

**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) 00089880 | 2 Total pages filed: 31 | | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR Mrs. | FIRST Ellen | MI | OFFICE USE ONLY | | |
| | NICKNAME | LAST Sorrells Fleischmann | 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; 3540 E. Broad St. Ste. 120-249 Mansfield, TX 76063 | | | Date Hand-delivered or Date Postmarked | | |
| | | | | Receipt # | Amount | |
| | | | | Date Processed | | |
| | | | | Date Imaged | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR Mrs. | FIRST Susan H. | MI | | | |
| | NICKNAME | LAST Sorrells | SUFFIX | | | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); 209 W. 2nd St. Ste. 365 Fort Worth, TX 76102 | | APT / SUITE #; | CITY; | STATE; | ZIP CODE |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (817) 929-9395 | | | | | |
| 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 07/18/2025 | 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) | | | 12 OFFICE SOUGHT (if known) State Representative District 96 | | |

GO TO PAGE 2

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

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

2 of 31

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|--|--|--------------------------------------|---|
| 13 C / OH NAME | Sorrells Fleischmann, Ellen (Mrs.) | | 14 Filer ID (Ethics Commission Filers) 00089880 |
| 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) | | \$ 158,920.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | | \$ 434.40 |
| | 4. TOTAL POLITICAL EXPENDITURES | | \$ 35,343.84 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | | \$ 125,358.12 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | | \$ 0.00 |

