

**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<br>(Ethics Commission Filers)<br>00026389  | 2 Total pages filed:<br>17                                      |        |          |
| 3 CANDIDATE /<br>OFFICEHOLDER<br>NAME   | MS / MRS / MR  | FIRST<br>The Honorable<br>Joseph C. | MI  | <b>OFFICE USE ONLY</b>  |        |          |
|   | NICKNAME   | LAST<br>Joe<br>Pickett              | SUFFIX  | Date Received<br>ELECTRONICALLY FILED<br>01/03/2026             |        |          |
| 4 CANDIDATE /<br>OFFICEHOLDER<br>MAILING<br>ADDRESS<br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY;<br>3606 Wooster Lane<br><br>El Paso, TX 79936   |                                     |   | Date Hand-delivered or Date Postmarked                          |        |          |
|   |  |                                     |   | Receipt #   | Amount |          |
|   |  |                                     |   | Date Processed  |        |          |
|   |  |                                     |   | Date Imaged   |        |          |
| 5 CAMPAIGN<br>TREASURER<br>NAME   | MS / MRS / MR  | FIRST<br>Joseph C.                  | MI  |   |        |          |
|   | NICKNAME   | LAST<br>Pickett                     | SUFFIX  |   |        |          |
| 6 CAMPAIGN<br>TREASURER<br>ADDRESS<br><br>(Residence or Business)                                     | STREET ADDRESS (NO PO BOX PLEASE);<br>3606 Wooster Ln.<br><br>El Paso, TX 79936  |                                     | APT / SUITE #;  | CITY;   | STATE; | ZIP CODE |
| 7 CAMPAIGN<br>TREASURER<br>PHONE  | AREA CODE      PHONE NUMBER      EXTENSION<br>(915) 637-5707   |                                     |   |   |        |          |
| 8 REPORT<br>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)<br><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<br>COVERED   | Month<br>07/01/2025  | Day                                 | Year  | Month<br>12/31/2025   | Day    | Year     |
| 10 ELECTION   | ELECTION DATE<br>Month Day Year  |                                     | ELECTION TYPE<br><input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special |   |        |          |
| 11 OFFICE   | OFFICE HELD (if any)<br>State Representative District 79 El Paso   |                                     |   | 12 OFFICE SOUGHT (if known)<br>State Representative District 79 |        |          |

**GO TO PAGE 2**

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

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

2 of 17

|  |  |                                      |   |
|--|--|--------------------------------------|---|
| 13 C / OH NAME                                 | Pickett, Joseph C. (The Honorable)   |                                      | 14 Filer ID<br>(Ethics Commission Filers)<br>00026389 |
| 15 NOTICE<br>FROM<br>POLITICAL<br>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<br><input type="checkbox"/> GENERAL<br><input type="checkbox"/> SPECIFIC  | COMMITTEE NAME                       |   |
|  |  | COMMITTEE ADDRESS                    |   |
|  |  | COMMITTEE CAMPAIGN TREASURER NAME    |   |
|  |  | COMMITTEE CAMPAIGN TREASURER ADDRESS |   |
| 16 CONTRIBUTION<br>TOTALS                      | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS,<br>OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)   |                                      | \$ 0.00   |
|  | 2. <b>TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)   |                                      | \$ 0.00   |
| EXPENDITURE<br>TOTALS                          | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES   |                                      | \$ 187.00   |
|  | 4. <b>TOTAL POLITICAL EXPENDITURES</b>   |                                      | \$ 9,748.65   |
| CONTRIBUTION<br>BALANCE                        | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE<br>REPORTING PERIOD  |                                      | \$ 217,850.15   |
| OUTSTANDING<br>LOAN TOTALS                     | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY<br>OF THE REPORTING PERIOD   |                                      | \$ 0.00   |

