

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID 00080883		2 Total pages filed: 63		OFFICE USE ONLY				
3 CANDIDATE / OFFICEHOLDER NAME		FIRST The Honorable Armin		Date Received ELECTRONICALLY FILED 01/15/2026				
		NICKNAME Mizani		Date Hand-delivered or Date Postmarked				
4 ORIGINAL REPORT TYPE		<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify) _____				
		<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded modified reporting limit	Receipt # _____				
		<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)	Amount _____				
		<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final Report (Attach C/OH-FR)	Date Processed				
5 ORIGINAL PERIOD COVERED		Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year	Date Imaged
6 EXPLANATION OF CORRECTION This is my semi-annual report for period of 7/1/2025 to 12/31/2025. There is no correction to be made but I am getting this prompt as a result of the SS #1 finance report somehow being marked as a semi-annual report. I have tried to correct the SS#1 but I do not have a "correct" prompt allowing me to do so on my end of the userface. The SS#1 report should be identified as a special session report rather than a semi-annual. I have written an email to the Ethics office and it was indicated they would correct on their end once they were not as busy with all the filings today.								

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

Semiannual reports: I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

The Honorable Armin Mizani

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 oath

Printed name of officer administering oath

Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

**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) 00080883	2 Total pages filed: 63		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST The Honorable Armin	MI	OFFICE USE ONLY		
	NICKNAME	LAST Mizani	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; P.O. Box 678 Keller, TX 76244			Date Hand-delivered or Date Postmarked		
				Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST The Honorable Armin	MI			
	NICKNAME	LAST Mizani	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); P.O. Box 678 Keller, TX 76244		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (817) 366-3696					
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 Day Year 03/03/2026		ELECTION TYPE <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) Mayor of Keller Tarrant			12 OFFICE SOUGHT (if known) State Representative District 98		

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

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

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13 C / OH NAME	Mizani, Armin (The Honorable)		14 Filer ID (Ethics Commission Filers) 00080883
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. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 651,174.24
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 283,101.75
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 568,072.49
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 200,000.00

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 Armin Mizani

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day
of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

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

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18 FILER NAME Mizani, Armin (The Honorable)	19 Filer ID (Ethics Commission Filers) 00080883
20 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 type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	
4. <input checked="" 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 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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/41 Rpt: 5/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 08/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abbott, Cynthia	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Keller, TX 76248-2024	
8 Principal occupation / Job title (See Instructions) Pharmacy Benefit Manager		9 Employer (See Instructions) CVS
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alamilla, Dr. Frank	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76137	
Principal occupation / Job title (See Instructions) Chiro.		Employer (See Instructions) HealthConnection
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alamilla, Frank	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76137	
Principal occupation / Job title (See Instructions) Chiropractor		Employer (See Instructions) Health Connection
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aldous, Charla	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code dallas, TX 75219	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Aldous Law
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarado, Paul	Amount of Contribution (\$) \$260.73
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) Vice President Business Development		Employer (See Instructions) Oxford ATS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/41 Rpt: 6/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 07/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarado, Paul	7 Amount of Contribution (\$) \$781.56
	6 Contributor address; City; State; Zip Code Keller, TX 76248	
8 Principal occupation / Job title (See Instructions) Vice President Business Development		9 Employer (See Instructions) Oxford ATS
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarado, Paul	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) Vice President Business Development		Employer (See Instructions) Oxford ATS
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Scott	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Houston, TX 77055	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Armstrong Lee & Baker LLP
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashkan, Mizani	Amount of Contribution (\$) \$1,157.60
	Contributor address; City; State; Zip Code San Francisco, CA 94123	
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self
Date 07/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atendido, Sean	Amount of Contribution (\$) \$260.73
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Brydge