17 AFFIDAVIT

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

Mrs. Ellen Sorrells Fleischmann

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 31

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|--|--|
| 18 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | 19 Filer ID (Ethics Commission Filers) 00089880 |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | |
| 1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | |
| 2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | |
| 3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | |
| 4. <input type="checkbox"/> SCHEDULE E: LOANS | |
| 5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | |
| 6. <input checked="" 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 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 TO FILER | |
| SUBTOTAL AMOUNT | |
| \$ 158,170.00 | |
| \$ 750.00 | |
| \$ | |
| \$ | |
| \$ 32,796.88 | |
| \$ 378.88 | |
| \$ | |
| \$ | |
| \$ 2,168.08 | |
| \$ | |
| \$ | |
| \$ | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/18 Rpt: 4/31 |
| 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 12/17/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allman, Allison 6 Contributor address; City; State; Zip Code Fort Worth, TX 76116 | 7 Amount of Contribution (\$) \$100.00 |
| | 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
| Date 12/17/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allman, Braden Contributor address; City; State; Zip Code Fort Worth, TX 76116 | Amount of Contribution (\$) \$100.00 |
| | Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
| Date 07/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BPA PAC Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of Contribution (\$) \$1,000.00 |
| | Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
| Date 10/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bazan, Jorge Contributor address; City; State; Zip Code River Oaks, TX 76114 | Amount of Contribution (\$) \$250.00 |
| | Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
| Date 12/23/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boren, Gary Contributor address; City; State; Zip Code Lubbock, TX 79407 | Amount of Contribution (\$) \$250.00 |
| | 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: 2/18 Rpt: 5/31 |
| 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 10/16/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brauer, Steve | 7 Amount of Contribution (\$) \$5,000.00 |
| | 6 Contributor address; City; State; Zip Code Fort Worth, TX 76107 | |
| 8 Principal occupation / Job title (See Instructions) Sales | | 9 Employer (See Instructions) Self Employed |
| Date 11/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brummitt, Rachel | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Littleton, CO 80120 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, WR | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Lubbock, TX 79408 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 07/27/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Counts, Jill | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Midland , TX 79707 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crim, Brittany | Amount of Contribution (\$) \$50.00 |
| | Contributor address; City; State; Zip Code Fort Worth, TX 76179 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/18 Rpt: 6/31 |
| 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 08/06/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Culp, Tim | 7 Amount of Contribution (\$) \$2,500.00 |
| | 6 Contributor address; City; State; Zip Code Midland, TX 79705 | |
| 8 Principal occupation / Job title (See Instructions) Oil and Gas | | 9 Employer (See Instructions) Self |
| Date 08/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DTH Strategies, LLC | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78701 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dalby, Michael | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Lubbock, TX 79407 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Cook Campaign | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code Mansfield, TX 76063 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/27/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fielder, Taylor | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Hurst, TX 76053 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/18 Rpt: 7/31 |
| 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 11/13/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Catarina | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code Austin, TX 78702 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 12/23/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOMEPAc of the Texas Assn. of Builders | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78701 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 08/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Sally | Amount of Contribution (\$) \$200.00 |
| | Contributor address; City; State; Zip Code Fairview , TX 75069 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 07/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hance, Carol | Amount of Contribution (\$) \$2,000.00 |
| | Contributor address; City; State; Zip Code Fort Worth, TX 76123 | |
| Principal occupation / Job title (See Instructions) Homemaker | | Employer (See Instructions) Homemaker |
| Date 12/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hance, Kent | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Lubbock , TX 79409 | |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/18 Rpt: 8/31 |
| 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 08/15/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hance, Kent 6 Contributor address; City; State; Zip Code Lubbock , TX 79409 | 7 Amount of Contribution (\$) \$25,000.00 |
| 8 Principal occupation / Job title (See Instructions) Lawyer | | 9 Employer (See Instructions) Self |
| Date 11/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hance Jr., Kent Contributor address; City; State; Zip Code Fort Worth, TX 76185 | Amount of Contribution (\$) \$1,000.00 |
| 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#: _____) Hanna, Amanda Contributor address; City; State; Zip Code Mansfield, TX 76063 | Amount of Contribution (\$) \$25.00 |
| 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#: _____) Hanna, Amanda Contributor address; City; State; Zip Code Mansfield, TX 76063 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanson, Mark Contributor address; City; State; Zip Code Arlington, TX 76012 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/18 Rpt: 9/31 |
| 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 11/20/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hays, Charlie 6 Contributor address; City; State; Zip Code Waco, TX 76710 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 07/24/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HillCo PAC Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 08/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hsu, Chi-Kao (Dr.) Contributor address; City; State; Zip Code Austin, TX 78751 | Amount of Contribution (\$) \$25,000.00 |
| Principal occupation / Job title (See Instructions) Real Estate/Engineer | | Employer (See Instructions) Self |
| Date 10/01/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Tom Contributor address; City; State; Zip Code Dallas, TX 75225 | Amount of Contribution (\$) \$200.00 |