**17 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

The Honorable Joseph C. Pickett

\_\_\_\_\_  
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**

3 of 17

|  |  |
|--|--|
| <b>18</b> FILER NAME<br>Pickett, Joseph C. (The Honorable)   | <b>19</b> Filer ID<br>(Ethics Commission Filers)<br>00026389 |
| <b>20</b> SCHEDULE SUBTOTALS<br>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 checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                               |  |
| 9. <input checked="" 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<br>TO FILER |  |

**LOANS****SCHEDULE E**

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>           |  | <b>1</b> Total pages Schedule E:<br>Sch: 1/1 Rpt: 4/17   |
| <b>2</b> FILER NAME<br>Pickett, Joseph C. (The Honorable)                  |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00026389   |
| <b>4</b> TOTAL OF UNITEMIZED LOANS   |  | \$ 0.00  |
| <b>5</b> Date of loan  | <b>7</b> Name of lender<br><input type="checkbox"/> out-of-state PAC (ID#: _____)          | <b>9</b> Loan Amount (\$)  |
| <b>6</b> Is lender a financial institution?                                | <b>8</b> Lender address; City; State; Zip Code   | <b>10</b> Interest Rate  |
|  |  | <b>11</b> Maturity Date  |
| <b>12</b> Principal occupation / Job title (See Instructions)              |  | <b>13</b> Employer (See Instructions)  |
| <b>14</b> Description of Collateral<br><input type="checkbox"/> None       |  | <b>15</b> Check if personal funds were deposited into political account (See Instructions)<br><input type="checkbox"/> |
| <b>16</b> GUARANTOR INFORMATION<br><input type="checkbox"/> not applicable | <b>17</b> Name of guarantor<br>.....<br><b>18</b> Guarantor address; City; State; Zip Code | <b>19</b> Amount Guaranteed (\$)   |
| <b>20</b> Principal occupation   |  | <b>21</b> 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 -<br>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:<br>Sch: 1/7 Rpt: 5/17         | 2 FILER NAME<br>Pickett, Joseph C. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00026389  |
| 4 Date<br>10/28/2025                                     | 5 Payee name<br>Alpha Insurance   |  |
| 6 Amount (\$)<br>\$277.00                                | 7 Payee address; City;<br>10780 Pebble Hills<br><br>El Paso, TX 79935   |  |
| 8 PURPOSE<br>OF<br>EXPENDITURE                           | (a) Category (See Categories listed at the top of this schedule)<br>Transportation Equipment And Related<br>Expense                               | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>insurance for community cleanup vehicle |
| 9 Complete ONLY if direct<br>expenditure to benefit C/OH | Candidate/Officeholder name<br><br>Christ Child   | Office sought<br><br>Office held   |
| Date<br>11/25/2025                                       | Payee name<br>Christ Child  |  |
| Amount (\$)<br>\$75.00                                   | Payee address; City;<br>10829 Sombra Verde<br><br>El Paso, TX 79935   |  |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Donation                                |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br><br>Down Town Lions club   | Office sought<br><br>Office held   |
| Date<br>11/03/2025                                       | Payee name<br>Down Town Lions club  |  |
| Amount (\$)<br>\$100.00                                  | Payee address; City;<br>7420 N Mesa<br><br>El Paso, TX 79912  |  |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Donation                                |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br><br>Texas Ethics Commission  | Office sought<br><br>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:<br>Sch: 2/7 Rpt: 6/17      | 2 FILER NAME<br>Pickett, Joseph C. (The Honorable)   | 3 Filer ID (Ethics Commission Filers)<br>00026389  |
| 4 Date<br>10/06/2025                                  | 5 Payee name<br>Eastside Democrats   |  |
| 6 Amount (\$)<br>\$35.00                              | 7 Payee address; City;<br>8904 WH Burges<br><br>El Paso, TX 79925  |  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense donation                       |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br><br>Office sought   | Office held  |
| Date<br>07/01/2025                                    | Payee name<br>Gonzalez, Abe  |  |
| Amount (\$)<br>\$130.00                               | Payee address; City;<br>5300 Garfield<br><br>El Paso, TX 79938   |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense Make ready vehicles for Parade |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br><br>Office sought   | Office held  |
| Date<br>12/02/2025                                    | Payee name<br>Harbor Freight   |  |
| Amount (\$)<br>\$20.55                                | Payee address; City;<br>3333 Yarbrough<br><br>El Paso, TX 79935  |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>supplies   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense clean up supplies/ tools       |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br><br>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:<br>Sch: 3/7 Rpt: 7/17      | 2 FILER NAME<br>Pickett, Joseph C. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00026389  |             |
| 4 Date<br>07/25/2025                                  | 5 Payee name<br>Munoz, Ruben  |  |             |
| 6 Amount (\$)<br>\$1,060.00                           | 7 Payee address; City;<br>3648 Wooster<br><br>El Paso, TX 79936                                   |  |             |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Community cleanup |             |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Munoz, Ruben   | Office sought<br>El Paso, TX 79936   | Office held |
| Date<br>08/29/2025                                    | Payee name<br>Munoz, Ruben  |  |             |
| Amount (\$)<br>\$1,325.00                             | Payee address; City;<br>3648 Wooster<br><br>El Paso, TX 79936                                     |  |             |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Community cleanup |             |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Munoz, Ruben   | Office sought<br>El Paso, TX 79936   | Office held |
| Date<br>09/26/2025                                    | Payee name<br>Munoz, Ruben  |  |             |
| Amount (\$)<br>\$1,325.00                             | Payee address; City;<br>3648 Wooster<br><br>El Paso, TX 79936                                     |  |             |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Community cleanup |             |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Munoz, Ruben   | Office sought<br>El Paso, TX 79936   | 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:<br>Sch: 4/7 Rpt: 8/17      | 2 FILER NAME<br>Pickett, Joseph C. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00026389   |             |