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/41 Rpt: 7/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 08/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Auslbrook, Matt	7 Amount of Contribution (\$) \$15,000.00
	6 Contributor address; City; State; Zip Code Arlington, TX 76011	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Aulsbrook Law Firm
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aziz, Muhammad	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Houston, TX 77002	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Abraham, Watkins, Nichols, Agosto, Aziz & Stogner
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aziz, Muhammad	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Houston, TX 77002	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Abraham, Watkins, Nichols, Agosto, Aziz & Stogner
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, John	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Keller, TX 76244	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrow, Wade	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76104	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Barrow Law, PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/41 Rpt: 8/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 09/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Basin Ventures II 6 Contributor address; City; State; Zip Code Colleyville, TX 76034	7 Amount of Contribution (\$) \$10,000.00
	8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bazán, Jorge L Contributor address; City; State; Zip Code Fort Worth, TX 76114	Amount of Contribution (\$) \$260.73
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Begum, Alex Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$10,000.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions) Lawyer Begum Law Group	
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Begum, Alex Contributor address; City; State; Zip Code Brownsville, TX 78526	Amount of Contribution (\$) \$10,000.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions) Lawyer Begum Law Group	
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benton, Jeff Contributor address; City; State; Zip Code Irving, TX 75038	Amount of Contribution (\$) \$2,604.48
	Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney The Benton Law Firm	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/41 Rpt: 9/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 07/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birt, John	7 Amount of Contribution (\$) \$208.65
	6 Contributor address; City; State; Zip Code Keller, TX 76248	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Jackie	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self
Date 07/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blakey, Jay	Amount of Contribution (\$) \$260.73
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bohannan, David	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Bohannan Dentistry
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boll, George	Amount of Contribution (\$) \$104.48
	Contributor address; City; State; Zip Code Colleyville, TX 76034	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Juneau Boll & Stacy, PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/41 Rpt: 10/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 08/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brennan, Karen	7 Amount of Contribution (\$) \$521.15
	6 Contributor address; City; State; Zip Code Keller, TX 76248	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brinkmeier, Jody	Amount of Contribution (\$) \$104.48
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Ned	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) Sales Manager		Employer (See Instructions) MCMC Auto
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buczek, Adam	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Southlake, TX 76092	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Skorburg Company
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Steve	Amount of Contribution (\$) \$10.73
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/41 Rpt: 11/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Steve 6 Contributor address; City; State; Zip Code Keller, TX 76248	7 Amount of Contribution (\$) \$10.73
	8 Principal occupation / Job title (See Instructions) retired	9 Employer (See Instructions) retired
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Steve Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$10.73
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Steve Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$10.73
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Steve Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$10.73
	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#: _____) Carr, Steve Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$10.73
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/41 Rpt: 12/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Steve	7 Amount of Contribution (\$) \$10.73
	6 Contributor address; City; State; Zip Code Keller, TX 76248	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 09/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chacko, Benson	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Colleyville, TX 76034	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Southlake Methodist Medical Center
Date 12/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Matt	Amount of Contribution (\$) \$104.48
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chat n chill bar and grill, llc	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Keller, TX 76249	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chopra, Lucky	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Houston, TX 77002	
Principal occupation / Job title (See Instructions) Physician, Chairman		Employer (See Instructions) Advanced Diagnostics Healthcare

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/41 Rpt: 13/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Douglas 6 Contributor address; City; State; Zip Code Grapevine, TX 76051	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clement, Todd Contributor address; City; State; Zip Code Plano, TX 75093	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Clement + Speer
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobb, Thomas Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Chris Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) John Condos

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/41 Rpt: 14/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 10/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corrin, Tod	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Keller, TX 76248	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) Employer (See Instructions) retired
Date 10/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crain, Sue	Amount of Contribution (\$) \$260.73
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) Consulting		Employer (See Instructions) Employer (See Instructions) Self Employed
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cuderman, Peter	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Tallahassee, FL 32301	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Employer (See Instructions) retired
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Culp, Linda	Amount of Contribution (\$) \$26.35
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Employer (See Instructions) retired
Date 09/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dadresan, Azita	Amount of Contribution (\$) \$104.48
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) Software engineer AI/ML		Employer (See Instructions) Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/41 Rpt: 15/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 09/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeBerry, Chris	7 Amount of Contribution (\$) \$104.48
	6 Contributor address; City; State; Zip Code Keller, TX 76248	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) Employer (See Instructions) retired
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeMoville, Brent	Amount of Contribution (\$) \$52.40
	Contributor address; City; State; Zip Code Colleyville, TX 76034	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Doan Law Firm
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doan, Jimmy	Amount of Contribution (\$) \$4,000.00
	Contributor address; City; State; Zip Code Houston, TX 77056	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Doan Law Firm
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doan, Jimmy	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77056	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Doan Law Firm
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodson, George	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Colleyville, TX 76034	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/41 Rpt: 16/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 09/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dubberly, Shannon	7 Amount of Contribution (\$) \$1,041.98
	6 Contributor address; City; State; Zip Code Keller, TX 76248	
8 Principal occupation / Job title (See Instructions) IT Director		9 Employer (See Instructions) Ascella Technologies
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duff, Timothy	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELDER, BRANDI	Amount of Contribution (\$) \$2,604.48
	Contributor address; City; State; Zip Code Colleyville, TX 76034	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ead, Justin	Amount of Contribution (\$) \$52.40
	Contributor address; City; State; Zip Code Hurst, TX 76054	
Principal occupation / Job title (See Instructions) Advanced Graphics Software Engineer		Employer (See Instructions) JRM Technologies
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Ethan	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Cypress, TX 77433	
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) The University of Texas at Arlington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/41 Rpt: 17/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 12/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farris, Bert	7 Amount of Contribution (\$) \$5,000.00
	6 Contributor address; City; State; Zip Code Houston, TX 77007	
8 Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) Archer Systems
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson Law Firm	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Beaumont, TX 77705	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fetter, John	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fibich, Kenneth Thomas	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Houston, TX 77005	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fontenot, Timothy	Amount of Contribution (\$) \$104.48
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) Fontenot Wealth Management