| 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#: _____) Jones, Stephen Contributor address; City; State; Zip Code Dallas, TX 75208 | Amount of Contribution (\$) \$100.00 |
| 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: 7/18 Rpt: 10/31 |
| 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 11/18/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Brent | 7 Amount of Contribution (\$) \$500.00 |
| | 6 Contributor address; City; State; Zip Code Midland, TX 79708 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 11/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kent, William | Amount of Contribution (\$) \$7,500.00 |
| | Contributor address; City; State; Zip Code Midland, TX 79708 | |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) The Kent Companies |
| Date 11/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kramer, Melody | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75225 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, J Michael | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75205 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/23/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lofton, Trey | Amount of Contribution (\$) \$200.00 |
| | Contributor address; City; State; Zip Code Aledo, TX 76008 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---|---|---|---|
| The Instruction Guide explains how to complete this form. | | | 1 Total pages Schedule A1: Sch: 8/18 Rpt: 11/31 |
| 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | | | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 11/14/2025 | 5 Full name of contributor Lusk, Ron | <input type="checkbox"/> out-of-state PAC (ID#:) | 7 Amount of Contribution (\$) \$500.00 |
| | 6 Contributor address; City; State; Zip Code Dallas, TX 75209 | | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) | |
| Date 11/26/2025 | Full name of contributor Malouf, Matthew | | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75219 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 11/12/2025 | Full name of contributor Martin, Melissa | | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75254 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 11/26/2025 | Full name of contributor McCaslin Jr., Carl | | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75230 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 08/22/2025 | Full name of contributor McNeese, Keith | | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code Lubbock , TX 79423 | | |
| Principal occupation / Job title (See Instructions) Real Estate/Business Development | | Employer (See Instructions) Self | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/18 Rpt: 12/31 |
| 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 12/12/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNelly, John | 7 Amount of Contribution (\$) \$200.00 |
| | 6 Contributor address; City; State; Zip Code Lubbock, TX 79410 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 11/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyers, LD | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Washington, DC 20003 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Charlie | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75225 | |
| 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#: _____) Moen, Taylor | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Mansfield, TX 76063 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/24/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montpas, David | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Helotes, TX 78023 | |
| 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: 10/18 Rpt: 13/31 |
| 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 11/26/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Lance | 7 Amount of Contribution (\$) \$500.00 |
| | 6 Contributor address; City; State; Zip Code Austin, TX 78704 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 11/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neal, Nancy | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Lubbock, TX 79407 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/02/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orwig, Matthew | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75231 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 08/07/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, Kelsey | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78703 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 07/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsley, Lee | Amount of Contribution (\$) \$2,000.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78703 | |
| Principal occupation / Job title (See Instructions) General Counsel | | Employer (See Instructions) Texans for Lawsuit Reform |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 11/18 Rpt: 14/31 |
| 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 11/20/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pawelek, Jacy | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 11/25/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickett, Whitney | Amount of Contribution (\$) \$20.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78741 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/23/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prichard, David | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78218 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/23/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert T Dickson Revocable Trust | Amount of Contribution (\$) \$505.00 |
| | Contributor address; City; State; Zip Code Midland, TX 79707 | |
| 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#: _____) Rodgers, Danielle | Amount of Contribution (\$) \$50.00 |
| | Contributor address; City; State; Zip Code Mansfield, TX 76063 | |
| 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: 12/18 Rpt: 15/31 |
| 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 12/23/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roger Dickson Trust 6 Contributor address; City; State; Zip Code Midland, TX 79707 | 7 Amount of Contribution (\$) \$247.50 |
| | 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
| Date 11/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Doss Contributor address; City; State; Zip Code Midland, TX 79704 | Amount of Contribution (\$) \$500.00 |
| | Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
| Date 11/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rykhoek, Chad Contributor address; City; State; Zip Code Justin, TX 76247 | Amount of Contribution (\$) \$50.00 |
| | 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#: _____) Sanchez, Angela Contributor address; City; State; Zip Code Venus, TX 76084 | Amount of Contribution (\$) \$50.00 |
| | Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
| Date 12/23/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Dickson Trust Contributor address; City; State; Zip Code Midland, TX 79707 | Amount of Contribution (\$) \$247.50 |
| | 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: 13/18 Rpt: 16/31 |
| 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 10/01/2025 | 5 Full name of contributor Sheets, Nathan 6 Contributor address; City; State; Zip Code Frisco, TX 75035 | 7 Amount of Contribution (\$) \$500.00 |
| | 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