| 4 Date<br>10/31/2025                                  | 5 Payee name<br>Munoz, Ruben  |   |             |
| 6 Amount (\$)<br>\$1,325.00                           | 7 Payee address; City;<br>3648 Wooster<br><br>El Paso, TX 79936                                   |   |             |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense community cleanup       |             |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Munoz, Ruben   | Office sought<br>El Paso, TX 79936  | Office held |
| Date<br>11/26/2025                                    | Payee name<br>Munoz, Ruben  |   |             |
| Amount (\$)<br>\$1,060.00                             | Payee address; City;<br>3648 Wooster<br><br>El Paso, TX 79936                                     |   |             |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense community cleanup       |             |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Munoz, Ruben   | Office sought<br>El Paso, TX 79936  | Office held |
| Date<br>12/31/2025                                    | Payee name<br>Munoz, Ruben  |   |             |
| Amount (\$)<br>\$1,325.00                             | Payee address; City;<br>3648 Wooster<br><br>El Paso, TX 79936                                     |   |             |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense Community clean up work |             |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Munoz, Ruben   | Office sought<br>El Paso, TX 79936  | 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 -<br>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:<br>Sch: 5/7 Rpt: 9/17         | 2 FILER NAME<br>Pickett, Joseph C. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00026389   |
| 4 Date<br>11/12/2025                                     | 5 Payee name<br>Public Broadcasting Station   |   |
| 6 Amount (\$)<br>\$100.00                                | 7 Payee address; City;<br>7500 Viscount C33<br><br>El Paso, TX 79925  |   |
| 8 PURPOSE<br>OF<br>EXPENDITURE                           | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Donation                                   |
| 9 Complete ONLY if direct<br>expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought  | Office held   |
| Date<br>12/22/2025                                       | Payee name<br>Rescue Mission Of El Paso   |   |
| Amount (\$)<br>\$50.00                                   | Payee address; City;<br>209 N. Lee Street<br><br>El Paso, TX 79901  |   |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Donation                                   |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held   |
| Date<br>07/28/2025                                       | Payee name<br>VISA  |   |
| Amount (\$)<br>\$136.16                                  | Payee address; City;<br>P.O. Box 15298<br><br>Wilmington, DE 19850-5298   |   |
| PURPOSE<br>OF<br>EXPENDITURE                             | (a) Category (See Categories listed at the top of this schedule)<br>Credit Card Payment   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>pay for credit card expenditureds itemized |
| Complete ONLY if direct<br>expenditure to benefit C/OH   | Candidate/Officeholder name<br>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:<br>Sch: 6/7 Rpt: 10/17     | 2 FILER NAME<br>Pickett, Joseph C. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00026389  |
| 4 Date<br>08/28/2025                                  | 5 Payee name<br>VISA  |  |
| 6 Amount (\$)<br>\$133.78                             | 7 Payee address; City; State; Zip Code<br>P.O. Box 15298<br><br>Wilmington, DE 19850-5298 |  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Credit Card Payment   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>pay for credit card expenditures itemized |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought  | Office held  |
| Date<br>09/28/2025                                    | Payee name<br>VISA  |  |
| Amount (\$)<br>\$69.83                                | Payee address; City; State; Zip Code<br>P.O. Box 15298<br><br>Wilmington, DE 19850-5298   |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Credit Card Payment   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>pay for credit card expenditures itemized |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held  |
| Date<br>10/28/2025                                    | Payee name<br>VISA  |  |
| Amount (\$)<br>\$105.13                               | Payee address; City; State; Zip Code<br>P.O. Box 15298<br><br>Wilmington, DE 19850-5298   |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Credit Card Payment   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>pay for credit card expenditures itemized |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>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:<br>Sch: 7/7 Rpt: 11/17     | 2 FILER NAME<br>Pickett, Joseph C. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00026389  |
| 4 Date<br>11/28/2025                                  | 5 Payee name<br>VISA  |  |
| 6 Amount (\$)<br>\$127.58                             | 7 Payee address; City; State; Zip Code<br>P.O. Box 15298<br><br>Wilmington, DE 19850-5298 |  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Credit Card Payment   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>pay for credit card expenditures itemized     |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought  | Office held  |
| Date<br>12/28/2025                                    | Payee name<br>VISA  |  |
| Amount (\$)<br>\$83.29                                | Payee address; City; State; Zip Code<br>P.O. Box 15298<br><br>Wilmington, DE 19850-5298   |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Credit Card Payment   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>credit card payment for itemized expenditures |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held  |
| Date<br>12/23/2025                                    | Payee name<br>cafe east   |  |
| Amount (\$)<br>\$42.56                                | Payee address; City; State; Zip Code<br>11251 Rojas<br><br>El Paso, TX 79936              |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense         | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>political meeting                             |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held  |

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

|   |   |                                  |  |
|---|---|----------------------------------|--|
| 1 Total pages Schedule F4:<br>Sch: 1/6 Rpt: 12/17   | 2 FILER NAME<br>Pickett, Joseph C. (The Honorable)  |                                  | 3 Filer ID (Ethics Commission Filers)<br>00026389                                      |
| 4 CREDIT CARD ISSUER  | Name of financial institution<br>Chase/visa   |                                  | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD<br>\$                      |
| 6 PAYMENT   | (a) Amount Charged<br>\$24.00   | (b) Date of Charge<br>07/02/2025 | (c) Date(s) Credit Card Issuer Paid<br>07/28/2025                                      |
| 7 PAYEE   | (a) Payee name<br>Circle K  |                                  | (b) Payee address; City, State, Zip Code<br>11302 Montana Ave<br><br>El Paso, TX 79936 |
| 8 PURPOSE OF EXPENDITURE<br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political | (a) Category<br>(See Categories listed at the top of this schedule)<br>Transportation Equipment And Related Expense |                                  | (b) Description<br>fuel for truck used for community clean up                          |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |                                  | Office sought<br>Office held   |
| PAYMENT   | (a) Amount Charged<br>\$30.16   | (b) Date of Charge<br>08/09/2025 | (c) Date(s) Credit Card Issuer Paid<br>08/28/2025                                      |
| PAYEE   | (a) Payee name<br>Circle K  |                                  | (b) Payee address; City, State, Zip Code<br>11302 Montana Ave<br><br>El Paso, TX 79936 |
| PURPOSE OF EXPENDITURE<br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>Transportation Equipment And Related Expense |                                  | (b) Description<br>fuel for community use of truck for clean up                        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |                                  | Office sought<br>Office held   |
| PAYMENT   | (a) Amount Charged<br>\$73.68   | (b) Date of Charge<br>08/26/2025 | (c) Date(s) Credit Card Issuer Paid<br>08/28/2025                                      |
| PAYEE   | (a) Payee name<br>Reidland Automotive   |                                  | (b) Payee address; City, State, Zip Code<br>3610 Wooster<br><br>El Paso, TX 79936      |
| PURPOSE OF EXPENDITURE<br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>Transportation Equipment And Related Expense |                                  | (b) Description<br>repair of community use truck                                       |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |                                  | Office sought<br>Office held   |

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |                                  |  |
|---|---|----------------------------------|--|
| 1 Total pages Schedule F4:<br>Sch: 2/6 Rpt: 13/17   | 2 FILER NAME<br>Pickett, Joseph C. (The Honorable)  |                                  | 3 Filer ID (Ethics Commission Filers)<br>00026389                                      |
| 4 CREDIT CARD ISSUER  | Name of financial institution<br>see previous   |                                  | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD<br>\$                      |
| 6 PAYMENT   | (a) Amount Charged<br>\$29.94   | (b) Date of Charge<br>08/25/2025 | (c) Date(s) Credit Card Issuer Paid<br>08/28/2025                                      |
| 7 PAYEE   | (a) Payee name<br>Circle K  |                                  | (b) Payee address; City, State, Zip Code<br>11302 Montana Ave<br><br>El Paso, TX 79936 |
| 8 PURPOSE OF EXPENDITURE<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political                                       | (a) Category<br>(See Categories listed at the top of this schedule)<br>Transportation Equipment And Related Expense |                                  | (b) Description<br>fuel for community use of truck for clean up                        |
| (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |   |                                  |  |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |                                  | Office sought      Office held   |
| PAYMENT   | (a) Amount Charged<br>\$18.37   | (b) Date of Charge<br>09/23/2025 | (c) Date(s) Credit Card Issuer Paid<br>09/30/2025                                      |
| PAYEE   | (a) Payee name<br>Harbor Freight  |                                  | (b) Payee address; City, State, Zip Code<br>3333 Yarbrough<br><br>El Paso, TX 79935    |
| PURPOSE OF EXPENDITURE<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense               |                                  | (b) Description<br>tools for clean up  |
| (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |   |                                  |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |                                  | Office sought      Office held   |
| PAYMENT   | (a) Amount Charged<br>\$64.23   | (b) Date of Charge<br>10/01/2025 | (c) Date(s) Credit Card Issuer Paid<br>10/28/2025                                      |
| PAYEE   | (a) Payee name<br>Great American Restaurant   |                                  | (b) Payee address; City, State, Zip Code<br>2220 Yarbrough<br><br>El Paso, TX 79925    |
| PURPOSE OF EXPENDITURE<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>Event Expense                                |                                  | (b) Description<br>political meeting   |
| (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |   |                                  |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |                                  | Office sought      Office held   |

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |                                  |  |
|---|---|----------------------------------|--|
| 1 Total pages Schedule F4:<br>Sch: 3/6 Rpt: 14/17   | 2 FILER NAME<br>Pickett, Joseph C. (The Honorable)  |                                  | 3 Filer ID (Ethics Commission Filers)<br>00026389  |
| 4 CREDIT CARD ISSUER  | Name of financial institution<br>see previous   |                                  | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD<br>\$                            |
| 6 PAYMENT   | (a) Amount Charged<br>\$47.61   | (b) Date of Charge<br>11/10/2025 | (c) Date(s) Credit Card Issuer Paid<br>11/28/2025  |
| 7 PAYEE   | (a) Payee name<br>Mi Pueblo Nevo  |                                  | (b) Payee address; City, State, Zip Code<br>5630 Gateway Blvd. East<br><br>El Paso, TX 79905 |
| 8 PURPOSE OF EXPENDITURE<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political | (a) Category<br>(See Categories listed at the top of this schedule)<br>Food/Beverage Expense                        |                                  | (b) Description<br>political meeting   |
|   | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                                 |                                  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense                    |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |                                  | Office sought      Office held   |
| PAYMENT   | (a) Amount Charged<br>\$52.81   | (b) Date of Charge<br>11/11/2025 | (c) Date(s) Credit Card Issuer Paid<br>11/28/2025  |
| PAYEE   | (a) Payee name<br>cafe east   |                                  | (b) Payee address; City, State, Zip Code<br>11251 Rojas<br><br>El Paso, TX 79936             |
| PURPOSE OF EXPENDITURE<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>Food/Beverage Expense                        |                                  | (b) Description<br>political meeting   |
|   | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                                 |                                  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense                    |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |                                  | Office sought      Office held   |
| PAYMENT   | (a) Amount Charged<br>\$27.16   | (b) Date of Charge<br>11/13/2025 | (c) Date(s) Credit Card Issuer Paid<br>11/28/2025  |
| PAYEE   | (a) Payee name<br>Circle K  |                                  | (b) Payee address; City, State, Zip Code<br>11302 Montana Ave<br><br>El Paso, TX 79936       |
| PURPOSE OF EXPENDITURE<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>Transportation Equipment And Related Expense |                                  | (b) Description<br>fuel for equipment and truck for community clean up                       |
|   | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.                                 |                                  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense                    |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |                                  | Office sought      Office held   |

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

|   |  |                                  |   |
|---|--|----------------------------------|---|
| 1 Total pages Schedule F4:<br>Sch: 4/6 Rpt: 15/17   | 2 FILER NAME<br>Pickett, Joseph C. (The Honorable)   |                                  | 3 Filer ID (Ethics Commission Filers)<br>00026389   |
| 4 CREDIT CARD ISSUER  | Name of financial institution<br>see previous  |                                  | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD<br>\$   |
| 6 PAYMENT   | (a) Amount Charged<br>\$64.09  | (b) Date of Charge<br>07/01/2025 | (c) Date(s) Credit Card Issuer Paid<br>07/28/2025   |
| 7 PAYEE   | (a) Payee name<br>Wal-Mart   |                                  | (b) Payee address; City, State, Zip Code<br>12236 Montana Ave<br><br>El Paso, TX 79936  |
| 8 PURPOSE OF EXPENDITURE<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political | (a) Category<br>(See Categories listed at the top of this schedule)<br>supplies              |                                  | (b) Description<br>community clean up supplies, bags, etc   |
|   |  |                                  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  |                                  | Office sought      Office held  |
| PAYMENT   | (a) Amount Charged<br>\$48.07  | (b) Date of Charge<br>07/22/2025 | (c) Date(s) Credit Card Issuer Paid<br>07/28/2025   |
| PAYEE   | (a) Payee name<br>cafe east  |                                  | (b) Payee address; City, State, Zip Code<br>11251 Rojas<br><br>El Paso, TX 79936  |
| PURPOSE OF EXPENDITURE<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>Food/Beverage Expense |                                  | (b) Description<br>political meeting  |
|   |  |                                  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  |                                  | Office sought      Office held  |
| PAYMENT   | (a) Amount Charged<br>\$51.46  | (b) Date of Charge<br>09/23/2025 | (c) Date(s) Credit Card Issuer Paid<br>09/30/2025   |
| PAYEE   | (a) Payee name<br>cafe east  |                                  | (b) Payee address; City, State, Zip Code<br>11251 Rojas<br><br>El Paso, TX 79936  |
| PURPOSE OF EXPENDITURE<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>Food/Beverage Expense |                                  | (b) Description<br>political meeting  |
|   |  |                                  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  |                                  | Office sought      Office held  |

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |                                  |   |
|---|---|----------------------------------|---|
| 1 Total pages Schedule F4:<br>Sch: 5/6 Rpt: 16/17   | 2 FILER NAME<br>Pickett, Joseph C. (The Honorable)  |                                  | 3 Filer ID (Ethics Commission Filers)<br>00026389                                   |
| 4 CREDIT CARD ISSUER  | Name of financial institution<br>see previous   |                                  | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD<br>\$                   |
| 6 PAYMENT   | (a) Amount Charged<br>\$10.90   | (b) Date of Charge<br>10/07/2025 | (c) Date(s) Credit Card Issuer Paid<br>10/28/2025                                   |
| 7 PAYEE   | (a) Payee name<br>dollar general  |                                  | (b) Payee address; City, State, Zip Code<br>3350 George Dieter<br>El Paso, TX 79936 |
| 8 PURPOSE OF EXPENDITURE<br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>supplies                                     |                                  | (b) Description<br>cleaning supplies for community clean up                         |
| (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |   |                                  |   |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |                                  | Office sought<br>Office held  |
| PAYMENT   | (a) Amount Charged<br>\$30.00   | (b) Date of Charge<br>10/24/2025 | (c) Date(s) Credit Card Issuer Paid<br>10/28/2025                                   |
| PAYEE   | (a) Payee name<br>Circle K  |                                  | (b) Payee address; City, State, Zip Code<br>11302 Montana Ave<br>El Paso, TX 79936  |
| PURPOSE OF EXPENDITURE<br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>Transportation Equipment And Related Expense |                                  | (b) Description<br>fuel for equipment and truck community clean up                  |
| (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |   |                                  |   |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |                                  | Office sought<br>Office held  |
| PAYMENT   | (a) Amount Charged<br>\$42.15   | (b) Date of Charge<br>12/16/2025 | (c) Date(s) Credit Card Issuer Paid   |
| PAYEE   | (a) Payee name<br>cafe east   |                                  | (b) Payee address; City, State, Zip Code<br>11251 Rojas<br>El Paso, TX 79936        |
| PURPOSE OF EXPENDITURE<br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>Food/Beverage Expense                        |                                  | (b) Description<br>political meeting  |
| (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |   |                                  |   |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |                                  | Office sought<br>Office held  |

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |                                  |  |
|---|---|----------------------------------|--|
| 1 Total pages Schedule F4:<br>Sch: 6/6 Rpt: 17/17   | 2 FILER NAME<br>Pickett, Joseph C. (The Honorable)  |                                  | 3 Filer ID (Ethics Commission Filers)<br>00026389                                      |
| 4 CREDIT CARD ISSUER  | Name of financial institution<br>see previous   |                                  | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD<br>\$                      |
| 6 PAYMENT   | (a) Amount Charged<br>\$21.03   | (b) Date of Charge<br>12/18/2025 | (c) Date(s) Credit Card Issuer Paid  |
| 7 PAYEE   | (a) Payee name<br>Circle K  |                                  | (b) Payee address; City, State, Zip Code<br>11302 Montana Ave<br><br>El Paso, TX 79936 |
| 8 PURPOSE OF EXPENDITURE<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political | (a) Category<br>(See Categories listed at the top of this schedule)<br>Transportation Equipment And Related Expense   |                                  | (b) Description<br>fuel for community clean up truck                                   |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |                                  |  |
| PAYMENT   | (a) Amount Charged<br>\$20.11   | (b) Date of Charge<br>12/13/2025 | (c) Date(s) Credit Card Issuer Paid  |
| PAYEE   | (a) Payee name<br>what a burger   |                                  | (b) Payee address; City, State, Zip Code<br>9500 Montana Ave<br><br>El Paso, TX 79925  |
| PURPOSE OF EXPENDITURE<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>Food/Beverage Expense  |                                  | (b) Description<br>food for volunteer  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |                                  |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |                                  | Office sought  |
|   |   |                                  | Office held  |