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 14/41 Rpt: 18/63
2 FILER NAME Mizani, Armin (The Honorable)			3 Filer ID (Ethics Commission Filers) 00080883
4 Date 11/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frenkel, Mark 6 Contributor address; City; State; Zip Code Dallas, TX 75251-1508	7 Amount of Contribution (\$) \$2,500.00	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) FRENKEL & FRENKEL LLP	
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gairola, Anant Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$104.48	
Principal occupation / Job title (See Instructions) Director operations		Employer (See Instructions) Smith and nephew	
Date 09/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garabedian, Michael Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$1,000.00	
Principal occupation / Job title (See Instructions) Build Stuff		Employer (See Instructions) Garabedian	
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerda, David Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$521.15	
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#: _____) Greaves, Kim Contributor address; City; State; Zip Code Westlake, TX 76262	Amount of Contribution (\$) \$5,000.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/41 Rpt: 19/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 07/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Manuel	7 Amount of Contribution (\$) \$25,000.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75240	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Meg Health Care
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Groves, David	Amount of Contribution (\$) \$52.40
	Contributor address; City; State; Zip Code Colleyville, TX 76034	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grynkiewicz-Mizani, Cindy	Amount of Contribution (\$) \$52.40
	Contributor address; City; State; Zip Code San Francisco, CA 94123	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Francisco	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code San Antonio, TX 78212	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Guerra, LLP
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Cody	Amount of Contribution (\$) \$5,208.65
	Contributor address; City; State; Zip Code Houston, TX 77002	
Principal occupation / Job title (See Instructions) Trial Support		Employer (See Instructions) Windy Point Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/41 Rpt: 20/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 08/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Thomas	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Colleyville, TX 76034	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamed, Mizani	Amount of Contribution (\$) \$20,000.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) South Texas Renal Care Group
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamlin, William	Amount of Contribution (\$) \$208.65
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamlin, William	Amount of Contribution (\$) \$104.48
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammer and Nails	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76244	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/41 Rpt: 21/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 09/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harlan, Brian	7 Amount of Contribution (\$) \$260.73
	6 Contributor address; City; State; Zip Code Keller, TX 76248	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Not disclosed
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Chad	Amount of Contribution (\$) \$5,208.65
	Contributor address; City; State; Zip Code Waco, TX 76710	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haslam, Robert	Amount of Contribution (\$) \$750.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76185	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebert, Elizabeth "Beth"	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hill Law Firm

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 18/41 Rpt: 22/63
2 FILER NAME Mizani, Armin (The Honorable)			3 Filer ID (Ethics Commission Filers) 00080883
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hixson, Thomas	7 Amount of Contribution (\$) \$260.73	
	6 Contributor address; City; State; Zip Code Keller, TX 76248		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired	
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holbrook, Jade	Amount of Contribution (\$) \$104.48	
	Contributor address; City; State; Zip Code Keller, TX 76262		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houghton, Kellie	Amount of Contribution (\$) \$52.40	
	Contributor address; City; State; Zip Code Keller, TX 76248		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jencapole, Ron	Amount of Contribution (\$) \$100.00	
	Contributor address; City; State; Zip Code Keller, TX 76248		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jose, John	Amount of Contribution (\$) \$260.73	
	Contributor address; City; State; Zip Code Fort Worth, TX 76102-2742		
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) Jose & Vaughn, PLLC	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/41 Rpt: 23/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Justice for Texas Victims Pac 6 Contributor address; City; State; Zip Code Dallas, TX 75201	7 Amount of Contribution (\$) \$10,000.00
	8 Principal occupation / Job title (See Instructions) Attorney	9 Employer (See Instructions) Law Office of Steve Koebele
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koebele, Stephen Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$250.00
	Principal occupation / Job title (See Instructions) Attorney	Employer (See Instructions) Law Office of Steve Koebele
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korcyk, Rick Contributor address; City; State; Zip Code Advance, NC 27006	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions) Managing Director	Employer (See Instructions) Charles Schwab
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lang, Leonard Contributor address; City; State; Zip Code Euless, TX 76039	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/41 Rpt: 24/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 10/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langner, Robert 6 Contributor address; City; State; Zip Code Keller, TX 76248	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lassiter, James Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$5,208.65
Principal occupation / Job title (See Instructions) Atty		Employer (See Instructions) Lassiter Law
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leevy, John Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$52.40
Principal occupation / Job title (See Instructions) Pilot/instructor		Employer (See Instructions) American Airlines
Date 07/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindamood Jr, Bobby Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$2,083.65
Principal occupation / Job title (See Instructions) Demolition		Employer (See Instructions) Self
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger Goggan Blair & Sampson LLP Contributor address; City; State; Zip Code Austin, TX 78780	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/41 Rpt: 25/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 07/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loewy, Adam	7 Amount of Contribution (\$) \$10,000.00
	6 Contributor address; City; State; Zip Code Austin, TX 78731	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Loewy Law Firm
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lovein, Robert	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code Grapevine, TX 76051	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Lovein Ribman
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lovein, Robert	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Flower Mound, TX 75022	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Lovein Ribman
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Makens, James	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Grapevine, TX 76034	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) The Makens Company
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathews, Mark	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) Freight Executive		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/41 Rpt: 26/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarty, Jack	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code North Richland hills, TX 76182	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClement, Paige	Amount of Contribution (\$) \$104.48
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Paige McClement
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCloskey, Sharon	Amount of Contribution (\$) \$52.40
	Contributor address; City; State; Zip Code Keller, TX 76248	
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#: _____) McFarland, Kelly	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Keller, TX 76262	
Principal occupation / Job title (See Instructions) PT		Employer (See Instructions) Premier Rehab
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Aaron	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Keller, TX 76262	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Amack Property Services

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/41 Rpt: 27/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMullin, Ross	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Keller, TX 76248	
8 Principal occupation / Job title (See Instructions) PT		9 Employer (See Instructions) Premier Rehab
Date 07/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcfarland, Kelly	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Roanoke, TX 76262	
Principal occupation / Job title (See Instructions) PT		Employer (See Instructions) Premier Rehab
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meg Healthcare, Inc.	Amount of Contribution (\$) \$25,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75230	
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#: _____) Milyo-Lopez, Amy	Amount of Contribution (\$) \$52.40
	Contributor address; City; State; Zip Code Southlake, TX 76092	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minter, Gregory	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Colleyville, TX 76034	
Principal occupation / Job title (See Instructions) 		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/41 Rpt: 28/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mira, Felix	7 Amount of Contribution (\$) \$781.56
	6 Contributor address; City; State; Zip Code Keller, TX 76248	
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Mira Partners, Inc.
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mira, Felix & Lori	Amount of Contribution (\$) \$260.73
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) District 5
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mirza, Ali	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Southlake, TX 76092	
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) District 5
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mirza, Ali	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Southlake, TX 76092	
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) District 5
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, James	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75225	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/41 Rpt: 29/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 07/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mizani, Arman	7 Amount of Contribution (\$) \$150.00
	6 Contributor address; City; State; Zip Code San Francisco, CA 94123	
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Revive Medical
Date 07/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mizani, Armin	Amount of Contribution (\$) \$10.73
	Contributor address; City; State; Zip Code Keller, TX 76262	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mizani, Arshan	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code San Diego, CA 92120	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Raylene	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Raylene	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/41 Rpt: 30/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 11/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Raylene 6 Contributor address; City; State; Zip Code Keller, TX 76248	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Raylene Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) More Prime Corp Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Ronnie Contributor address; City; State; Zip Code Keller, TX 76244	Amount of Contribution (\$) \$260.73
Principal occupation / Job title (See Instructions) Electrical Contractor		Employer (See Instructions) Morgan Electric
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrow, Nicholas Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Morrow & Sheppard LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/41 Rpt: 31/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mountjoy, Nicole Mountjoy 6 Contributor address; City; State; Zip Code Keller, TX 76248	7 Amount of Contribution (\$) \$104.48
8 Principal occupation / Job title (See Instructions) HR Director		9 Employer (See Instructions) Caterpillar Inc
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Katherine Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$26.35
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nakamura, Tammy Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$260.73
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ng, Amy Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$104.48
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Lux Nail Bar
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noorani, Anis Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$521.15
Principal occupation / Job title (See Instructions) Chiropractor		Employer (See Instructions) Atlas Medical Center

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/41 Rpt: 32/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 08/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palfrey, Gloria 6 Contributor address; City; State; Zip Code Keller, TX 76248	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paris, Nikki Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$208.65
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paris, Nikki Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$208.65
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Brad Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$260.73
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Parker Law Firm
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, Philip Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$260.73
Principal occupation / Job title (See Instructions) Podiatrist		Employer (See Instructions) Parr Foot & Ankle Specialists