| Date 11/26/2025 | Full name of contributor Sherwood, Steven Contributor address; City; State; Zip Code Newport Beach, CA 92660 | Amount of Contribution (\$) \$5,000.00 |
| | Principal occupation / Job title (See Instructions) Partner | Employer (See Instructions) CWS Capital Partners |
| Date 11/19/2025 | Full name of contributor Siler, Ronald Contributor address; City; State; Zip Code Fort Worth, TX 76109 | Amount of Contribution (\$) \$300.00 |
| | Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
| Date 08/04/2025 | Full name of contributor Sinclair, Donald Contributor address; City; State; Zip Code Houston , TX 77005 | Amount of Contribution (\$) \$10,000.00 |
| | Principal occupation / Job title (See Instructions) Oil and Gas | Employer (See Instructions) Self |
| Date 09/17/2025 | Full name of contributor Sorrells, Susan Contributor address; City; State; Zip Code North Richland Hills, TX 76180 | Amount of Contribution (\$) \$2,000.00 |
| | 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: 14/18 Rpt: 17/31 |
| 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 08/07/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sorrells, Susan | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code North Richland Hills, TX 76182 | |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) Self |
| Date 07/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparks, Grant | Amount of Contribution (\$) \$200.00 |
| | Contributor address; City; State; Zip Code West Lake Hills, TX 78746 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparks, Grant | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code West Lake Hills, TX 78746 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spence, Logan | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78737 | |
| 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#: _____) Steppick, Emily | Amount of Contribution (\$) \$200.00 |
| | Contributor address; City; State; Zip Code Westworth Village, TX 76114 | |
| 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: 15/18 Rpt: 18/31 |
| 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 10/01/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevenson, Randy | 7 Amount of Contribution (\$) \$10,000.00 |
| | 6 Contributor address; City; State; Zip Code Arlington, TX 76016 | |
| 8 Principal occupation / Job title (See Instructions) Developer | | 9 Employer (See Instructions) Self |
| Date 11/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strickling, Ben | Amount of Contribution (\$) \$1,500.00 |
| | Contributor address; City; State; Zip Code Midland, TX 79705 | |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) Deleware Basin Resources |
| Date 12/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Tommy | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Midland, TX 79707 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/26/2025 | Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00588657) Texans for Jodey Arrington | Amount of Contribution (\$) \$2,000.00 |
| | Contributor address; City; State; Zip Code Lubbock, TX 79493 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform PAC | Amount of Contribution (\$) \$10,000.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78701 | |
| 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: 16/18 Rpt: 19/31 |
| 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 12/17/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform PAC 6 Contributor address; City; State; Zip Code Austin, TX 78701 | 7 Amount of Contribution (\$) \$10,000.00 |
| | 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) | |
| Date 11/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Optometric PAC Austin, TX 78705 | Amount of Contribution (\$) \$1,000.00 |
| | Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Society Of Anesthesiologists PAC Austin, TX 78701 | Amount of Contribution (\$) \$1,500.00 |
| | Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
| Date 12/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Beer Alliance of Texas PAC Austin, TX 78701 | Amount of Contribution (\$) \$1,000.00 |
| | Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
| Date 12/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Chickasaw Nation Ada, OK 74820 | Amount of Contribution (\$) \$2,500.00 |
| | 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: 17/18 Rpt: 20/31 |
| 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 11/19/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trotter, Johnny 6 Contributor address; City; State; Zip Code Hereford, TX 79045 | 7 Amount of Contribution (\$) \$1,000.00 |
| | 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
| Date 11/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Paul Contributor address; City; State; Zip Code Austin, TX 78735 | Amount of Contribution (\$) \$100.00 |
| | Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
| Date 12/23/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Russell Contributor address; City; State; Zip Code Grapevine, TX 76051 | Amount of Contribution (\$) \$250.00 |
| | Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
| Date 11/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitacre Jr., Edward Contributor address; City; State; Zip Code San Antonio, TX 78212 | Amount of Contribution (\$) \$500.00 |
| | Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
| Date 12/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whiteside, Paige Contributor address; City; State; Zip Code Galveston, TX 77554 | Amount of Contribution (\$) \$300.00 |
| | 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: 18/18 Rpt: 21/31 |
| 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | | | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 08/30/2025 | 5 Full name of contributor Wolfe, Sarah 6 Contributor address; City; State; Zip Code Fort Worth, TX 76132 | 7 Amount of Contribution (\$) \$500.00 | |
| 8 Principal occupation / Job title (See Instructions) Board Member | | 9 Employer (See Instructions) Tyler Technology | |
| Date 11/12/2025 | Full name of contributor Womble, Dustin Contributor address; City; State; Zip Code Lubbock, TX 79407 | Amount of Contribution (\$) \$4,000.00 | |
| | | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | |
|---|--|---|
| <p>The Instruction Guide explains how to complete this form.</p> | | <p>1 Total pages Schedule A2: Sch: 1/1 Rpt: 22/31</p> |
| <p>2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.)</p> | | <p>3 Filer ID (Ethics Commission Filers) 00089880</p> |
| <p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p> | | <p>\$</p> |
| <p>5 Date 10/28/2025</p> | <p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Anchors Event Center, LLC</p> <p>7 Contributor address; City; State; Zip Code Mansfield, TX 76063</p> | <p>8 Amount of contribution (\$) \$750.00</p> <p>9 In-kind contribution description Use of Facility for Fundraiser</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p> |
| <p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p> | | <p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p> |
| <p>12 Contributor's principal occupation (FOR JUDICIAL)</p> | | <p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p> |
| <p>14 Contributor's employer/law firm (FOR JUDICIAL)</p> | | <p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p> |
| <p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p> | | |

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: 1/7 Rpt: 23/31 | 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 08/30/2025 | 5 Payee name Anedot Inc | |
| 6 Amount (\$) \$250.60 | 7 Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 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 Processing Fees for Online Campaign Contributions: Aug 30 - Dec 17 |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 09/24/2025 | Payee name Catalyst Advisors Group | |
| Amount (\$) \$2,500.00 | Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701 | |
| 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 Design, Development and Hosting of Campaign Website |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 09/10/2025 | Payee name Catalyst Advisors Group | |
| Amount (\$) \$259.05 | Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701 | |
| 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 Design and Production of Campaign Materials |
| 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: 2/7 Rpt: 24/31 | 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 09/24/2025 | 5 Payee name Catalyst Advisors Group | |
| 6 Amount (\$) \$150.00 | 7 Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Delivery of Campaign Materials |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/01/2025 | Payee name Catalyst Advisors Group | |
| Amount (\$) \$8,000.00 | Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/15/2025 | Payee name Catalyst Advisors Group | |
| Amount (\$) \$1,000.00 | Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 3/7 Rpt: 25/31 | 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 10/01/2025 | 5 Payee name Catalyst Advisors Group | |
| 6 Amount (\$) \$778.88 | 7 Payee address; City; 1108 Lavaca St 110-506 Austin, TX 78701 | |
| 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 Grassroots Advertising Expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/31/2025 | Payee name Catalyst Advisors Group | |
| Amount (\$) \$778.88 | Payee address; City; 1108 Lavaca St 110-506 Austin, TX 78701 | |
| 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 Grassroots Advertising Expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/01/2025 | Payee name Catalyst Advisors Group | |
| Amount (\$) \$707.11 | Payee address; City; 1108 Lavaca St 110-506 Austin, TX 78701 | |
| 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 Design and Production of Campaign Materials |
| 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: 4/7 Rpt: 26/31 | 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 11/01/2025 | 5 Payee name Catalyst Advisors Group | |
| 6 Amount (\$) \$4,500.00 | 7 Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701 | |
| 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 Design and Placement of Digital Campaign Advertisements |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/01/2025 | Payee name Catalyst Advisors Group | |
| Amount (\$) \$4,000.00 | Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/31/2025 | Payee name Catalyst Advisors Group | |
| Amount (\$) \$550.00 | Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Data Consulting Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 5/7 Rpt: 27/31 | 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 11/05/2025 | 5 Payee name Catalyst Advisors Group | |
| 6 Amount (\$) \$1,810.55 | 7 Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701 | |
| 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 Design and Distribution of Digital Campaign Messages |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/28/2025 | Payee name Catalyst Advisors Group | |
| Amount (\$) \$142.89 | Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701 | |
| 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 Design and Production of Campaign Materials |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/03/2025 | Payee name Catalyst Advisors Group | |
| Amount (\$) \$325.00 | Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701 | |
| 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 Design and Distribution of Campaign Email Advertisements |
| 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: 6/7 Rpt: 28/31 | 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | 3 Filer ID (Ethics Commission Filers) 00089880 |
| 4 Date 12/03/2025 | 5 Payee name Catalyst Advisors Group | |
| 6 Amount (\$) \$1,000.00 | 7 Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting Fee |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/26/2025 | Payee name Ownby, Craig | |
| Amount (\$) \$2,500.00 | Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Arlington, TX 76002 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 08/26/2025 | Payee name Republican Women of Arlington | |
| Amount (\$) \$1,562.81 | Payee address; City; State; Zip Code P.O. Box 14317 Arlington, TX 76094 | |
| 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 Campaign Sponsorship of Republican Women Event |
| 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: 7/7 Rpt: 29/31 | 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | 3 Filer ID (Ethics Commission Filers) 00089880 | |
| 4 Date 10/24/2025 | 5 Payee name Republican Women of Arlington | | |
| 6 Amount (\$) \$1,250.31 | 7 Payee address; City; P.O. Box 14317 Arlington, TX 76094 | State; Zip Code | |
| 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 Campaign Sponsorship of Republican Women Event | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| Date 11/24/2025 | Payee name United State Postal Service | | |
| Amount (\$) \$46.80 | Payee address; City; 752 N Main St Mansfield, TX 76063 | State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage for Campaign Mail | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| Date 12/16/2025 | Payee name United State Postal Service | | |
| Amount (\$) \$249.60 | Payee address; City; 752 N Main St Mansfield, TX 76063 | State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage for Campaign Mail | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

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 F2: | 2 FILER NAME Sch: 1/1 Rpt: 30/31 Sorrells Fleischmann, Ellen (Mrs.) | 3 Filer ID (Ethics Commission Filers) 00089880 | |
| 4 | TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS | \$ | |
| 5 Date 12/04/2025 | 6 Payee name Catalyst Advisors Group | | |
| 7 Amount (\$) \$378.88 | 8 Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701 | | |
| 9 TYPE OF EXPENDITURE | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | |
| 10 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 Grassroots Advertising Expense | |
| 11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | 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 G: Sch: 1/1 Rpt: 31/31 | 2 FILER NAME Sorrells Fleischmann, Ellen (Mrs.) | 3 Filer ID (Ethics Commission Filers) 00089880 | |
| 4 Date 09/18/2025 | 5 Payee name Catalyst Advisors Group | | |
| 6 Amount (\$) \$1,418.08 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701 | | |
| 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 Design and Production of Campaign Signs | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| Date 11/11/2025 | Payee name Tarrant County Republican Party | | |
| Amount (\$) \$750.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code 201 N. Rupert St. Suite 117 Fort Worth, TX 76107 | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Fees | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Candidate Filing Fee for March 2026 Republican Primary Election | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |