date of Charge 08/10/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name The Epoch Times		(b) Payee address; City, State, Zip Code 229 West 28th Street, Floor 6  New York, NY 10001
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 subscription
			(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 \$21.95	(b) Date of Charge 08/10/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name Austin Airport F&B		(b) Payee address; City, State, Zip Code 3600 Presidential Blvd  Austin, TX 78719
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 meal with campaign staff
			(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: 79/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$80.00	(b) Date of Charge 08/10/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
7 PAYEE	(a) Payee name Southwest Airlines		(b) Payee address; City, State, Zip Code 2702 Love Field Dr.  Dallas, TX 75235
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 baggage fee
		(c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought      Office held
PAYMENT	(a) Amount Charged \$28.03	(b) Date of Charge 08/12/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market St.  San Francisco, CA 94103
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Uber fees
		(c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought      Office held
PAYMENT	(a) Amount Charged \$16.47	(b) Date of Charge 08/13/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market St.  San Francisco, CA 94103
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description uber fee
		(c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <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: 80/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$334.72	(b) Date of Charge 08/15/2025	(c) Date(s) Credit Card Issuer Paid 08/25/2025
7 PAYEE	(a) Payee name Residence Inn Austin Downtown		(b) Payee address; City, State, Zip Code 300 E 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) Travel In District		(b) Description meeting with constituents
			(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 \$175.00	(b) Date of Charge 08/15/2025	(c) Date(s) Credit Card Issuer Paid 08/25/2025
PAYEE	(a) Payee name Circle K Lampasas		(b) Payee address; City, State, Zip Code 207 N Key Ave Lampasas, TX 76550
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 In District		(b) Description fuel for campaign car
			(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 \$70.00	(b) Date of Charge 08/17/2025	(c) Date(s) Credit Card Issuer Paid 08/25/2025
PAYEE	(a) Payee name Must Read		(b) Payee address; City, State, Zip Code 807 Brazos Street Suite 202 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 subscription
			(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: 81/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$33.75	(b) Date of Charge 08/17/2025	(c) Date(s) Credit Card Issuer Paid 08/25/2025
7 PAYEE	(a) Payee name The Junction on Route 36		(b) Payee address; City, State, Zip Code 1216 Highway 36 N. Gatesville, TX 76528
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 meal with constituent
(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 \$14.00	(b) Date of Charge 08/17/2025	(c) Date(s) Credit Card Issuer Paid 08/25/2025
PAYEE	(a) Payee name Kwick Kar Lube and Tune		(b) Payee address; City, State, Zip Code 1595 N Graham St Stephenville, TX 76401
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Description campaign car maintenance
(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 \$21.02	(b) Date of Charge 07/07/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name IONOS Inc.		(b) Payee address; City, State, Zip Code 100 North 18th Street Suite 400 Philadelphia, PA 19103
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 hosting
(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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 82/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$10.66	(b) Date of Charge 07/07/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
7 PAYEE	(a) Payee name Apple, Inc.		(b) Payee address; City, State, Zip Code 1 Infinite Loop Cupertino, CA 95014
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 for iPhone and iPad
	(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 \$40.85	(b) Date of Charge 07/09/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name Ciscos Bakery & Restaurant		(b) Payee address; City, State, Zip Code 1511 E. 6th 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 with TDA staff
	(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 \$143.27	(b) Date of Charge 07/10/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name Pathway		(b) Payee address; City, State, Zip Code PO Box 1298 Joshua, TX 76058
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 internet service provider with a phone line
	(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: 83/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$23.00	(b) Date of Charge 07/09/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
7 PAYEE	(a) Payee name Holiday Inn Beach Resort		(b) Payee address; City, State, Zip Code 100 Padre Blvd  South Padre, 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 meal with TDA staff
			(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 \$4.32	(b) Date of Charge 07/13/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name Twitter, Inc.		(b) Payee address; City, State, Zip Code 1355 Market Street Suite 900 San Francisco, CA 94103
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description social media
			(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 \$62.58	(b) Date of Charge 07/11/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name Marriott San Antonio		(b) Payee address; City, State, Zip Code 889 E Market S  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 In District		(b) Description parking fee
			(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: 84/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$322.52	(b) Date of Charge 07/10/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
7 PAYEE	(a) Payee name Hilton Houston Post Oka Hotel		(b) Payee address; City, State, Zip Code 2001 Post Oak Blvd  Houtson, TX 77056
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 In District		(b) Description meeting with constituents
			(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 \$14.99	(b) Date of Charge 07/10/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name MagalInfo TV		(b) Payee address; City, State, Zip Code 235 E. 45th St.  New york, NY 10017
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 Subscription
			(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 \$27.64	(b) Date of Charge 07/15/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
PAYEE	(a) Payee name Allianz Travel Insurance		(b) Payee address; City, State, Zip Code 9950 Mayland Drive  Richmond, VA 23233
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 In District		(b) Description travel insurance
			(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: 85/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$54.97	(b) Date of Charge 07/15/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
7 PAYEE	(a) Payee name Mary's Cafe		(b) Payee address; City, State, Zip Code 119 Grant Avenue Strawn, TX 78475
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 meal with TDA Staff
(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 \$86.87	(b) Date of Charge 07/18/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
PAYEE	(a) Payee name Los Asados McAllen		(b) Payee address; City, State, Zip Code 620 S. Ware Road McAllen, TX 78501
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 meal with TDA Staff
(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 \$2,060.00	(b) Date of Charge 07/08/2025	(c) Date(s) Credit Card Issuer Paid 07/15/2025
PAYEE	(a) Payee name Caron, Leslie		(b) Payee address; City, State, Zip Code 1914 West Gray #106 Houston, TX 77019
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description retainer
(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: 86/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$20.73	(b) Date of Charge 07/20/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
7 PAYEE	(a) Payee name Visa Marriott Credit Card		(b) Payee address; City, State, Zip Code PO Box 94014  Palatine, IL 60094
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 cash advance interest charge
			(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 \$2.00	(b) Date of Charge 07/18/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
PAYEE	(a) Payee name DFW Airport Parking		(b) Payee address; City, State, Zip Code 2400 Aviation Drive North  Dallas, TX 75261
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 In District		(b) Description parking fee
			(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 \$85.26	(b) Date of Charge 07/20/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
PAYEE	(a) Payee name OnStar		(b) Payee address; City, State, Zip Code PO Box 1027  Warren, MI 48090
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Description Monthly service
			(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: 87/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$132.68	(b) Date of Charge 07/21/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
7 PAYEE	(a) Payee name Ciscos Bakery & Restaurant		(b) Payee address; City, State, Zip Code 1511 E. 6th Street 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 meal with TDA staff
(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 \$72.17	(b) Date of Charge 07/22/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
PAYEE	(a) Payee name Southside Market		(b) Payee address; City, State, Zip Code 1212 US 290 Elgin, TX 78621
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 meal with TDA staff
(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 \$775.71	(b) Date of Charge 07/22/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
PAYEE	(a) Payee name Marriott JW Hill Resort		(b) Payee address; City, State, Zip Code 23808 Resort Pkwy San Antonio, TX 78261
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 In District		(b) Description Lodging
(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: 88/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$61.76	(b) Date of Charge 07/22/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
7 PAYEE	(a) Payee name In N Out New Braunfels		(b) Payee address; City, State, Zip Code 106 FM306  New Braunfels, TX 78130
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 with campaign staff
	(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 \$515.35	(b) Date of Charge 07/23/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
PAYEE	(a) Payee name Cobratec Knives		(b) Payee address; City, State, Zip Code 411 W. Morgan  Meridian, TX 76665
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 gift
	(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 \$66.22	(b) Date of Charge 07/24/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
PAYEE	(a) Payee name Murphy USA Stephenville		(b) Payee address; City, State, Zip Code 151 N Wolfe Nursery Rd  Stephenville, TX 76401
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 In District		(b) Description fuel for campaign car
	(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: 89/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$175.00	(b) Date of Charge 07/24/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
7 PAYEE	(a) Payee name Murphy USA Stephenville		(b) Payee address; City, State, Zip Code 151 N Wolfe Nursery Rd  Stephenville, TX 76401
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 In District		(b) Description fuel for campaign car
			(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 \$173.00	(b) Date of Charge 07/29/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
PAYEE	(a) Payee name Residence Inn Austin Downtown		(b) Payee address; City, State, Zip Code 300 E 4th 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) Travel In District		(b) Description Meeting with campaign consultant
			(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 \$242.08	(b) Date of Charge 07/31/2025	(c) Date(s) Credit Card Issuer Paid 07/31/2025
PAYEE	(a) Payee name Residence Inn Austin Downtown		(b) Payee address; City, State, Zip Code 300 E 4th 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) Travel In District		(b) Description meeting with constituents
			(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: 90/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$25.58	(b) Date of Charge 08/01/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
7 PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description internet storage
	(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 \$12.00	(b) Date of Charge 08/06/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name Kwick Kar Lube and Tune		(b) Payee address; City, State, Zip Code 1595 N Graham St Stephenville, TX 76401
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Description campaign car maintenance
	(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 \$11.78	(b) Date of Charge 08/05/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market St. San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description uber fee
	(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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 91/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$53.93	(b) Date of Charge 08/06/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
7 PAYEE	(a) Payee name On the Bend		(b) Payee address; City, State, Zip Code 123 Losoya 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) Food/Beverage Expense		(b) Description meal with constituents
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$60.68	(b) Date of Charge 08/06/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name New Baden General Store		(b) Payee address; City, State, Zip Code 3550 Main St  New Baden, TX 77870
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 meal with TDA staff
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$199.09	(b) Date of Charge 08/06/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name Hyatt Regency San Antonio		(b) Payee address; City, State, Zip Code 123 Losoya 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 In District		(b) Description hotel room for Nursery Landscape Expo
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 92/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$27.05	(b) Date of Charge 08/10/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
7 PAYEE	(a) Payee name CNBC Smartshop Houston		(b) Payee address; City, State, Zip Code 7800 Airport Blvd  Houston, TX 77061
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description meal with campaign staff
	(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 \$26.90	(b) Date of Charge 08/12/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market St.  San Francisco, CA 94103
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description uber fee
	(c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought      Office held
PAYMENT	(a) Amount Charged \$5,737.58	(b) Date of Charge 08/12/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name Texas First Politics, llc		(b) Payee address; City, State, Zip Code 2824 Wooded Acres Drive  Waco, TX 76710
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description website and social media
	(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: 93/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$40.00	(b) Date of Charge 08/13/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
7 PAYEE	(a) Payee name Twitter, Inc.		(b) Payee address; City, State, Zip Code 1355 Market Street Suite 900 San Francisco, CA 94103
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) Advertising Expense		(b) Description social media
			(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 \$611.94	(b) Date of Charge 08/12/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name Omni Hotel Oklahoma City		(b) Payee address; City, State, Zip Code 100 Oklahoma City Blvd  Oklahoma City, OK 73109
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 hotel for SEDC conference
			(c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$37.32	(b) Date of Charge 08/13/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market St.  San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description uber fee
			(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: 94/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$48.02	(b) Date of Charge 08/13/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
7 PAYEE	(a) Payee name Tupelo Honey		(b) Payee address; City, State, Zip Code 665 Grand Ave Ste 100  Des Moines, IA 50309
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 with campaign consultant
(c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought      Office held
PAYMENT	(a) Amount Charged \$30.88	(b) Date of Charge 08/13/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name Des Moines Marriott		(b) Payee address; City, State, Zip Code 700 Grand Av  Des Moines, IA 50309
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 meal with campaign consultant
(c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought      Office held
PAYMENT	(a) Amount Charged \$44.09	(b) Date of Charge 08/14/2025	(c) Date(s) Credit Card Issuer Paid 08/15/2025
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market St.  San Francisco, CA 94103
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Uber fee
(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: 95/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$20.30	(b) Date of Charge 08/15/2025	(c) Date(s) Credit Card Issuer Paid 08/25/2025
7 PAYEE	(a) Payee name Burger Bar		(b) Payee address; City, State, Zip Code 110 E 2nd S 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 meal with campaign staff
(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 \$18.02	(b) Date of Charge 08/16/2025	(c) Date(s) Credit Card Issuer Paid 08/25/2025
PAYEE	(a) Payee name QT Weatherford		(b) Payee address; City, State, Zip Code 2001 S Bowie Dr. Weatherford, TX 76086
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 In District		(b) Description fuel for campaign car
(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 \$18.74	(b) Date of Charge 08/17/2025	(c) Date(s) Credit Card Issuer Paid 08/25/2025
PAYEE	(a) Payee name The Junction on Route 36		(b) Payee address; City, State, Zip Code 1216 Highway 36 N. Gatesville, TX 76528
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 meal with constituent
(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: 96/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$23.90	(b) Date of Charge 08/18/2025	(c) Date(s) Credit Card Issuer Paid 08/25/2025
7 PAYEE	(a) Payee name USPS Austin		(b) Payee address; City, State, Zip Code 111 E 17th St Austin, TX 78701-9997
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 shipping fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$11.96	(b) Date of Charge 08/18/2025	(c) Date(s) Credit Card Issuer Paid 08/25/2025
PAYEE	(a) Payee name SAEXP News		(b) Payee address; City, State, Zip Code 301 Avenue E 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) Office Overhead/Rental Expense		(b) Description subscription
	(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 \$174.50	(b) Date of Charge 09/17/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name VENMO		(b) Payee address; City, State, Zip Code 95 Morton Street Floor 5 New York, NY 10014
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 transaction fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 97/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$85.26	(b) Date of Charge 08/20/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
7 PAYEE	(a) Payee name OnStar		(b) Payee address; City, State, Zip Code PO Box 1027  Warren, MI 48090
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) Transportation Equipment And Related Expense		(b) Description Monthly service
(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 \$248.60	(b) Date of Charge 08/21/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Hampton Inn		(b) Payee address; City, State, Zip Code 4617 7th St  Bay City, TX 77414
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 In District		(b) Description Hotel room
(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 \$36.89	(b) Date of Charge 08/21/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name QuickBooks		(b) Payee address; City, State, Zip Code 2800 E. Commerce Center Place  Tucson, AZ 85706
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 bookkeeping software
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought      Office held

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 98/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$61.84	(b) Date of Charge 08/21/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
7 PAYEE	(a) Payee name Circle K Lampasas		(b) Payee address; City, State, Zip Code 207 N Key Ave  Lampasas, TX 76550
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 In District		(b) Description fuel for campaign car
			(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 \$200.00	(b) Date of Charge 08/22/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name NTTA		(b) Payee address; City, State, Zip Code 5900 W Plano Pkwy  Plano, TX 75093
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 In District		(b) Description Toll fees
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought      Office held
PAYMENT	(a) Amount Charged \$19.45	(b) Date of Charge 08/21/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Circle K Lampasas		(b) Payee address; City, State, Zip Code 207 N Key Ave  Lampasas, TX 76550
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 In District		(b) Description fuel for campaign car
			(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: 99/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$276.04	(b) Date of Charge 08/23/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
7 PAYEE	(a) Payee name Cattlemans Fort Worth		(b) Payee address; City, State, Zip Code 2458 N. Main  Fort Worth, TX 76108
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 meal with constituents
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
PAYMENT	(a) Amount Charged \$23.03	(b) Date of Charge 08/22/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Caam's		(b) Payee address; City, State, Zip Code 223 E College St  STEPHENVILLE, TX 76401
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 meal with campaign staff
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
PAYMENT	(a) Amount Charged \$2.99	(b) Date of Charge 08/25/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Apple, Inc.		(b) Payee address; City, State, Zip Code 1 Infinite Loop  Cupertino, CA 95014
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 for iPhone and iPad
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(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: 100/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$20.00	(b) Date of Charge 08/24/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
7 PAYEE	(a) Payee name Hotel Drover		(b) Payee address; City, State, Zip Code 200 Mule Alley Fort Worth, TX 76164
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 In District		(b) Description parking fee
(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 \$42.07	(b) Date of Charge 08/24/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name BJ's Stephenville		(b) Payee address; City, State, Zip Code 211 W Mc Neill Stephenville, TX 76401
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 meal with campaign staff
(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 \$25.58	(b) Date of Charge 09/01/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description internet storage
(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: 101/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$47.00	(b) Date of Charge 09/03/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
7 PAYEE	(a) Payee name Azteca Mexican Grill		(b) Payee address; City, State, Zip Code 3024 W Washington  Stephenville, TX 76401
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 meal with constituents
			(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 \$143.75	(b) Date of Charge 09/04/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Catfish Parlour		(b) Payee address; City, State, Zip Code 4705 E. Ben White Blvd.  Austin, TX 78744
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 Meal with TDA staff
			(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 \$26.33	(b) Date of Charge 09/05/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name SiriusXM		(b) Payee address; City, State, Zip Code 8650 S Freeport Pkwy  Irving, TX 75063
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Description subscription fee
			(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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 102/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$28.22	(b) Date of Charge 09/08/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
7 PAYEE	(a) Payee name Chevron San Antonio		(b) Payee address; City, State, Zip Code 2899 Thousand Oaks Dr. San Antonio, TX 78232
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District  (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		(b) Description fuel for campaign car  <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 \$637.67	(b) Date of Charge 09/09/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name MailChimp		(b) Payee address; City, State, Zip Code 405 N. Angier Avenue NE Atlanta, GA 30312
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense  (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		(b) Description Email blasts service  <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 \$61.04	(b) Date of Charge 09/10/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Dallas First Quarter Bar		(b) Payee address; City, State, Zip Code Love Field  Dallas, TX 75235
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		(b) Description meal with constituents  <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: 103/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$5.30	(b) Date of Charge 09/10/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
7 PAYEE	(a) Payee name Starbucks		(b) Payee address; City, State, Zip Code 50 Massachusetts Ave NE  Washington, DC 20002
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 coffee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought      Office held
PAYMENT	(a) Amount Charged \$14.99	(b) Date of Charge 09/11/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name MagalInfo TV		(b) Payee address; City, State, Zip Code 235 E. 45th St.  New York, NY 10017
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 subscription fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought      Office held
PAYMENT	(a) Amount Charged \$34.73	(b) Date of Charge 09/13/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Walmart		(b) Payee address; City, State, Zip Code 4700 E Palm Valley Road  Round Rock, TX 78665
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 supplies
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 104/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$2,598.75	(b) Date of Charge 09/16/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
7 PAYEE	(a) Payee name Texas Home School Coalition		(b) Payee address; City, State, Zip Code 3410 Knoxville Ave.  Lubbock, TX 79413
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) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Donation
	(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 \$515.00	(b) Date of Charge 08/29/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Caron, Leslie		(b) Payee address; City, State, Zip Code 1914 West Gray #106  Houston, TX 77019
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description fundraiser planner
	(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 \$309.00	(b) Date of Charge 09/05/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Caron, Leslie		(b) Payee address; City, State, Zip Code 1914 West Gray #106  Houston, TX 77019
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description fundraiser planner
	(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: 105/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$164.80	(b) Date of Charge 09/09/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
7 PAYEE	(a) Payee name Caron, Leslie		(b) Payee address; City, State, Zip Code 1914 West Gray #106  Houston, TX 77019
8 PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description fundraiser planner
	(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 \$152.24	(b) Date of Charge 08/27/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Jasper's Cafe		(b) Payee address; City, State, Zip Code 26512 US-377  Bluff Dale, TX 76433
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 meal with constituents
	(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 \$268.21	(b) Date of Charge 08/27/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name QT Midlothian		(b) Payee address; City, State, Zip Code 2051 FM 66  Midlothian, TX 76065
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 In District		(b) Description fuel for campaign car
	(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: 106/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$2.12	(b) Date of Charge 08/28/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
7 PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Internet storage
			(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 \$35.28	(b) Date of Charge 08/30/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Enoki Sushi		(b) Payee address; City, State, Zip Code 100 N Wolfe Nursery Rd #198 Stephenville, TX 76401
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 meal with campaign staff
			(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 \$2.11	(b) Date of Charge 09/01/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name SiriusXM		(b) Payee address; City, State, Zip Code 8650 S Freeport Pkwy Irving, TX 75063
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Description subscription fee
			(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: 107/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$64.12	(b) Date of Charge 09/01/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
7 PAYEE	(a) Payee name The Golden Rule		(b) Payee address; City, State, Zip Code 606 S Church St  Georgetown, TX 78626
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 meal with campaign staff
(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 \$61.39	(b) Date of Charge 09/03/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Nextlink Broadband		(b) Payee address; City, State, Zip Code 2132 Tin Top Road Suite 200 Weatherford, TX 76086
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 Internet service provider
(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 \$44.80	(b) Date of Charge 09/04/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Austin Land & Cattle Company		(b) Payee address; City, State, Zip Code 1205 N. Lamar  Austin, TX 78703
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 meal with campaign consultant
(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: 108/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$175.00	(b) Date of Charge 09/05/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
7 PAYEE	(a) Payee name Allsup's Dublin		(b) Payee address; City, State, Zip Code 16767 CR 3  Dublin, TX 76446
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 In District		(b) Description fuel for campaign car
(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 \$207.54	(b) Date of Charge 09/04/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Residence Inn Austin Downtown		(b) Payee address; City, State, Zip Code 300 E 4th 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) Travel In District		(b) Description meetings with campaign consultant and constituents
(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 \$35.75	(b) Date of Charge 09/06/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Horny Toad Bar		(b) Payee address; City, State, Zip Code 319 3rd St,  Cranfills Gap, TX 76637
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 meal with campaign staff
(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: 109/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$9.96	(b) Date of Charge 09/07/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
7 PAYEE	(a) Payee name The Epoch Times		(b) Payee address; City, State, Zip Code 229 West 28th Street, Floor 6  New York, NY 10001
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 subscription fee
(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 \$21.20	(b) Date of Charge 09/07/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name IONOS Inc.		(b) Payee address; City, State, Zip Code 100 North 18th Street Suite 400 Philadelphia, PA 19103
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 hosting
(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 \$10.66	(b) Date of Charge 09/08/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Apple, Inc.		(b) Payee address; City, State, Zip Code 1 Infinite Loop  Cupertino, CA 95014
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 for iPhone and iPad
(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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 110/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$429.99	(b) Date of Charge 09/09/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
7 PAYEE	(a) Payee name Security Metrics		(b) Payee address; City, State, Zip Code 1275 W. 1600 N  Orem, UT 84057
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 credit card machine PCO compliance
	(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 \$143.27	(b) Date of Charge 09/10/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Pathway		(b) Payee address; City, State, Zip Code PO Box 1298  Joshua, TX 76058
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 Internet service provider with a phone line
	(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 \$157.48	(b) Date of Charge 09/11/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Hilton International Hotel		(b) Payee address; City, State, Zip Code 1919 Connecticut Ave NW  Washington, DC 20009
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 hotel fees
	(c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <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:	2 FILER NAME Miller, Sid (The Honorable)			3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
6 PAYMENT	(a) Amount Charged \$3,637.50	(b) Date of Charge 09/11/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025	
7 PAYEE	(a) Payee name Texas First Politics, llc		(b) Payee address; City, State, Zip Code 2824 Wooded Acres Drive Waco, TX 76710	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description website services	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$11.96	(b) Date of Charge 09/15/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025	
PAYEE	(a) Payee name SAEXP News		(b) Payee address; City, State, Zip Code 301 Avenue E San Antonio, TX 78205	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description meal with TDA staff	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$97.28	(b) Date of Charge 09/11/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025	
PAYEE	(a) Payee name Hilton Houston Post Oak Hotel		(b) Payee address; City, State, Zip Code 2001 Post Oak Blvd Houtson, TX 77056	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description meal with TDA staff	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 112/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$82.44	(b) Date of Charge 09/13/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
7 PAYEE	(a) Payee name USPS Hutto		(b) Payee address; City, State, Zip Code 388 Exchange Blvd  Hutto, TX 78634-9998
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 postage
(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 \$44.32	(b) Date of Charge 09/13/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Twitter, Inc.		(b) Payee address; City, State, Zip Code 1355 Market Street Suite 900 San Francisco, CA 94103
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Social media
(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 \$141.40	(b) Date of Charge 09/17/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name SweetWater Last Cast Bar & Grill		(b) Payee address; City, State, Zip Code 6000 N Terminal Pkwy  Atlanta, GA 30320
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 Meal with TDA staff
(c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <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: 113/113 Rpt:	2 FILER NAME Miller, Sid (The Honorable)		3 Filer ID (Ethics Commission Filers) 00042143
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$85.39	(b) Date of Charge 09/18/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
7 PAYEE	(a) Payee name FTD		(b) Payee address; City, State, Zip Code 3113 Woodcreek Dr  Downers Grove, IL 60515
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) Gift/Awards/Memorials Expense		(b) Description memorial flowers
	(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 \$2,060.00	(b) Date of Charge 09/16/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Caron, Leslie		(b) Payee address; City, State, Zip Code 1914 West Gray #106  Houston, TX 77019
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description fundraiser planner
	(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 \$206.00	(b) Date of Charge 09/16/2025	(c) Date(s) Credit Card Issuer Paid 09/30/2025
PAYEE	(a) Payee name Caron, Leslie		(b) Payee address; City, State, Zip Code 1914 West Gray #106  Houston, TX 77019
PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description fundraiser planner
	(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

**IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES  
FOR TRAVEL OUTSIDE OF TEXAS**

**SCHEDULE T**

<p><b>The Instruction Guide explains how to complete this form.</b></p>		<p><b>1</b> Total pages Schedule T: Sch: 1/7 Rpt: 189/195</p>												
<p><b>2</b> FILER NAME Miller, Sid (The Honorable)</p>		<p><b>3</b> Filer ID (Ethics Commission Filers) 00042143</p>												
<p><b>4</b> Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Curio Hotels Washington DC</p>														
<p><b>5</b> Contribution / Expenditure reported on:</p> <table> <tr> <td><input type="checkbox"/> Schedule A2</td> <td><input type="checkbox"/> Schedule B</td> <td><input type="checkbox"/> Schedule B(J)</td> <td><input type="checkbox"/> Schedule C2</td> <td><input type="checkbox"/> Schedule D</td> <td><input type="checkbox"/> Schedule F1</td> </tr> <tr> <td><input type="checkbox"/> Schedule F2</td> <td><input checked="" type="checkbox"/> Schedule F4</td> <td><input type="checkbox"/> Schedule G</td> <td><input type="checkbox"/> Schedule H</td> <td><input type="checkbox"/> Schedule COH-UC</td> <td></td> </tr> </table>			<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1	<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	
<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1									
<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC										
<p><b>6</b> Dates of Travel 09/18/2025 09/19/2025</p>	<p><b>7</b> Name of person(s) traveling Miller, Sid (Commissioner)</p>													
	<p><b>8</b> Departure city or name of departure location Rogers</p>													
	<p><b>9</b> Destination city or name of destination location Washington DC</p>													
<p><b>10</b> Means of transportation Commercial Airplane</p>	<p><b>11</b> Purpose of travel (including name of conference, seminar, or other event) Federal meetings</p>													
<p>Name of Contributor / Corporation or Labor Organization / Pledgor /Payee DWF Airport Parking</p>														
<p>Contribution / Expenditure reported on:</p> <table> <tr> <td><input type="checkbox"/> Schedule A2</td> <td><input type="checkbox"/> Schedule B</td> <td><input type="checkbox"/> Schedule B(J)</td> <td><input type="checkbox"/> Schedule C2</td> <td><input type="checkbox"/> Schedule D</td> <td><input type="checkbox"/> Schedule F1</td> </tr> <tr> <td><input type="checkbox"/> Schedule F2</td> <td><input checked="" type="checkbox"/> Schedule F4</td> <td><input type="checkbox"/> Schedule G</td> <td><input type="checkbox"/> Schedule H</td> <td><input type="checkbox"/> Schedule COH-UC</td> <td></td> </tr> </table>			<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1	<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	
<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1									
<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC										
<p>Dates of Travel 06/27/2025 07/02/2025</p>	<p>Name of person(s) traveling Miller, Sid (Commissioner)</p>													
	<p>Departure city or name of departure location Dallas</p>													
	<p>Destination city or name of destination location Bismarck</p>													
<p>Means of transportation Commercial Airplane</p>	<p>Purpose of travel (including name of conference, seminar, or other event) MASDA Conference</p>													
<p>Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Des Moines Marriott</p>														
<p>Contribution / Expenditure reported on:</p> <table> <tr> <td><input type="checkbox"/> Schedule A2</td> <td><input type="checkbox"/> Schedule B</td> <td><input type="checkbox"/> Schedule B(J)</td> <td><input type="checkbox"/> Schedule C2</td> <td><input type="checkbox"/> Schedule D</td> <td><input type="checkbox"/> Schedule F1</td> </tr> <tr> <td><input type="checkbox"/> Schedule F2</td> <td><input checked="" type="checkbox"/> Schedule F4</td> <td><input type="checkbox"/> Schedule G</td> <td><input type="checkbox"/> Schedule H</td> <td><input type="checkbox"/> Schedule COH-UC</td> <td></td> </tr> </table>			<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1	<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	
<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1									
<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC										
<p>Dates of Travel 08/12/2025 08/13/2025</p>	<p>Name of person(s) traveling Miller, Sid (Commissioner)</p>													
	<p>Departure city or name of departure location Des Moines</p>													
	<p>Destination city or name of destination location Austin</p>													
<p>Means of transportation Commercial Airplane</p>	<p>Purpose of travel (including name of conference, seminar, or other event) Ag America Meeting</p>													

# IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

## SCHEDULE T

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

Hilton International Hotel

5 Contribution / Expenditure reported on:

<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1
<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	

6 Dates of Travel

7 Name of person(s) traveling

Miller, Sid (Commissioner)

09/08/2025

8 Departure city or name of departure location

Dallas

09/10/2025

9 Destination city or name of destination location

Arlington

10 Means of transportation

Commercial Airplane

11 Purpose of travel (including name of conference, seminar, or other event)

meetings with senators, legislatives and HHS and USDA

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

Modern Market

Contribution / Expenditure reported on:

<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1
<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	

Dates of Travel

Name of person(s) traveling

Miller, Sid (Commissioner)

06/27/2025

Departure city or name of departure location

Dallas

07/02/2025

Destination city or name of destination location

Bismark

Means of transportation

Commercial Airplane

Purpose of travel (including name of conference, seminar, or other event)

MASDA Conference

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

Omni Hotel Oklahoma City

Contribution / Expenditure reported on:

<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1
<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	

Dates of Travel

Name of person(s) traveling

Miller, Sid (Commissioner)

08/10/2025

Departure city or name of departure location

Austin

08/12/2025

Destination city or name of destination location

OKC

Means of transportation

Commercial Airplane

Purpose of travel (including name of conference, seminar, or other event)

SEDC Conference

# IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

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

Southwest Airlines

5 Contribution / Expenditure reported on:

<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1
<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	

6 Dates of Travel

7 Name of person(s) traveling

Miller, Sid (Commissioner)

08/10/2025

8 Departure city or name of departure location

Austin

08/12/2025

9 Destination city or name of destination location

Oklahoma City

10 Means of transportation

Commercial Airplane

11 Purpose of travel (including name of conference, seminar, or other event)

SEDC Conference

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

Southwest Airlines

Contribution / Expenditure reported on:

<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1
<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	

Dates of Travel

Name of person(s) traveling

Miller, Sid (Commissioner)

08/10/2025

Departure city or name of departure location

Austin

08/12/2025

Destination city or name of destination location

OKC

Means of transportation

Commercial Airplane

Purpose of travel (including name of conference, seminar, or other event)

SEDC Conference

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

Starbucks

Contribution / Expenditure reported on:

<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1
<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	

Dates of Travel

Name of person(s) traveling

Miller, Sid (Commissioner)

09/08/2025

Departure city or name of departure location

Dallas

09/10/2025

Destination city or name of destination location

Arlington

Means of transportation

Commercial Airplane

Purpose of travel (including name of conference, seminar, or other event)

meetings with various senators, congressmen

# IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

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

SweetWater Last Cast Bar & Grill

5 Contribution / Expenditure reported on:

<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1
<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	

6 Dates of Travel

7 Name of person(s) traveling

Miller, Sid (Commissioner)

09/17/2025

8 Departure city or name of departure location

Rogers

09/19/2025

9 Destination city or name of destination location

Arlington

10 Means of transportation

Commercial Airplane

11 Purpose of travel (including name of conference, seminar, or other event)

congressional meetings

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

Tupelo Honey

Contribution / Expenditure reported on:

<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1
<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	

Dates of Travel

Name of person(s) traveling

Miller, Sid (Commissioner)

08/12/2025

Departure city or name of departure location

OKC

08/13/2025

Destination city or name of destination location

Des Moines

Means of transportation

Commercial Airplane

Purpose of travel (including name of conference, seminar, or other event)

Ag America meeting

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

Uber

Contribution / Expenditure reported on:

<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1
<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	

Dates of Travel

Name of person(s) traveling

Miller, Sid (Commissioner)

08/10/2025

Departure city or name of departure location

Austin

08/12/2025

Destination city or name of destination location

Oklahoma City

Means of transportation

Commercial Airplane

Purpose of travel (including name of conference, seminar, or other event)

SEDC Conference

# IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

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

Uber

5 Contribution / Expenditure reported on:

<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1
<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	

6 Dates of Travel

7 Name of person(s) traveling

Miller, Sid (Commissioner)

08/10/2025

8 Departure city or name of departure location

Austin

08/12/2025

9 Destination city or name of destination location

Oklahoma City

10 Means of transportation

Commercial Airplane

11 Purpose of travel (including name of conference, seminar, or other event)

SEDC Conference

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

Uber

Contribution / Expenditure reported on:

<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1
<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	

Dates of Travel

Name of person(s) traveling

Miller, Sid (Commissioner)

08/12/2025

Departure city or name of departure location

OKC

08/13/2025

Destination city or name of destination location

Des Moines

Means of transportation

Commercial Airplane

Purpose of travel (including name of conference, seminar, or other event)

Ag America Meeting

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

Uber

Contribution / Expenditure reported on:

<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1
<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	

Dates of Travel

Name of person(s) traveling

Miller, Sid (Commissioner)

08/12/2025

Departure city or name of departure location

Des Moines

08/13/2025

Destination city or name of destination location

Austin

Means of transportation

Commercial Airplane

Purpose of travel (including name of conference, seminar, or other event)

Ag America meeting

**IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES  
FOR TRAVEL OUTSIDE OF TEXAS**

**SCHEDULE T**

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

Uber

**5** Contribution / Expenditure reported on:

<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1
<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	

**6** Dates of Travel

**7** Name of person(s) traveling

Miller, Sid (Commissioner)

08/12/2025

**8** Departure city or name of departure location

Des Moines

08/13/2025

**9** Destination city or name of destination location

Austin

**10** Means of transportation

Commercial Airplane

**11** Purpose of travel (including name of conference, seminar, or other event)

Ag America meeting

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

United Airlines

Contribution / Expenditure reported on:

<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1
<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	

Dates of Travel

Name of person(s) traveling

Miller, Sid (Commissioner)

06/27/2025

Departure city or name of departure location

Dallas

07/02/2025

Destination city or name of destination location

Bismarck

Means of transportation

Commercial Airplane

Purpose of travel (including name of conference, seminar, or other event)

MASDA Conference

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

United Airlines

Contribution / Expenditure reported on:

<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1
<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	

Dates of Travel

Name of person(s) traveling

Miller, Sid (Commissioner)

06/27/2025

Departure city or name of departure location

Dallas

07/02/2025

Destination city or name of destination location

Bismarck

Means of transportation

Commercial Airplane

Purpose of travel (including name of conference, seminar, or other event)

MASDA Conference

**IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES  
FOR TRAVEL OUTSIDE OF TEXAS**

**SCHEDULE T**

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

United Airlines

**5** Contribution / Expenditure reported on:

<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1
<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	

**6** Dates of Travel

**7** Name of person(s) traveling

Miller, Sid (Commissioner)

08/12/2025

**8** Departure city or name of departure location

Des Moines

08/13/2025

**9** Destination city or name of destination location

Austin

**10** Means of transportation

Commercial Airplane

**11** Purpose of travel (including name of conference, seminar, or other event)

Ag America meeting

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

United Airlines

Contribution / Expenditure reported on:

<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1
<input type="checkbox"/> Schedule F2	<input checked="" type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	

Dates of Travel

Name of person(s) traveling

Miller, Sid (Commissioner)

08/12/2025

Departure city or name of departure location

Des Moines

08/13/2025

Destination city or name of destination location

Austin

Means of transportation

Commercial Airplane

Purpose of travel (including name of conference, seminar, or other event)

Ag America meeting