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/41 Rpt: 33/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 10/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paskins, Peter	7 Amount of Contribution (\$) \$104.48
	6 Contributor address; City; State; Zip Code KELLER, TX 76248	
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Patterson Law Group
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, William	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76110	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peabody, Susan	Amount of Contribution (\$) \$26.35
	Contributor address; City; State; Zip Code Grapevine, TX 76051	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peabody, Susan	Amount of Contribution (\$) \$52.40
	Contributor address; City; State; Zip Code Grapevine, TX 76051	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearson, Keith	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 30/41 Rpt: 34/63
2 FILER NAME Mizani, Armin (The Honorable)			3 Filer ID (Ethics Commission Filers) 00080883
4 Date 12/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Raymond	7 Amount of Contribution (\$) \$104.48	
	6 Contributor address; City; State; Zip Code Keller, TX 76248-1112		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired	
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Physicians for Free Market Healthcare Pac	Amount of Contribution (\$) \$25,000.00	
	Contributor address; City; State; Zip Code Prosper, TX 75078		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Rickie	Amount of Contribution (\$) \$260.73	
	Contributor address; City; State; Zip Code Arlington, TX 76016		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices of Rick L. Powell, P.C.	
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers Taylor, LLP	Amount of Contribution (\$) \$1,250.00	
	Contributor address; City; State; Zip Code Dallas, TX 75231		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinn, David	Amount of Contribution (\$) \$52.40	
	Contributor address; City; State; Zip Code Keller, TX 76248		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Brakebush Brothers inc	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/41 Rpt: 35/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 08/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinn, David 6 Contributor address; City; State; Zip Code Keller, TX 76248	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Brakebush Brothers Inc.
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raine, Tim Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$260.73
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#: _____) Randklev, Charles Contributor address; City; State; Zip Code Keller, TX 76262	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Research Assistant Professor		Employer (See Instructions) Texas A&M University
Date 07/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Renfrow, Jane Contributor address; City; State; Zip Code Highland, IN 46322	Amount of Contribution (\$) \$1,041.98
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Rick Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$260.73
Principal occupation / Job title (See Instructions) Corporate Vice President		Employer (See Instructions) Wabtec

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/41 Rpt: 36/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 08/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Fran 6 Contributor address; City; State; Zip Code Keller, TX 76244	7 Amount of Contribution (\$) \$104.48
	8 Principal occupation / Job title (See Instructions) President, non profit	9 Employer (See Instructions) True Texas Project
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Fran Contributor address; City; State; Zip Code Keller, TX 76244	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) President	Employer (See Instructions) True Texas Project
Date 09/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Scotty Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$104.48
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rigney, Callie Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions) homemaker	Employer (See Instructions) homemaker
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Sean Contributor address; City; State; Zip Code Houston, TX 77004	Amount of Contribution (\$) \$5,000.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Roberts Markland LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/41 Rpt: 37/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 07/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Sixto	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code North Richland Hills, TX 76180	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roemer, Greg	Amount of Contribution (\$) \$650.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions)
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Mika	Amount of Contribution (\$) \$52.40
	Contributor address; City; State; Zip Code Southlake, TX 76092	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMPLES, STEVEN	Amount of Contribution (\$) \$2,604.48
	Contributor address; City; State; Zip Code Hurst, TX 76054	
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SAMPLES AMES
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlegel, Bill	Amount of Contribution (\$) \$104.48
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/41 Rpt: 38/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 12/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuman, Daniel	7 Amount of Contribution (\$) \$52.40
	6 Contributor address; City; State; Zip Code Keller, TX 76262	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sether, Judith	Amount of Contribution (\$) \$52.40
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sether, Judith	Amount of Contribution (\$) \$52.40
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shields, Robert (CEO)	Amount of Contribution (\$) \$50,000.00
	Contributor address; City; State; Zip Code Heath, TX 75032	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Self
Date 09/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shimmin, Gary	Amount of Contribution (\$) \$104.48
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/41 Rpt: 39/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simcox, Stephen	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75201	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Noteboom
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sisk, Christopher	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Grapevine, TX 76051	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Noteboom
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sivertsen, Michael	Amount of Contribution (\$) \$104.48
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) Director of Programs		Employer (See Instructions) Keller Education Foundation
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sizemore, Julie	Amount of Contribution (\$) \$104.48
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) Program Director		Employer (See Instructions) Keller Education Foundation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/41 Rpt: 40/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 07/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Kim	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Granbury, TX 76048	
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions)
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, Quinton	Amount of Contribution (\$) \$4,000.00
	Contributor address; City; State; Zip Code Alpharetta, GA 30004	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 09/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spoon, Elliot	Amount of Contribution (\$) \$52.40
	Contributor address; City; State; Zip Code Birmingham, MI 48009	
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#: _____) Stark, Zariyan	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Euless, TX 76039-3054	
Principal occupation / Job title (See Instructions) Broker		Employer (See Instructions) Stark Realty
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens Law Firm, PLLC	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76107	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/41 Rpt: 41/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 07/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens, Jason 6 Contributor address; City; State; Zip Code Fort Worth, TX 76107	7 Amount of Contribution (\$) \$10,000.00
	8 Principal occupation / Job title (See Instructions) Attorney	9 Employer (See Instructions) Stephens Law Firm
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taggart, Christina Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$521.15
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Truth and Liberty Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$112,500.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Pain and Injury Ilc Contributor address; City; State; Zip Code cedar hill, TX 75104	Amount of Contribution (\$) \$50,000.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Trial Lawyers Association Pac Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$10,000.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/41 Rpt: 42/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Trial Lawyers Association Pac 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$5,000.00
	8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The West Law Firm Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$10,000.00
	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#: _____) Tichenor, Deborah Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$52.40
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tom Wilder Campaign Contributor address; City; State; Zip Code Fort Worth, TX 76102	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tracey Fox King & Walters Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$5,000.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/41 Rpt: 43/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 08/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tran, Mimi	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Keller, TX 76248	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) TRB Bank
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Oscar	Amount of Contribution (\$) \$1,041.98
	Contributor address; City; State; Zip Code North Richland Hills, TX 76182	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) O Trevino Construction
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Orsdol, Gina	Amount of Contribution (\$) \$36.77
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vergara, Jose	Amount of Contribution (\$) \$52.40
	Contributor address; City; State; Zip Code Roseville, CA 95747	
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) City of Roseville
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weinberger, Daniel	Amount of Contribution (\$) \$521.15
	Contributor address; City; State; Zip Code Grapevine, TX 76051	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/41 Rpt: 44/63
2 FILER NAME Mizani, Armin (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080883
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Jaclyn	7 Amount of Contribution (\$) \$2,083.65
	6 Contributor address; City; State; Zip Code Winston Salem, NC 27104	
8 Principal occupation / Job title (See Instructions) Neurosurgeon		9 Employer (See Instructions) Atrium Health
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Will, Gregory	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions) Disaster Case Manager		Employer (See Instructions) Federal Government
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Mark	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76164	
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Texas Injury Clinic
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Tod	Amount of Contribution (\$) \$521.15
	Contributor address; City; State; Zip Code Fort Worth, TX 76244	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winstar Contractors LP	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76116	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			<p>1 Total pages Schedule A1: Sch: 41/41 Rpt: 45/63</p>
<p>2 FILER NAME Mizani, Armin (The Honorable)</p>			<p>3 Filer ID (Ethics Commission Filers) 00080883</p>
<p>4 Date 11/19/2025</p>	<p>5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witherite, Amy</p>	<p>6 Contributor address; City; State; Zip Code Dallas, TX 75214</p>	<p>7 Amount of Contribution (\$) \$25,000.00</p>
<p>8 Principal occupation / Job title (See Instructions) Attorney</p>		<p>9 Employer (See Instructions) Witherite Law Group</p>	
<p>Date 10/30/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wooten, Coby</p>	<p>Contributor address; City; State; Zip Code Fort Worth, TX 76109</p>	<p>Amount of Contribution (\$) \$781.56</p>
<p>Principal occupation / Job title (See Instructions) attorney</p>		<p>Employer (See Instructions) Coby L. Wooten, Attorney at Law, P.C.</p>	
<p>Date 10/02/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Micah</p>	<p>Contributor address; City; State; Zip Code Keller, TX 76248</p>	<p>Amount of Contribution (\$) \$500.00</p>
<p>Principal occupation / Job title (See Instructions) Broker</p>		<p>Employer (See Instructions) EXP REALTY</p>	

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 46/63
2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883	
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 12/31/2025	7 Name of lender Mizani, Armin	<input type="checkbox"/> out-of-state PAC (ID#: _____)
6 Is lender a financial institution? No	8 Lender address; Keller, TX 76244	9 Loan Amount (\$) \$200,000.00
		10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions) Attorney		13 Employer (See Instructions) Self
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/> (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 	19 Amount Guaranteed (\$)
18 Guarantor address; City; State; Zip Code		
20 Principal occupation		21 Employer (See Instructions)

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: 1/17 Rpt: 47/63	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883
4 Date 08/25/2025	5 Payee name 936 Media, llc	
6 Amount (\$) \$17,000.00	7 Payee address; City; State; Zip Code 1050 Johnnie Dodds Blvd. Unit 2414 Mount Pleasant, TX 29465	
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 10/23/2025	Payee name Anedot	
Amount (\$) \$952.30	Payee address; City; State; Zip Code 3723 Greenville Ave. Suite 41002 Dallas, TX 75206	
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 Donation Platform Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/31/2025	Payee name Anedot	
Amount (\$) \$10,368.22	Payee address; City; State; Zip Code 3723 Greenville Ave. Suite 41002 Dallas, TX 75206	
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 Donation Platform 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: 2/17 Rpt: 48/63	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883
4 Date 09/03/2025	5 Payee name BannerBuzz	
6 Amount (\$) \$327.00	7 Payee address; City; State; Zip Code 595 Old Norcross Road Northwest Suite G Lawrenceville, GA 30046	
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 Banner
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name Ellis, Ethan	
Amount (\$) \$766.67	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Cypress, TX 77433	
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 Salaries/Wages
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/05/2025	Payee name Ellis, Ethan	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Cypress, TX 77433	
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 Salaries/Wages
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: 3/17 Rpt: 49/63	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883
4 Date 12/04/2025	5 Payee name Ellis, Ethan	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Cypress, TX 77433	
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 Salaries/Wages
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/11/2025	Payee name Griffin Communications	
Amount (\$) \$17,313.61	Payee address; City; State; Zip Code 176 Venice Cv Austin, TX 78737	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/11/2025	Payee name Griffin Communications	
Amount (\$) \$48,000.00	Payee address; City; State; Zip Code 176 Venice Cv Austin, TX 78737	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
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: 4/17 Rpt: 50/63	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883	
4 Date 09/18/2025	5 Payee name Griffin Communications		
6 Amount (\$) \$3,699.00	7 Payee address; City; 176 Venice Cv Austin, TX 78737	State; Zip Code	
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 Expenses	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Griffin Communications	Office sought Austin, TX 78737	Office held
Date 10/07/2025	Payee name Griffin Communications		
Amount (\$) \$15,420.41	Payee address; City; 176 Venice Cv Austin, TX 78737	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Griffin Communications	Office sought Austin, TX 78737	Office held
Date 10/24/2025	Payee name Griffin Communications		
Amount (\$) \$20,000.00	Payee address; City; 176 Venice Cv Austin, TX 78737	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Griffin Communications	Office sought Austin, TX 78737	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: 5/17 Rpt: 51/63	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883	
4 Date 11/04/2025	5 Payee name Griffin Communications		
6 Amount (\$) \$5,658.23	7 Payee address; City; 176 Venice Cv Austin, TX 78737	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Griffin Communications	Office sought Austin, TX 78737	Office held
Date 11/14/2025	Payee name Griffin Communications		
Amount (\$) \$15,428.64	Payee address; City; 176 Venice Cv Austin, TX 78737	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Griffin Communications	Office sought Austin, TX 78737	Office held
Date 11/28/2025	Payee name Griffin Communications		
Amount (\$) \$31,443.36	Payee address; City; 176 Venice Cv Austin, TX 78737	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Griffin Communications	Office sought Austin, TX 78737	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: 6/17 Rpt: 52/63	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883	
4 Date 12/02/2025	5 Payee name Griffin Communications		
6 Amount (\$) \$21,937.38	7 Payee address; City; 176 Venice Cv Austin, TX 78737	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Griffin Communications	Office sought Austin, TX 78737	Office held
Date 12/05/2025	Payee name Griffin Communications		
Amount (\$) \$3,739.21	Payee address; City; 176 Venice Cv Austin, TX 78737	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Griffin Communications	Office sought Austin, TX 78737	Office held
Date 12/08/2025	Payee name Griffin Communications		
Amount (\$) \$14,976.08	Payee address; City; 176 Venice Cv Austin, TX 78737	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Griffin Communications	Office sought Austin, TX 78737	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: 7/17 Rpt: 53/63	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883
4 Date 12/15/2025	5 Payee name Install Connect, Inc.	
6 Amount (\$) \$2,500.00	7 Payee address; City; 505 W STATE ST. Garland, TX 75040	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Install
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 12/30/2025	Payee name Install Connect, Inc.	
Amount (\$) \$875.00	Payee address; City; 505 W STATE ST. Garland, TX 75040	
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 Signs Install
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 10/10/2025	Payee name McKay, Enna	
Amount (\$) \$1,750.00	Payee address; City; Colleyville, TX 76034	
		REDACTED PER 254.0401, ELEC. CODE
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 Salaries/Wages
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought

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: 8/17 Rpt: 54/63	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883
4 Date 11/12/2025	5 Payee name McKay, Enna	
6 Amount (\$) \$3,500.00	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Colleyville, TX 76034	
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 Salaries/Wages
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/04/2025	Payee name McKay, Enna	
Amount (\$) \$3,500.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Colleyville, TX 76034	
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 Salaries/Wages
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name Mitta, Suk	
Amount (\$) \$766.67	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Frisco, TX 75035	
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 Salaries/Wages
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: 9/17 Rpt: 55/63	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883
4 Date 11/05/2025	5 Payee name Mitta, Suk	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Frisco, TX 75035	
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 Salaries/Wages
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/04/2025	Payee name Mitta, Suk	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Frisco, TX 75035	
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 Salaries/Wages
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/08/2025	Payee name Morse, Cooper	
Amount (\$) \$790.32	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Fort Worth, TX 76116	
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 Salaries/Wages
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: 10/17 Rpt: 56/63	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883
4 Date 10/07/2025	5 Payee name Morse, Cooper	
6 Amount (\$) \$1,750.00	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Fort Worth, TX 76116	
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 Salaries/Wages
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Morse, Cooper	Office sought Office held
Date 11/03/2025	Payee name Morse, Cooper	
Amount (\$) \$1,750.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Fort Worth, TX 76116	
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 Salaries/Wages
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Morse, Cooper	Office sought Office held
Date 12/03/2025	Payee name Morse, Cooper	
Amount (\$) \$1,750.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Fort Worth, TX 76116	
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 Salaries/Wages
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Morse, Cooper	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: 11/17 Rpt: 57/63	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883
4 Date 07/21/2025	5 Payee name Outpost 36	
6 Amount (\$) \$352.69	7 Payee address; City; State; Zip Code 1801 S Main St Keller, TX 76248	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meet and Greet
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Outpost 36	Office sought Office held
Date 08/18/2025	Payee name Outpost 36	
Amount (\$) \$483.71	Payee address; City; State; Zip Code 1801 S Main St Keller, TX 76248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Outpost 36	Office sought Office held
Date 10/06/2025	Payee name Sunny Street Cafe	
Amount (\$) \$144.42	Payee address; City; State; Zip Code 242 Rufe Snow Dr. Keller, TX 76248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food expense for campaign event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Outpost 36	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: 12/17 Rpt: 58/63	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883
4 Date 12/04/2025	5 Payee name TCGOP	
6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 201 North Ruper St. Suite 117 Fort Worth, TX 76107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ballot Application Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/12/2025	Payee name Texas Trade Graphics	
Amount (\$) \$4,059.38	Payee address; City; State; Zip Code 2935 Irving Blvd. #201 Dallas, TX 75247	
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 Yard Signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/19/2025	Payee name Texas Trade Graphics	
Amount (\$) \$1,028.38	Payee address; City; State; Zip Code 2935 Irving Blvd. #201 Dallas, TX 75247	
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 Signs
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: 13/17 Rpt: 59/63	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883
4 Date 08/01/2025	5 Payee name Wells Fargo	
6 Amount (\$) \$9.00	7 Payee address; City; 333 Market Street San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Checks Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/31/2025	Payee name Wells Fargo	
Amount (\$) \$18.00	Payee address; City; 333 Market Street San Francisco, CA 94105	
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 Draft Check Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/03/2025	Payee name Wells Fargo	
Amount (\$) \$9.00	Payee address; City; 333 Market Street San Francisco, CA 94105	
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 Bank Draft 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: 14/17 Rpt: 60/63	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883
4 Date 08/06/2025	5 Payee name Wenske, John	
6 Amount (\$) \$3,250.00	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Moulton, TX 77975	
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 Salaries/Wages
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wenske, John	Office sought Office held
Date 09/08/2025	Payee name Wenske, John	
Amount (\$) \$5,500.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Moulton, TX 77975	
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 Salaries/Wages
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wenske, John	Office sought Office held
Date 10/10/2025	Payee name Wenske, John	
Amount (\$) \$5,500.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Moulton, TX 77975	
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 Salaries/Wages
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wenske, John	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: 15/17 Rpt: 61/63	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883
4 Date 11/04/2025	5 Payee name Wenske, John	
6 Amount (\$) \$5,500.00	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Moulton, TX 77975	
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 Salaries/Wages
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wenske, John	Office sought Office held
Date 12/03/2025	Payee name Wenske, John	
Amount (\$) \$5,500.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Moulton, TX 77975	
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 Salaries/Wages
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name mailchimp	Office sought Office held
Date 07/01/2025	Payee name mailchimp	
Amount (\$) \$98.07	Payee address; City; State; Zip Code 405 N Angier Ave. NE, Atlanta, TX 30308	
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 Email
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name mailchimp	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: 16/17 Rpt: 62/63	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883
4 Date 07/31/2025	5 Payee name mailchimp	
6 Amount (\$) \$233.45	7 Payee address; City; State; Zip Code 405 N Angier Ave. NE, Atlanta, TX 30308	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mail
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/02/2025	Payee name mailchimp	
Amount (\$) \$140.71	Payee address; City; State; Zip Code 405 N Angier Ave. NE, Atlanta, TX 30308	
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 Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/01/2025	Payee name mailchimp	
Amount (\$) \$140.71	Payee address; City; State; Zip Code 405 N Angier Ave. NE, Atlanta, TX 30308	
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 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: 17/17 Rpt: 63/63	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883
4 Date 10/30/2025	5 Payee name mailchimp	
6 Amount (\$) \$140.71	7 Payee address; City; 405 N Angier Ave. NE, Atlanta, TX 30308	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Service Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 12/01/2025	Payee name mailchimp	Office held
Amount (\$) \$140.71	Payee address; City; 405 N Angier Ave. NE, Atlanta, TX 30308	
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 Email Platform Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 12/30/2025	Payee name mailchimp	Office held
Amount (\$) \$140.71	Payee address; City; 405 N Angier Ave. NE, Atlanta, TX 30308	
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 Email Platform Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought