

**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) 00069651	2 Total pages filed: 368		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Donald B.	MI	OFFICE USE ONLY		
	NICKNAME Don	LAST Huffines	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; 6125 Luther Ln #294 Dallas, TX 75225			Date Hand-delivered or Date Postmarked		
				Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Donald B.	MI			
	NICKNAME Don	LAST Huffines	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 6125 Luther Ln Suite 294 Dallas, TX 75225		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 884-7025					
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)					
9 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026		<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) None			12 OFFICE SOUGHT (if known) Comptroller		

GO TO PAGE 2

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

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

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13 C / OH NAME	Huffines, Donald B. (Mr.)		14 Filer ID (Ethics Commission Filers) 00069651
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)		\$ 998.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 1,043,287.07
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 3,981,449.98
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 11,773,001.27
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 15,250,000.00

17 AFFIDAVIT

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

Mr. Donald B. Huffines

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

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

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18 FILER NAME	19 Filer ID (Ethics Commission Filers) 00069651
Huffines, Donald B. (Mr.)	
20 SCHEDULE SUBTOTALS	
NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,043,287.07
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3. <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 15,250,000.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 3,948,584.70
6. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7. <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 32,865.28
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 265,959.45

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/107 Rpt: 4/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abood, John	7 Amount of Contribution (\$) \$125.00
	6 Contributor address; City; State; Zip Code Providence, RI 72908	
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Law Offices of John G. Abood
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adamson, Mark	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code Houston, TX 77035	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Tech-Seal
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anvari, Shoja	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code McKinney, TX 75070	
Principal occupation / Job title (See Instructions) Customs brokerage rep		Employer (See Instructions) Upsscs
Date 07/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkins, Linda	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Temple, TX 76505	
Principal occupation / Job title (See Instructions) Property mgt		Employer (See Instructions) Self employed
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Attwood, Paul	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Rowlett, TX 75088	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/107 Rpt: 5/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/21/2025	5 Full name of contributor Aung, Thein 6 Contributor address; City; State; Zip Code Dallas, TX 75229	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) GBC Food Services
Date 08/08/2025	Full name of contributor Balint, JC Contributor address; City; State; Zip Code Denton, TX 76207	Amount of Contribution (\$) \$19.30
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/08/2025	Full name of contributor Balint, JC Contributor address; City; State; Zip Code Denton, TX 76207	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/10/2025	Full name of contributor Bancroft, Sue Contributor address; City; State; Zip Code Argyle, TX 76226	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/31/2025	Full name of contributor Banks, Charlotte Contributor address; City; State; Zip Code Boerne, TX 78006	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/107 Rpt: 6/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Basham, Nancy	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75238	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beal, Andrew	Amount of Contribution (\$) \$50,000.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Beal Bank
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bean, John	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76109	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bean, John	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76109	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Frank	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Austin, TX 78735	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/107 Rpt: 7/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Susan	7 Amount of Contribution (\$) \$10.65
	6 Contributor address; City; State; Zip Code Kerrville, TX 78013	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Susan	Amount of Contribution (\$) \$10.65
	Contributor address; City; State; Zip Code Kerrville, TX 78013	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Susan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Kerrville, TX 78013	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Susan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Kerrville, TX 78013	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Susan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Kerrville, TX 78013	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/107 Rpt: 8/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belton, Nancy	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76116	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Annette	Amount of Contribution (\$) \$27.00
	Contributor address; City; State; Zip Code Fredericksburg, TX 78625	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Annette	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Fredericksburg, TX 78624	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernhard, Carol	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Austin, TX 78759	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Betz, Harlan	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Cypress, TX 77433	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/107 Rpt: 9/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bielamowicz, Mark	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code Waxahachie, TX 75165	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bielamowicz, Mark & Carol	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Waxahachie, TX 75165	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billingsley, Bryan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Dallas, TX 75228	
Principal occupation / Job title (See Instructions) IBM		Employer (See Instructions) IBM
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billingsley, Bryan	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Dallas, TX 75218	
Principal occupation / Job title (See Instructions) IBM		Employer (See Instructions) Sales
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billingsley, Bryan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Dallas, TX 75228	
Principal occupation / Job title (See Instructions) IBM		Employer (See Instructions) Sales

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/107 Rpt: 10/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Hank	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75218	
8 Principal occupation / Job title (See Instructions) Hank Black		9 Employer (See Instructions) Hank Black
Date 11/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Hank	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Dallas, TX 75218	
Principal occupation / Job title (See Instructions) Hank Black		Employer (See Instructions) semi-retired artist
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Hank	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Dallas, TX 75218	
Principal occupation / Job title (See Instructions) Hank Black		Employer (See Instructions) semi-retired artist
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Hank	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Dallas, TX 75218	
Principal occupation / Job title (See Instructions) Hank Black		Employer (See Instructions) semi-retired artist
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, Bonnie	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Lewisville, TX 75077	
Principal occupation / Job title (See Instructions) LMT		Employer (See Instructions) Dallas Country Club

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/107 Rpt: 11/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanchette, Jeannette	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Houston, TX 77057	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blucher, Michael	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) lead mechanic		Employer (See Instructions) bikemart richardfson
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boling, Brant	Amount of Contribution (\$) \$52.02
	Contributor address; City; State; Zip Code Aledo, TX 76008	
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions) Self
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boling, Brant	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Aledo, TX 76008	
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions) Self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bond, Dee	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Hempstead, TX 77445	
Principal occupation / Job title (See Instructions) Chief Commercial Officer		Employer (See Instructions) JP Services

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/107 Rpt: 12/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonde, Jonathan 6 Contributor address; City; State; Zip Code Canton, TX 75103	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Schwab		9 Employer (See Instructions) Virtualization Engineer
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonde, Jonathan Contributor address; City; State; Zip Code Canton, TX 75103	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Schwab		Employer (See Instructions) Systems Engineer
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boule, Dennis & Karen Contributor address; City; State; Zip Code Dallas, TX 75205	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) self-employed		Employer (See Instructions) deBouelle Diamond & Jewelry
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, John Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, John Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/107 Rpt: 13/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, John 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	7 Amount of Contribution (\$) \$25.00
	8 Principal occupation / Job title (See Instructions) retired	9 Employer (See Instructions) retired
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, John Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, John Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 10/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, John Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Wanda Contributor address; City; State; Zip Code Ft. Worth, TX 76137	Amount of Contribution (\$) \$5.48
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/107 Rpt: 14/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Wanda	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Ft. Worth, TX 76137	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Fred	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Dallas, TX 75252	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Fred	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Dallas, TX 75252	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Fred	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Dallas, TX 75252	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Richard	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code magnolia, AR 71754-0500	
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions) Weiser-Brown Oil Co.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/107 Rpt: 15/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brumm, Jason	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Sherman, TX 75092	
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Covenant Development
Date 11/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Tanya	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Benbrook, TX 76126	
Principal occupation / Job title (See Instructions) Lockheed		Employer (See Instructions) Sr admin asst
Date 11/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Tanya	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Benbrook, TX 76126	
Principal occupation / Job title (See Instructions) Lockheed		Employer (See Instructions) Sr admin asst
Date 11/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bullard, Petrina	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Dallas, TX 75223	
Principal occupation / Job title (See Instructions) Ind Contractor		Employer (See Instructions) Realtor
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bullard, Petrina	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Dallas, TX 75223	
Principal occupation / Job title (See Instructions) Ind Contractor		Employer (See Instructions) Realtor

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/107 Rpt: 16/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butcher, Dennis	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Temple, TX 76501	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cabrera, Eric	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Longview, TX 75604	
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Callewart, Craig	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75225	
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) Dallas Spine & Treatment
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canady, Sara	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Floresville, TX 78114	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canady, Sara	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Floresville, TX 78114	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/107 Rpt: 17/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canady, Sara	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Floresville, TX 78114	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Raymond	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Lindale, TX 75771	
Principal occupation / Job title (See Instructions) Truck driver		Employer (See Instructions) Pepsi cola
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casanova, Hector	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Arlington, TX 76016	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Case, Jennifer	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code San Antonio, TX 78227	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casias, Alex	Amount of Contribution (\$) \$12.00
	Contributor address; City; State; Zip Code Amarillo, TX 79103	
Principal occupation / Job title (See Instructions) Txdot		Employer (See Instructions) Engineering Support

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/107 Rpt: 18/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cave, Michael	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Corinth, TX 76208	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Brent	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Austin, TX 78704	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chappell, Kelley	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76137	
Principal occupation / Job title (See Instructions) Small Business Owner		Employer (See Instructions) Retired
Date 11/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, Jang	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Seguin, TX 78155	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, Meiching	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Seguin, TX 78155	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/107 Rpt: 19/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, Meiching	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Seguin, TX 78155	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cherry, Kathleen	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Richardson, TX 75080	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheshire, Carson	Amount of Contribution (\$) \$19.30
	Contributor address; City; State; Zip Code Baytown, TX 77523	
Principal occupation / Job title (See Instructions) student		Employer (See Instructions) student
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cisneros, Ron	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Boerne, TX 78006	
Principal occupation / Job title (See Instructions) Insurance		Employer (See Instructions) Self
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clarence, Richard	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code El Paso, TN 79949	
Principal occupation / Job title (See Instructions) real estate		Employer (See Instructions) V.P. Clarence Co.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/107 Rpt: 20/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cline, Josiah	7 Amount of Contribution (\$) \$5.48
	6 Contributor address; City; State; Zip Code Midlothian, TX 76065	
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Cline Consulting
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cline, Josiah	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Midlothian, TX 76065	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Cline Consulting
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coats, John	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code KING CITY, OR 97224	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Michael	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Wylie, TX 75098	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Richard	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75206	
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) Amira

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/107 Rpt: 21/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corley, Richard	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Denton, TX 76285	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornelius, Leila	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75205	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self
Date 07/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coulter, Carmen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Georgetown, TX 78633	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coulter, Carmen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Georgetown, TX 78633	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crumpler, David	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Porter, TX 77365	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/107 Rpt: 22/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curb, Timothy	7 Amount of Contribution (\$) \$52.02
	6 Contributor address; City; State; Zip Code Azle, TX 76020	
8 Principal occupation / Job title (See Instructions) Electrician		9 Employer (See Instructions) SEI Electrical
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curb, Timothy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Azle, TX 76020	
Principal occupation / Job title (See Instructions) Electrician		Employer (See Instructions) SEI Electrical
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D, Debra	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code forney, TX 75126	
Principal occupation / Job title (See Instructions) Information Requested		Employer (See Instructions) Information Requested
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANNA, SAM	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Dallas, TX 75248	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel, ALVARADO	Amount of Contribution (\$) \$19.30
	Contributor address; City; State; Zip Code CANUTILLO, TX 79835	
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions) US Postal Service

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 20/107 Rpt: 23/368
2 FILER NAME Huffines, Donald B. (Mr.)			3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel, ALVARADO 6 Contributor address; City; State; Zip Code CANUTILLO, TX 79835	7 Amount of Contribution (\$) \$18.36	
8 Principal occupation / Job title (See Instructions) Technician		9 Employer (See Instructions) US Postal Service	
Date 08/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danna, Sam Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$5.00	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David, Sr, JR & Ann Contributor address; City; State; Zip Code Pilot Point, TX 76258	Amount of Contribution (\$) \$250.00	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) PointBank	
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dearien, James Contributor address; City; State; Zip Code Dallas, TX 75205	Amount of Contribution (\$) \$250.00	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dearien, Jim Contributor address; City; State; Zip Code DALLAS, TX 75205	Amount of Contribution (\$) \$35.00	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/107 Rpt: 24/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dement, Mary	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Azle, TX 76020	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dement, Mary	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Azle, TX 76020	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dement, Mary	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Azle, TX 76020	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dement, Mary	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Azle, TX 76020	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dement, Mary	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Azle, TX 76020	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/107 Rpt: 25/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dement, Mary	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Azle, TX 76020	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dement, Mary	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Azle, TX 76020	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Derrick, Robert	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77055	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Delta Seaboard, LLC
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Esther	Amount of Contribution (\$) \$19.30
	Contributor address; City; State; Zip Code Taylor, TX 76574	
Principal occupation / Job title (See Instructions) LVN		Employer (See Instructions) Aveanna Healthcare
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Esther	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Taylor, TX 76574	
Principal occupation / Job title (See Instructions) LVN		Employer (See Instructions) Aveanna Healthcare

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/107 Rpt: 26/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickson, Donald	7 Amount of Contribution (\$) \$162.00
	6 Contributor address; City; State; Zip Code Friendswood, TX 77546	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dominick, Stephen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75075	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donohue, Robert	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code San Antonio, TX 78240	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donohue, Robert	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code San Antonio, TX 78240	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durant, Jerry	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code Weaherford, TX 76086	
Principal occupation / Job title (See Instructions) Dealer		Employer (See Instructions) Jerry Durant Auto Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/107 Rpt: 27/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ekstrom, Christopher	7 Amount of Contribution (\$) \$5,000.00
	6 Contributor address; City; State; Zip Code Coral Springs, FL 33076	
8 Principal occupation / Job title (See Instructions) Principle		9 Employer (See Instructions) Ekstrom Properties LLC
Date 07/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, BM	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Mansfield, TX 76063	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Rachel	Amount of Contribution (\$) \$27.00
	Contributor address; City; State; Zip Code McKinney, TX 75070	
Principal occupation / Job title (See Instructions) Campaign Command		Employer (See Instructions) VP of Communications
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evanich, Michael	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77027	
Principal occupation / Job title (See Instructions) AIS		Employer (See Instructions) Engineer
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, DOROTHY	Amount of Contribution (\$) \$12.72
	Contributor address; City; State; Zip Code Houston, TX 77057	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/107 Rpt: 28/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, DOROTHY 6 Contributor address; City; State; Zip Code Houston, TX 77057	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) retired	9 Employer (See Instructions) retired
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, DOROTHY Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$12.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fabry, Toni Contributor address; City; State; Zip Code Tyler, TX 75703	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farias III, Fred Contributor address; City; State; Zip Code McAllen, TX 78501	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions) President	Employer (See Instructions) 20/20 Vision Care
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farley, Jerry Contributor address; City; State; Zip Code Fredericksburg, TX 78624	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) paperhanger	Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/107 Rpt: 29/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fendor, Freddy	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Sherman, TX 75091	
8 Principal occupation / Job title (See Instructions) Facility Mngr.		9 Employer (See Instructions) Grayson Crisis Center
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finke Construction, LLC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Denison, TX 75021	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finlot, D	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Llano, TX 78643	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fite, Ralph	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77042	
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) GSL Welcome Wilson Group
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flowers, Patti	Amount of Contribution (\$) \$5.48
	Contributor address; City; State; Zip Code Lake Dallas, TX 75065	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/107 Rpt: 30/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flowers, Patti	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Lake Dallas, TX 75065	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Jeremy	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75205	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Hilltop Holdings
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forsyth, Rose Marie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Argyle, TX 76226	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraser, Theresa	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code BOERNE, TX 78006	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Cliff	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Prosper, TX 75078	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Real Estate

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/107 Rpt: 31/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Kevin D. 6 Contributor address; City; State; Zip Code Keller, TX 76248-8357	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Cross Graphics
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friesen, Jacobo Contributor address; City; State; Zip Code Dalhart, TX 79022	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fritcher, Sammy Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$103.72
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Airborne ASPECT INC
Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fritcher, Sammy Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$103.72
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Airborne ASPECT INC
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fritcher, Sammy Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Airborne ASPECT INC		Employer (See Instructions) Ceo

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/107 Rpt: 32/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fritcher, Sammy	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Plano, TX 75024	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Airborne ASPECT INC
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fritcher, Sammy	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Airborne ASPECT INC
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fritcher, Sammy	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Airborne ASPECT INC
Date 09/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fritcher, Sammy	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Airborne ASPECT INC
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fritcher, Sammy	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Airborne ASPECT INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/107 Rpt: 33/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulton, Bob	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75229	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulton, Bob	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75229	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Futral, David	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Ennis, TX 75119	
Principal occupation / Job title (See Instructions) Dallas ISD		Employer (See Instructions) Instructional Specialist
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) G, Wesley	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Denton, TX 76210	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaffner, Brian	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Frisco, TX 75035	
Principal occupation / Job title (See Instructions) First Baptist Dallas		Employer (See Instructions) Worship Priductuon Assoc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/107 Rpt: 34/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaj, Randy	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Frisco, TX 75036	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galego, Kevin	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Miami, FL 33182	
Principal occupation / Job title (See Instructions) Firearms Sales Outfitter		Employer (See Instructions) Bass Pro Shops
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamez, Thomas	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76116	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Financial services
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gammon, Glenna	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code CLEBURNE, TX 76031-7748	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamwell, Peter	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code The Woodlands, TX 77380	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/107 Rpt: 35/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ganem, Minerva	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Corpus Christi, TX 78414	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Greg	Amount of Contribution (\$) \$258.84
	Contributor address; City; State; Zip Code Junction, TX 76849	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Greg	Amount of Contribution (\$) \$258.84
	Contributor address; City; State; Zip Code Junction, TX 76849	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Phillips	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Junction, TX 76849	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Tanya	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Weatherford, TX 76086	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/107 Rpt: 36/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Tanya	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Weatherford, TX 76086	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gastineau, Paul	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Magnolia, TX 77355	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaudette, Bryant	Amount of Contribution (\$) \$52.02
	Contributor address; City; State; Zip Code Katy, TX 77449	
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self-Employed
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Jan	Amount of Contribution (\$) \$52.02
	Contributor address; City; State; Zip Code Dallas, TX 75209	
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Jan	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75209	
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/107 Rpt: 37/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ghim, Song	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Lewisville, TX 75067	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Lindale, TX 75771	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilmore, John	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75203	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Dallas Ear & Eye
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glazer, Michael	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75201-2235	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goatcher, James	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Round Rock, TX 78681	
Principal occupation / Job title (See Instructions) Cisco		Employer (See Instructions) Programmer

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/107 Rpt: 38/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goff, Josh 6 Contributor address; City; State; Zip Code Heartland, TX 75126	7 Amount of Contribution (\$) \$50.00
	8 Principal occupation / Job title (See Instructions) retired	9 Employer (See Instructions) retired
Date 07/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Carol Contributor address; City; State; Zip Code McKinney, TX 75069	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Doula	Employer (See Instructions) Self-employed
Date 08/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grassroots America-We the People Contributor address; City; State; Zip Code Tyler, TX 75713	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, James Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greiss, Justin Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$27.00
	Principal occupation / Job title (See Instructions) The Constitution	Employer (See Instructions) Liberty Warrior

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/107 Rpt: 39/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greiss, Justin 6 Contributor address; City; State; Zip Code Boerne, TX 78015	7 Amount of Contribution (\$) \$60.00
	8 Principal occupation / Job title (See Instructions) The Constitution	9 Employer (See Instructions) Liberty Warrior
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Groves, Gary Contributor address; City; State; Zip Code McAllen, TX 78501	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Hiram Contributor address; City; State; Zip Code El Paso, TX 79925	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Landlord	Employer (See Instructions) Me
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINDS, STEVEN Contributor address; City; State; Zip Code Burnet, TX 78611	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Mail carrier	Employer (See Instructions) USPS
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hairston, Mark Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Mortgage Broker	Employer (See Instructions) Texas Mortgage Source

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/107 Rpt: 40/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hairston, Mark 6 Contributor address; City; State; Zip Code Austin, TX 78734	7 Amount of Contribution (\$) \$50.00
	8 Principal occupation / Job title (See Instructions) Texas Mortgage Source	9 Employer (See Instructions) Texas Mortgage Source
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hairston, Mark Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Texas Mortgage Source	Employer (See Instructions) Mortgage Broker
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hairston, Mark Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Texas Mortgage Source	Employer (See Instructions) Mortgage Broker
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hairston, Mark Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Texas Mortgage Source	Employer (See Instructions) Mortgage Broker
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hairston, Mark Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Texas Mortgage Source	Employer (See Instructions) Mortgage Broker

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/107 Rpt: 41/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hairston, Mark	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Austin, TX 78734	
8 Principal occupation / Job title (See Instructions) Texas Mortgage Source		9 Employer (See Instructions) Mortgage Broker
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Scott	Amount of Contribution (\$) \$200,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75220	
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Monica	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Boyd, TX 76023	
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Susan	Amount of Contribution (\$) \$207.14
	Contributor address; City; State; Zip Code Pittsburgh, TX 75686	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Susan	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Pittsburg, TX 75686	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/107 Rpt: 42/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Han, Nam	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Houston, TX 77084	
8 Principal occupation / Job title (See Instructions) Insurance		9 Employer (See Instructions) Independent Agent
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrington, Gene	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Baytown, TX 77823	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Jean	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Lufkin, TX 75901	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Jean	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Lufkin, TX 75901	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Danny	Amount of Contribution (\$) \$52.02
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Principal occupation / Job title (See Instructions) Landscape		Employer (See Instructions) Harrison Landscape and renovation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/107 Rpt: 43/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Danny	7 Amount of Contribution (\$) \$52.02
	6 Contributor address; City; State; Zip Code Allen, TX 75013	
8 Principal occupation / Job title (See Instructions) Landscape		9 Employer (See Instructions) Harrison Landscape and renovation
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Danny	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Principal occupation / Job title (See Instructions) Landscape		Employer (See Instructions) Harrison Landscape and renovation
Date 11/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Danny	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Principal occupation / Job title (See Instructions) Landscape		Employer (See Instructions) Harrison Landscape and renovation
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Danny	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Principal occupation / Job title (See Instructions) Landscape		Employer (See Instructions) Harrison Landscape and renovation
Date 09/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Danny	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Principal occupation / Job title (See Instructions) Landscape		Employer (See Instructions) Harrison Landscape and renovation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/107 Rpt: 44/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Danny	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75201	
8 Principal occupation / Job title (See Instructions) Landscape		9 Employer (See Instructions) Harrison Landscape and renovation
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harvey, Brent	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75370	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 07/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Mary	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Huntsville, TX 77340	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Mark	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Bastrop, TX 78602	
Principal occupation / Job title (See Instructions) Trading and Investments		Employer (See Instructions) Mark Hayes
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Head, Ben	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Burleson, TX 76028	
Principal occupation / Job title (See Instructions) Service		Employer (See Instructions) Bayou Tex Services

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/107 Rpt: 45/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henson, Ricky 6 Contributor address; City; State; Zip Code McKinney, TX 75071	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herbst, Karen Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Providence Materials
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hershey, Doug Contributor address; City; State; Zip Code Amarillo, TX 79159	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Doug Hershey Co.
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, JM & Patricia Contributor address; City; State; Zip Code Dallas, TX 75205	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Independent		Employer (See Instructions) Self
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Anna Contributor address; City; State; Zip Code Spring Branch, TX 78070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Landscape architect		Employer (See Instructions) Hoffman and ospina

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/107 Rpt: 46/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hohnholt, Carl	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Tomball, TX 77377	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hood County Republican Club	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Cranbury, TX 76049	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoot, Brody	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Llano, TX 78643	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoover Slovacek LLP	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77210	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopper, Sam	Amount of Contribution (\$) \$23.00
	Contributor address; City; State; Zip Code Decatur, TX 76234	
Principal occupation / Job title (See Instructions) Pale Horse Strategies		Employer (See Instructions) Video Producer

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/107 Rpt: 47/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopwood, Steve 6 Contributor address; City; State; Zip Code Irving, TX 75062	7 Amount of Contribution (\$) \$35.00
	8 Principal occupation / Job title (See Instructions) mariner	9 Employer (See Instructions) Sva
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopwood, Steve Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Sva	Employer (See Instructions) mariner
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopwood, Steve Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Sva	Employer (See Instructions) mariner
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopwood, Steve Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Sva	Employer (See Instructions) mariner
Date 10/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopwood, Steve Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Sva	Employer (See Instructions) mariner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/107 Rpt: 48/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopwood, Steve 6 Contributor address; City; State; Zip Code Irving, TX 75062	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Sva		9 Employer (See Instructions) mariner
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopwood, Steve Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sva		Employer (See Instructions) mariner
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopwood, Steve Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Sva		Employer (See Instructions) mariner
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopwood, Steve Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sva		Employer (See Instructions) mariner
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howland, G & Victoria Contributor address; City; State; Zip Code Dallas, TX 76205	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/107 Rpt: 49/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howlett, Terry	7 Amount of Contribution (\$) \$19.30
	6 Contributor address; City; State; Zip Code Tyler, TX 75704	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howlett, Terry	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Tyler, TX 75704	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudgins, Peter	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Sherman, TX 75092	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huffhines, Allen	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Dallas, TX 75225	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huffines, James & Patty	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75205	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Susser Bank

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/107 Rpt: 50/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Humphrey, Charles	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75205	
8 Principal occupation / Job title (See Instructions) O&G and other investments		9 Employer (See Instructions) HOC
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchinson, John	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code Addison, TX 75001	
Principal occupation / Job title (See Instructions) Co-CEO		Employer (See Instructions) Trez Capital
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutter, Heidi	Amount of Contribution (\$) \$25,000.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Black Diamond Group LLC
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Integrastruct LLC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Denison, TX 75020	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J, John	Amount of Contribution (\$) \$12.00
	Contributor address; City; State; Zip Code North Richland Hills, TX 76180	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/107 Rpt: 51/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janik, Kurt	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Plano, TX 75025	
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions) SFEG
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeter, Jenny	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code Dallas, TX 75225	
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) Merrill Lynch
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Juan	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76116	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Juan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76116	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Juan	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76116	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/107 Rpt: 52/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Juan	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76116	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 09/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, DH	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Austin, TX 78746	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jon E Heinson Trust	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Granbury, TX 76049	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Vicky	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Haltom City, TX 76117	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Randy	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Ft Worth, TX 76111	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/107 Rpt: 53/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Robert	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Pottsboro, TX 75076-7053	
8 Principal occupation / Job title (See Instructions) Residential Designer		9 Employer (See Instructions) RJ, Residential Designs, LLC
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kecseg, RJ	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code Winnsboro, TX 75494	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kecseg, RJ	Amount of Contribution (\$) \$700.00
	Contributor address; City; State; Zip Code Winnsboro, TX 75494	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kecseg, Wendy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Winnsboro, TX 75494	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennon, Donald	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Madisonville, TX 77864	
Principal occupation / Job title (See Instructions) Mechanic		Employer (See Instructions) Wfs

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/107 Rpt: 54/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Key, Karl 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$50.00
	8 Principal occupation / Job title (See Instructions) retired	9 Employer (See Instructions) retired
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keys, Charles Contributor address; City; State; Zip Code Southern Pines, NC 28387	Amount of Contribution (\$) \$250.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimbell, Tommy Contributor address; City; State; Zip Code Tomball, TX 77377	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Sheridan Contributor address; City; State; Zip Code Bedford, TX 76021	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koebele, Danette Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$300.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/107 Rpt: 55/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koenig, Guy	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Katy, TX 77494	
8 Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) The Friedkin Group
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kroschewsky, Paul	Amount of Contribution (\$) \$27.00
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) Real Estate Broker
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LITTLEPAGE, Pamela	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Shady Shores, TX 76208	
Principal occupation / Job title (See Instructions) Greco Services		Employer (See Instructions) Manager
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamb, Susan	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Corpus Christi, TX 78401	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Lularoe Lambs
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Bart	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Pottsboro, TX 75076	
Principal occupation / Job title (See Instructions) Trucking		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/107 Rpt: 56/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Tina	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Granbury, TX 76048	
8 Principal occupation / Job title (See Instructions) self		9 Employer (See Instructions) self
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Jean	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Alamo Heights, TX 78209	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Jean	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Alamo Heights, TX 78209	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lentin, Karl	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Lockhart, TX 78644	
Principal occupation / Job title (See Instructions) filmmaker		Employer (See Instructions) self
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Jeanne	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75205	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/107 Rpt: 57/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindberg, Sujane	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Plano, TX 75093	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lipiec, Thomas	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Austin, TX 78731	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lipiec, Thomas	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Austin, TX 78731	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Littlepage, Pamela	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Shady Shores, TX 76208	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Greco Services
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Littlepage, Pamela	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Shady Shores, TX 76208	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Greco Services

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/107 Rpt: 58/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynn, Deena	7 Amount of Contribution (\$) \$52.02
	6 Contributor address; City; State; Zip Code Napa, CA 94559	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynn, Deena	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Napa, CA 94559	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Locke, Dana	Amount of Contribution (\$) \$52.02
	Contributor address; City; State; Zip Code Quinlan, TX 75474	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Locke, Dana	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Quinlan, TX 75474	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Logsdon, Ken	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Fairview, TX 75069	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/107 Rpt: 59/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long, Kathleen	7 Amount of Contribution (\$) \$20,000.00
	6 Contributor address; City; State; Zip Code Arlington, TX 76001	
8 Principal occupation / Job title (See Instructions) Reliable Paving		9 Employer (See Instructions) Self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loveless, John	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Bynum, TX 76631	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowry, Robert	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Boerne, TX 78006	
Principal occupation / Job title (See Instructions) self		Employer (See Instructions) physician
Date 07/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucas, Cynthia	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Dallas, TX 75225	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madry, Bruce	Amount of Contribution (\$) \$52.02
	Contributor address; City; State; Zip Code Groves, TX 77619	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/107 Rpt: 60/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markle, Amy	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78222	
8 Principal occupation / Job title (See Instructions) Accounting		9 Employer (See Instructions) DH United Fueling
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marling, Robert	Amount of Contribution (\$) \$50,000.00
	Contributor address; City; State; Zip Code Montgomery, TX 77316	
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) Woodforest Financial Group
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marria, Kathy	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Mentor, OH 44060-3991	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marria, Kathy	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Mentor, OH 44060-3991	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, David	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Carrollton, TX 75006	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 58/107 Rpt: 61/368
2 FILER NAME Huffines, Donald B. (Mr.)				3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/11/2025	5 Full name of contributor Masuda, Mary Jane	6 Contributor address; City; State; Zip Code Honolulu, HI 96820	7 Amount of Contribution (\$) \$52.02	
	8 Principal occupation / Job title (See Instructions) Engineer			
9 Employer (See Instructions) Pearl Harbor Naval Shipyard & IMF				
Date 08/11/2025	Full name of contributor Masuda, Mary Jane	Contributor address; City; State; Zip Code Honolulu, HI 96820	Amount of Contribution (\$) \$50.00	
	Principal occupation / Job title (See Instructions) Engineer			
Employer (See Instructions) Pearl Harbor Naval Shipyard & IMF				
Date 08/26/2025	Full name of contributor Maxwell, Janice	Contributor address; City; State; Zip Code GRANBURY, TX 76048	Amount of Contribution (\$) \$50.00	
	Principal occupation / Job title (See Instructions) retired			
Employer (See Instructions) retired				
Date 08/26/2025	Full name of contributor Maxwell, Janice	Contributor address; City; State; Zip Code GRANBURY, TX 76048	Amount of Contribution (\$) \$50.00	
	Principal occupation / Job title (See Instructions) retired			
Employer (See Instructions) retired				
Date 07/28/2025	Full name of contributor McAda, Janine	Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$5.00	
	Principal occupation / Job title (See Instructions) retired			
Employer (See Instructions) retired				

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/107 Rpt: 62/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAda, Janine	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code New Braunfels, TX 78132	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAuliffe, Daniel	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75244	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAuliffe, Daniel	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75244	
Principal occupation / Job title (See Instructions) Information Requested		Employer (See Instructions) Information Requested
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAuliffe, Daniel	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75244	
Principal occupation / Job title (See Instructions) Information Requested		Employer (See Instructions) Information Requested
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAuliffe, Daniel	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75244	
Principal occupation / Job title (See Instructions) Information Requested		Employer (See Instructions) Information Requested

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/107 Rpt: 63/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAuliffe, Daniel	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75244	
8 Principal occupation / Job title (See Instructions) Information Requested		9 Employer (See Instructions) Information Requested
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAuliffe, Daniel	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75244	
Principal occupation / Job title (See Instructions) Information Requested		Employer (See Instructions) Information Requested
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAuliffe, Daniel	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75244	
Principal occupation / Job title (See Instructions) Information Requested		Employer (See Instructions) Information Requested
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDowell, Shane	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) McKesson
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKay, Shannon	Amount of Contribution (\$) \$5.48
	Contributor address; City; State; Zip Code Frisco, TX 75034	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Orgill, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/107 Rpt: 64/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKay, Shannon	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Frisco, TX 75034	
8 Principal occupation / Job title (See Instructions) Project Manager		9 Employer (See Instructions) Orgill, Inc.
Date 11/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKay, Shannon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Frisco, TX 75034	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Orgill, Inc.
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKay, Shannon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Frisco, TX 75034	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Orgill, Inc.
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKay, Shannon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Frisco, TX 75034	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Orgill, Inc.
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKay, Shannon	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Frisco, TX 75034	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Orgill, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/107 Rpt: 65/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, George	7 Amount of Contribution (\$) \$5,000.00
	6 Contributor address; City; State; Zip Code Lubbock, TX 79424	
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) GMC Developments
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMeans, Tom	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Lubbock, TX 79424	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMeans, Tom	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Lubbock, TX 79424	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMeans, Tom	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Lubbock, TX 79424	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMeans, Tom	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Lubbock, TX 79424	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/107 Rpt: 66/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMeans, Tom	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code Lubbock, TX 79424	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMeans, Tom	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Lubbock, TX 79424	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMeans, Tom	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Lubbock, TX 79424	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillan, Susan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Midland, TX 79707	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgrue, Aaron	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Grand Prairie, TX 75050	
Principal occupation / Job title (See Instructions) student		Employer (See Instructions) student

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/107 Rpt: 67/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meredith, Lydia 6 Contributor address; City; State; Zip Code Corpus Christ, TX 78412	7 Amount of Contribution (\$) \$26.16
	8 Principal occupation / Job title (See Instructions) retired	9 Employer (See Instructions) retired
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meredith, Lydia Contributor address; City; State; Zip Code Corpus Christ, TX 78412	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, james Contributor address; City; State; Zip Code Lubbock, TX 79414	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 08/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Edward Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Foresight Golf, LLC	Employer (See Instructions) Business Owner
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mirza, Ali Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Finance	Employer (See Instructions) District 5

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/107 Rpt: 68/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mock, Sherrel	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Paris, TX 75461	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montanez, Mary	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Dallas, TX 75227	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Jo	Amount of Contribution (\$) \$12.00
	Contributor address; City; State; Zip Code Huffman, TX 77336	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris Jr, Jack	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75209	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Me
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morse, Gary	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Waco, TX 76714	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/107 Rpt: 69/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moussette, Robert	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75231	
8 Principal occupation / Job title (See Instructions) Plant Technician		9 Employer (See Instructions) Interiorscape Service Company
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Barbara	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Barbara	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mullen, Gregory	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75205	
Principal occupation / Job title (See Instructions) investor		Employer (See Instructions) Cranehill Capital LLC
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munson, John	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Denison, TX 75021	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/107 Rpt: 70/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munson, William	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Denson, TX 75021	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 07/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myers, William	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code North Providence, RI 72904	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nagle, Mike	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code El Paso, TX 79934	
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nail, Johnny	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code New Caney, TX 77357	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neuhaus, Joan	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code Houston, TX 77005	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/107 Rpt: 71/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nolan, Mike	7 Amount of Contribution (\$) \$1,034.44
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76107	
8 Principal occupation / Job title (See Instructions) Contractor		9 Employer (See Instructions) Nolan Bros of Texas, Inc
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Novay, Timothy	Amount of Contribution (\$) \$52.02
	Contributor address; City; State; Zip Code Garland, TX 75044	
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions) Advantage Hail & Dent llc
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Novay, Timothy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Garland, TX 75044	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Novay, Timothy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Garland, TX 75044	
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions) Advantage Hail & Dent llc
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nowlin, Nelda	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code San Angelo, TX 76904	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/107 Rpt: 72/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONeal, Steve & Judy 6 Contributor address; City; State; Zip Code College Station, TX 77845	7 Amount of Contribution (\$) \$200.00
	8 Principal occupation / Job title (See Instructions) retired	9 Employer (See Instructions) retired
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORR, Keith Contributor address; City; State; Zip Code Texarkana, TX 75503	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions) Retirees	Employer (See Instructions) Retired
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olsson, Natalie Contributor address; City; State; Zip Code Corpus Christi, TX 78413	Amount of Contribution (\$) \$18.36
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osborne, Jeff Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Real Estate	Employer (See Instructions) Cerra Vista Corp
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Dave Contributor address; City; State; Zip Code Bedford, TX 76021	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) La Promesa Foundation	Employer (See Instructions) Ex Director

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/107 Rpt: 73/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Deborah	7 Amount of Contribution (\$) \$19.30
	6 Contributor address; City; State; Zip Code Lubbock, TX 79423	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Deborah	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Lubbock, TX 79423	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pedigo, Kerry	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75205	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Miller Keffer Pedigo
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pena, Angelo	Amount of Contribution (\$) \$11.00
	Contributor address; City; State; Zip Code Amarillo, TX 79119	
Principal occupation / Job title (See Instructions) Southern Glazer's		Employer (See Instructions) Wine stocker
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pennette, Aleae	Amount of Contribution (\$) \$5.48
	Contributor address; City; State; Zip Code Tyler, TX 75703	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/107 Rpt: 74/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pennette, Aleae	7 Amount of Contribution (\$) \$5.48
	6 Contributor address; City; State; Zip Code Tyler, TX 75703	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pennette, Aleae	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Tyler, TX 75703	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pennette, Aleae	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Tyler, TX 75703	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pennette, Aleae	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Tyler, TX 75703	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pennette, Aleae	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Tyler, TX 75703	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/107 Rpt: 75/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pennette, Aleae	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Tyler, TX 75703	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Susan	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Abilene, TX 79601	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pettyjohn, Michael	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Post Sales Service		Employer (See Instructions) Powell Industries
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Charlton	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Magnolia, TX 77354	
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Self
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piazza, Joe	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Denison, TX 75020	
Principal occupation / Job title (See Instructions) General Contractor		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/107 Rpt: 76/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Robert	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77498	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Robert	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Robert	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Robert	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Robert	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/107 Rpt: 77/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Robert	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77498	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierson, Katrina	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Rockwall, TX 75032	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) PCG
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plumlee, Tina	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Flower Mound, TX 75028	
Principal occupation / Job title (See Instructions) Appeal Decorator		Employer (See Instructions) Self employed
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pool, Charles	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Denison, TX 75020	
Principal occupation / Job title (See Instructions) GM		Employer (See Instructions) Main Street Lumber
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pool, Robert	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Denison, TX 75020	
Principal occupation / Job title (See Instructions) GM		Employer (See Instructions) Main Street Lumber

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/107 Rpt: 78/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prado, Lydia	7 Amount of Contribution (\$) \$30.00
	6 Contributor address; City; State; Zip Code Palestine, TX 75801	
8 Principal occupation / Job title (See Instructions) My husband		9 Employer (See Instructions) Homemaker
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Protect Freedom PAC	Amount of Contribution (\$) \$500,000.00
	Contributor address; City; State; Zip Code Athens, GA 30606	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purvis, JR	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Midland, TX 79702	
Principal occupation / Job title (See Instructions) Ranchcin		Employer (See Instructions) Self
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ragsdale, Robert	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Roanoke, TX 76262	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Preamble ranch
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ralph Sr, Eugene	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Dallas, TX 75217	
Principal occupation / Job title (See Instructions) Driver		Employer (See Instructions) The Haven TX

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/107 Rpt: 79/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rater, Lonnie 6 Contributor address; City; State; Zip Code Houston, TX 77062	7 Amount of Contribution (\$) \$19.30
	8 Principal occupation / Job title (See Instructions) retired	9 Employer (See Instructions) retired
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rater, Lonnie Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rater, Lonnie Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$18.36
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rattan, Randall Contributor address; City; State; Zip Code Dallas, TX 75205	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray, Coley Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Water plant operator	Employer (See Instructions) City of Wolfforth

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray, Coley	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Lubbock, TX 79407	
8 Principal occupation / Job title (See Instructions) City of Wolfforth		9 Employer (See Instructions) Water plant operator
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond, John	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Lakeside, TX 76108	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond, John	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Lakeside, TX 76108	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond, John	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Lakeside, TX 76108	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond, John	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Lakeside, TX 76108	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/107 Rpt: 81/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond, John 6 Contributor address; City; State; Zip Code Lakeside, TX 76108	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) retired	9 Employer (See Instructions) retired
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond, John Contributor address; City; State; Zip Code Lakeside, TX 76108	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raynaud, Allen Contributor address; City; State; Zip Code Fort worth, TX 76123	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Read, Deborah Contributor address; City; State; Zip Code Big Spring, TX 79720	Amount of Contribution (\$) \$103.72
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Read, Deborah Contributor address; City; State; Zip Code Big Spring, TX 79720	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/107 Rpt: 82/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Red Texas Forum 6 Contributor address; City; State; Zip Code Dallas, TX 75238	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) unemployed		9 Employer (See Instructions) unemployed
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rehmeyer, Michael Contributor address; City; State; Zip Code Houston, TX 77079	Amount of Contribution (\$) \$28.20
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Carla Contributor address; City; State; Zip Code Spring, TX 77373	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Carla Contributor address; City; State; Zip Code Spring, TX 77373	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richards, Patricia Contributor address; City; State; Zip Code Kingsland, TX 78639	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/107 Rpt: 83/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richards, Sonia 6 Contributor address; City; State; Zip Code Irving, TX 75039	7 Amount of Contribution (\$) \$5.00
	8 Principal occupation / Job title (See Instructions) Non	9 Employer (See Instructions) Housewife
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rising Family Trust Contributor address; City; State; Zip Code Ingram, TX 78025	Amount of Contribution (\$) \$300.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberson, David Contributor address; City; State; Zip Code Austin, TX 78724	Amount of Contribution (\$) \$85.00
	Principal occupation / Job title (See Instructions) Tax Attorney	Employer (See Instructions) Prime Tax Group LLC
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberson, David Contributor address; City; State; Zip Code Austin, TX 78724	Amount of Contribution (\$) \$85.00
	Principal occupation / Job title (See Instructions) Prime Tax Group LLC	Employer (See Instructions) Tax Attorney
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Steve Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$103.72
	Principal occupation / Job title (See Instructions) Real estate developer	Employer (See Instructions) DPS inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/107 Rpt: 84/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Steve	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Dripping Springs, TX 78620	
8 Principal occupation / Job title (See Instructions) Real estate developer		9 Employer (See Instructions) DPS inc
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roeder, Daniel	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Amarillo, TX 79109	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Crossroads Technologies
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roeder, Daniel	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Amarillo, TX 79109	
Principal occupation / Job title (See Instructions) Crossroads Technologies		Employer (See Instructions) Manager
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roeder, Daniel	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Amarillo, TX 79109	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Crossroads Technologies
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Romeu, Gregory	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Summerfield, FL 34491	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/107 Rpt: 85/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Romeu, Gregory	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Summerfield, FL 34491	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rymsza, Connie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Frisco, TX 75036	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUH, MARTHA	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUH, MARTHA	Amount of Contribution (\$) \$20.84
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, TONY	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Carrollton, TX 75007	
Principal occupation / Job title (See Instructions) Real Estate Management		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/107 Rpt: 86/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samuel, Rod	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Hudson Oaks, TX 76087	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samuel, Rod	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Hudson Oaks, TX 76087	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Satler, Terry	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Tom Bean, TX 75491	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schatzline, Pat	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Southlake, TX 76092	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Two Crazy Dreamer, LLC
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schatzline, Pat	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Southlake, TX 76092	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Two Crazy Dreamer, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/107 Rpt: 87/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schellhammer, Kolby	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Arlington, TX 76017	
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) NA
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Ron	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Sweeny, TX 77480	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Ron	Amount of Contribution (\$) \$27.00
	Contributor address; City; State; Zip Code Sweeny, TX 77480	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Ron	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Sweeny, TX 77480	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Ron	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Sweeny, TX 77480	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/107 Rpt: 88/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Ron 6 Contributor address; City; State; Zip Code Sweeny, TX 77480	7 Amount of Contribution (\$) \$50.00
	8 Principal occupation / Job title (See Instructions) retired	9 Employer (See Instructions) retired
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Ron Contributor address; City; State; Zip Code Sweeny, TX 77480	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuh, Martha Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$7.47
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuh, Martha Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$15.62
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuh, Martha Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired

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SCHEDULE A1

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2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuh, Martha	7 Amount of Contribution (\$) \$10.47
	6 Contributor address; City; State; Zip Code San Antonio, TX 78230	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sewell, Janice	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Kerrville, TX 78028	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shannon, Tracy	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77339	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Sandra	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76108	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Sandra	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76108	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

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SCHEDULE A1

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2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Sandra	7 Amount of Contribution (\$) \$2.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76108	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shirley, Richard	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Dallas, TX 75248	
Principal occupation / Job title (See Instructions) Energy		Employer (See Instructions) Self
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siddons, Robert	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Austin, TX 78738	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siddons, Robert	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Austin, TX 78738	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siddons, Robert	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Austin, TX 78738	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/107 Rpt: 91/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siddons, Robert	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Austin, TX 78738	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Douglas	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Houston, TX 77077-6438	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sipe, Greg	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Richland Hills, TX 76118	
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions) Schaper Company
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sipiora, James	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Arlington, TX 76006	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sipiora, James	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Arlington, TX 76006	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/107 Rpt: 92/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slade, Jason	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Aledo, TX 76008	
8 Principal occupation / Job title (See Instructions) Area VP of sales		9 Employer (See Instructions) ISTO Biologics
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Michael	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Denison, TX 75021	
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) Eagle Employer Services
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Kim	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Granbury, TX 76048	
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#: _____) Spain, Kim	Amount of Contribution (\$) \$118.00
	Contributor address; City; State; Zip Code Granbury, TX 76048	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Kim	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Granbury, TX 76048	
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/107 Rpt: 93/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Kim	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Granbury, TX 76048	
8 Principal occupation / Job title (See Instructions) homemaker		9 Employer (See Instructions) homemaker
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stearns, Julie	Amount of Contribution (\$) \$10.65
	Contributor address; City; State; Zip Code Bastrop, TX 78602	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stearns, Julie	Amount of Contribution (\$) \$10.65
	Contributor address; City; State; Zip Code Bastrop, TX 78602	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stearns, Julie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Bastrop, TX 78602	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stearns, Julie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Bastrop, TX 78602	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/107 Rpt: 94/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stearns, Julie 6 Contributor address; City; State; Zip Code Bastrop, TX 78602	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) retired	9 Employer (See Instructions) retired
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stearns, Julie Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stearns, Julie Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 07/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, John Contributor address; City; State; Zip Code San Antonio, TX 78245	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, John Contributor address; City; State; Zip Code San Antonio, TX 78245	Amount of Contribution (\$) \$11.11
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/107 Rpt: 95/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Roland	7 Amount of Contribution (\$) \$5,000.00
	6 Contributor address; City; State; Zip Code Southlake, TX 76092	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 07/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stocker, Nan	Amount of Contribution (\$) \$5.48
	Contributor address; City; State; Zip Code Denton, TX 76209	
Principal occupation / Job title (See Instructions) Registered Dental Hygienist		Employer (See Instructions) Dr Gary Taylor
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stowe, Cindy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75230	
Principal occupation / Job title (See Instructions) Insurance broker		Employer (See Instructions) AmWINS
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strong, Kathy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code La Vernia, TX 78121-5207	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumner, T.E.	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Rowlett, TX 75088	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/107 Rpt: 96/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, William T	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Hideaway, TX 75771	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Symonds, Terri	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Greenville, TX 75401	
Principal occupation / Job title (See Instructions) Symonds Ecology		Employer (See Instructions) Biologist
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Symons, Joanne	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Bandera, TX 78003	
Principal occupation / Job title (See Instructions) Joanne Symons Inc.		Employer (See Instructions) President
Date 12/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) T, ANTONY	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code McKinney, TX 75070	
Principal occupation / Job title (See Instructions) Huffines Subaru Kia		Employer (See Instructions) Service Director
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tarantino, Charles	Amount of Contribution (\$) \$103.72
	Contributor address; City; State; Zip Code Houston, TX 77018	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/107 Rpt: 97/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tarantino, Charles	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Houston, TX 77018	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tee, Ronald	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Corpus Christi, TX 78413	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Family PAC	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Weatherford, TX 76086	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Themea, Sean	Amount of Contribution (\$) \$17.76
	Contributor address; City; State; Zip Code Austin, TX 78746	
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) YAL
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Themea, Sean	Amount of Contribution (\$) \$12.00
	Contributor address; City; State; Zip Code Austin, TX 78746	
Principal occupation / Job title (See Instructions) YAL		Employer (See Instructions) COO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/107 Rpt: 98/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Themea, Sean	7 Amount of Contribution (\$) \$17.76
	6 Contributor address; City; State; Zip Code Austin, TX 78746	
8 Principal occupation / Job title (See Instructions) COO		9 Employer (See Instructions) YAL
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Dan	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Pottsboro, TX 75076	
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) Self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Esther	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code North Richland Hills, TX 76182	
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Parkland
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Laurie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Granbury, TX 76049	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Laurie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Granbury, TX 76049	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/107 Rpt: 99/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thweatt, Jack 6 Contributor address; City; State; Zip Code Dallas, TX 75248	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Calld Inc
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UPSON, MARCIA Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UPSON, MARCIA Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VEATCH, GARY Contributor address; City; State; Zip Code boerne, TX 78006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valadez, Ruben Contributor address; City; State; Zip Code Granbury, TX 76049	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/107 Rpt: 100/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valadez, Ruben 6 Contributor address; City; State; Zip Code Granbury, TX 76049	7 Amount of Contribution (\$) \$5.00
	8 Principal occupation / Job title (See Instructions) retired	9 Employer (See Instructions) retired
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valadez, Ruben Contributor address; City; State; Zip Code Granbury, TX 76049	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 11/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valadez, Ruben Contributor address; City; State; Zip Code Granbury, TX 76049	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valadez, Ruben Contributor address; City; State; Zip Code Granbury, TX 76049	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valadez, Ruben Contributor address; City; State; Zip Code Granbury, TX 76049	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/107 Rpt: 101/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valadez, Ruben	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Granbury, TX 76049	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaughan, Della	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Grapevine, TX 76051	
Principal occupation / Job title (See Instructions) Licensed Professional Counselor		Employer (See Instructions) Self
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ventura, Frank	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Pottsboro, TX 75076	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Easy Life Realty
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wait, Robert	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Universal City, TX 78148	
Principal occupation / Job title (See Instructions) Contract Proposal Coordinator		Employer (See Instructions) GL Solutions
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waite, Kathy	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Katy, TX 77494	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Property Manager

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/107 Rpt: 102/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Linda	7 Amount of Contribution (\$) \$52.02
	6 Contributor address; City; State; Zip Code Dallas, TX 75230	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Linda	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75230	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Rodney	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Lubbock, TX 79424	
Principal occupation / Job title (See Instructions) Franchisee		Employer (See Instructions) Self
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washburn, Roy	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75205	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, John	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Lubbock, TX 79423	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/107 Rpt: 103/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, John	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Lubbock, TX 79423	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Wayne & Elizabeth	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77059	
Principal occupation / Job title (See Instructions) EVP		Employer (See Instructions) Steller Bank
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weeden, Scott	Amount of Contribution (\$) \$19.30
	Contributor address; City; State; Zip Code Austin, TX 76541	
Principal occupation / Job title (See Instructions) student		Employer (See Instructions) student
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weeden, Scott	Amount of Contribution (\$) \$19.30
	Contributor address; City; State; Zip Code Austin, TX 76541	
Principal occupation / Job title (See Instructions) student		Employer (See Instructions) student
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weeden, Scott	Amount of Contribution (\$) \$19.30
	Contributor address; City; State; Zip Code Austin, TX 76541	
Principal occupation / Job title (See Instructions) student		Employer (See Instructions) student

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/107 Rpt: 104/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weeden, Scott 6 Contributor address; City; State; Zip Code Austin, TX 76541	7 Amount of Contribution (\$) \$19.30
	8 Principal occupation / Job title (See Instructions) student	9 Employer (See Instructions) student
Date 07/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weeden, Scott Contributor address; City; State; Zip Code Austin, TX 76541	Amount of Contribution (\$) \$19.30
	Principal occupation / Job title (See Instructions) student	Employer (See Instructions) student
Date 07/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weeden, Scott Contributor address; City; State; Zip Code Austin, TX 76541	Amount of Contribution (\$) \$19.30
	Principal occupation / Job title (See Instructions) student	Employer (See Instructions) student
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weeden, Scott Contributor address; City; State; Zip Code Austin, TX 76541	Amount of Contribution (\$) \$18.36
	Principal occupation / Job title (See Instructions) student	Employer (See Instructions) student
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wellington, Donna Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/107 Rpt: 105/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wellington, Donna 6 Contributor address; City; State; Zip Code Frisco, TX 75034	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wellington, Donna Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Cynthia Contributor address; City; State; Zip Code Longview, TX 75605	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wight, Schuyler Contributor address; City; State; Zip Code Goldsmith, TX 79741	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) rancher		Employer (See Instructions) self
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wight, Schuyler Contributor address; City; State; Zip Code Goldsmith, TX 79741	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) rancher		Employer (See Instructions) self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/107 Rpt: 106/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Jenny	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Spring, TX 77386	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wingerson, Carla	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Rosenberg, TX 77471	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Bookkeeper
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witten, G Ronald	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Dallas, TX 75225	
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Witten Advisors
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodall, Blair & Laura	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75209	
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worrell, Daniel	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Sherman, TX 75090-3290	
Principal occupation / Job title (See Instructions) Real estate developer		Employer (See Instructions) Covenant Development

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/107 Rpt: 107/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, W.B.	7 Amount of Contribution (\$) \$10,000.00
	6 Contributor address; City; State; Zip Code Lubbock, TX 79423	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) ASCO
Date 07/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyatt, Deidre	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Spring, TX 77373	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yan, Jun	Amount of Contribution (\$) \$37.00
	Contributor address; City; State; Zip Code Keller, TX 76244	
Principal occupation / Job title (See Instructions) Bonaoy International Llc		Employer (See Instructions) Business Manager
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) bennett, annette	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Fredericksburg, TX 78624	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) delavera, andres	Amount of Contribution (\$) \$5.48
	Contributor address; City; State; Zip Code hollywood, FL 33020	
Principal occupation / Job title (See Instructions) Officer		Employer (See Instructions) COA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 105/107 Rpt: 108/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) griffith, charles	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Irving, TX 75039	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) griffith, charles	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Irving, TX 75039	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kecseg, wendy	Amount of Contribution (\$) \$19.30
	Contributor address; City; State; Zip Code Winnsboro, TX 75494	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kecseg, wendy	Amount of Contribution (\$) \$19.30
	Contributor address; City; State; Zip Code Winnsboro, TX 75494	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kecseg, wendy	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Winnsboro, TX 75494	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 106/107 Rpt: 109/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kecseg, wendy	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Winnsboro, TX 75494	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kecseg, wendy	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Winnsboro, TX 75494	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kecseg, wendy	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Winnsboro, TX 75494	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kecseg, wendy	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Winnsboro, TX 75494	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lane, Joe	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Richardson, TX 75080	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 107/107 Rpt: 110/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) meyer, katherine	7 Amount of Contribution (\$) \$5.48
	6 Contributor address; City; State; Zip Code Round Rock, TX 78681	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) meyer, katherine	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Round Rock, TX 78681	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) spalten, bob	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Seguin, TX 78155	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) spalten, bob	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Seguin, TX 78155	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) unger, randy	Amount of Contribution (\$) \$89.00
	Contributor address; City; State; Zip Code Mexia, TX 76667	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.			
2 FILER NAME Huffines, Donald B. (Mr.)			
4 TOTAL OF UNITEMIZED PLEDGES \$ 0.00			
5 Date	6 Full name of pledgor	<input type="checkbox"/> out-of-state PAC (ID#: _____)	8 Amount of pledge (\$)
	7 Pledgor Address;		9 In-kind description (If applicable)
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 112/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 TOTAL OF UNITEMIZED LOANS		\$ 15,250,000.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/09/2025	5 Payee name 48 Hour Print	
6 Amount (\$) \$643.05	7 Payee address; City; 6410 Eastland Rd E BROOK PARK, OH 44142	
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 PRINTING
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name 48 Hour Prints	
Amount (\$) \$17.50	Payee address; City; 6410 Eastland Rd E BROOK PARK, OH 44142	
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 printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/09/2025	Payee name 817 Print	
Amount (\$) \$206.90	Payee address; City; 211 M and M Ranch Rd granbury, TX 76049	
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 printing
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: 2/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/30/2025	5 Payee name 817 Print	
6 Amount (\$) \$315.50	7 Payee address; City; 211 M and M Ranch Rd granbury, TX 76049	
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 printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/10/2025	Payee name 817 Print	
Amount (\$) \$180.25	Payee address; City; 211 M and M Ranch Rd granbury, TX 76049	
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 printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/19/2025	Payee name 817 Print	
Amount (\$) \$65.66	Payee address; City; 211 M and M Ranch Rd granbury, TX 76049	
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 printing
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: 3/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/02/2025	5 Payee name 817 Print	
6 Amount (\$) \$448.22	7 Payee address; City; 211 M and M Ranch Rd Granbury, TX 76049	
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 printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/05/2025	Payee name 817 Print	
Amount (\$) \$86.31	Payee address; City; 211 M and M Ranch Rd Granbury, TX 76049	
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 printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/01/2025	Payee name Ace Specialities	
Amount (\$) \$73.24	Payee address; City; 104 Signal Circle Lafayette, LA 70508	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense advertising
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: 4/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/01/2025	5 Payee name Ace Specialities	
6 Amount (\$) \$176.12	7 Payee address; City; 104 Signal Circle Lafayette, LA 70508	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense advertising
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/01/2025	Payee name Ace Specialities	
Amount (\$) \$195.62	Payee address; City; 104 Signal Circle Lafayette, LA 70508	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/01/2025	Payee name Ace Specialities	
Amount (\$) \$326.04	Payee address; City; 104 Signal Circle Lafayette, LA 70508	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense advertising
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: 5/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 10/08/2025	5 Payee name Ace Specialties		
6 Amount (\$) \$2,750.00	7 Payee address; City; 104 Signal Circle Lafayette, LA 70508		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/17/2025	Payee name Ace Specialties		
Amount (\$) \$161.14	Payee address; City; 104 Signal Circle Lafayette, LA 70508		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ADVERTISING	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/17/2025	Payee name Ace Specialties		
Amount (\$) \$183.11	Payee address; City; 104 Signal Circle Lafayette, LA 70508		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ADVERTISING	
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: 6/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 10/17/2025	5 Payee name Ace Specialties		
6 Amount (\$) \$292.97	7 Payee address; City; 104 Signal Circle Lafayette, LA 70508	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ADVERTISING	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/22/2025	Payee name Ace Specialties		
Amount (\$) \$25.75	Payee address; City; 104 Signal Circle Lafayette, LA 70508	State; Zip Code	
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 printing	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/05/2025	Payee name Ace Specialties		
Amount (\$) \$71,500.00	Payee address; City; 104 Signal Circle Lafayette, LA 70508	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

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: 7/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/22/2025	5 Payee name Ace Specialties	
6 Amount (\$) \$146.48	7 Payee address; City; State; Zip Code 104 Signal Circle Lafayette, LA 70508	
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 printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/22/2025	Payee name Ace Specialties	
Amount (\$) \$813.02	Payee address; City; State; Zip Code 104 Signal Circle Lafayette, LA 70508	
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 printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/04/2025	Payee name Ace Specialties	
Amount (\$) \$182.42	Payee address; City; State; Zip Code 104 Signal Circle Lafayette, LA 70508	
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 printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/17/2025	5 Payee name Alamo Pachyderm CL.	
6 Amount (\$) \$250.00	7 Payee address; City; 8620 N New Braunfels Ave San Antonio, TX 78217	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sponsorship
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/11/2025	Payee name Amazon Marketplace	
Amount (\$) \$702.49	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 speaker and microphone
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name Amazon	
Amount (\$) \$34.56	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 texas flags
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/06/2025	5 Payee name Amazon	
6 Amount (\$) \$35.25	7 Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 OFFICE SUPPLIES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name Amazon	
Amount (\$) \$35.25	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 OFFICE SUPPLIES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name Amazon	
Amount (\$) \$35.25	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 OFFICE SUPPLIES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/06/2025	5 Payee name Amazon	
6 Amount (\$) \$35.25	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
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 OFFICE SUPPLIES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name Amazon	
Amount (\$) \$35.25	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
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 OFFICE SUPPLIES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name Amazon	
Amount (\$) \$45.00	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
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 OFFICE SUPPLIES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/06/2025	5 Payee name Amazon	
6 Amount (\$) \$164.91	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
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 OFFICE SUPPLIES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name Amazon	
Amount (\$) \$407.13	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
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 OFFICE SUPPLIES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/07/2025	Payee name Amazon	
Amount (\$) \$95.84	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/09/2025	5 Payee name Amazon	
6 Amount (\$) \$81.74	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
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 office supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/09/2025	Payee name Amazon	
Amount (\$) \$83.31	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/09/2025	Payee name Amazon	
Amount (\$) \$108.24	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
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 Roku equipment.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/14/2025	5 Payee name Amazon	
6 Amount (\$) \$9.59	7 Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 OFFICE SUPPLIES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name Amazon	
Amount (\$) \$9.59	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 OFFICE SUPPLIES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/15/2025	Payee name Amazon	
Amount (\$) \$9.59	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/16/2025	5 Payee name Amazon	
6 Amount (\$) \$20.56	7 Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 acrylic sign holders.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/17/2025	Payee name Amazon	
Amount (\$) \$13.87	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/17/2025	Payee name Amazon	
Amount (\$) \$14.06	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/20/2025	5 Payee name Amazon	
6 Amount (\$) \$14.06	7 Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/20/2025	Payee name Amazon	
Amount (\$) \$14.06	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/23/2025	Payee name Amazon	
Amount (\$) \$9.46	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 sign holders
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/23/2025	5 Payee name Amazon	
6 Amount (\$) \$13.63	7 Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 easels.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/23/2025	Payee name Amazon	
Amount (\$) \$13.63	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 easel/sign holders.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/23/2025	Payee name Amazon	
Amount (\$) \$47.54	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 HDMI adapters.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/23/2025	5 Payee name Amazon	
6 Amount (\$) \$78.01	7 Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 Neon custom signs.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/24/2025	Payee name Amazon	
Amount (\$) \$13.44	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/24/2025	Payee name Amazon	
Amount (\$) \$13.63	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/24/2025	5 Payee name Amazon	
6 Amount (\$) \$13.63	7 Payee address; City; 410 Terry Ave N Seattle, WA 98109	State; Zip Code
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 office supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/30/2025	Payee name Amazon	
Amount (\$) \$49.78	Payee address; City; 410 Terry Ave N Seattle, WA 98109	State; Zip Code
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 campaign tshirts.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/30/2025	Payee name Amazon	
Amount (\$) \$93.07	Payee address; City; 410 Terry Ave N Seattle, WA 98109	State; Zip Code
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 custom neon signs.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/31/2025	5 Payee name Amazon	
6 Amount (\$) \$9.59	7 Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/31/2025	Payee name Amazon	
Amount (\$) \$74.45	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/31/2025	Payee name Amazon	
Amount (\$) \$74.45	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/31/2025	5 Payee name Amazon	
6 Amount (\$) \$86.56	7 Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 campaign tshirts.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/16/2025	Payee name Amazon	
Amount (\$) \$42.21	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/17/2025	Payee name Amazon	
Amount (\$) \$110.38	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 21/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/18/2025	5 Payee name Amazon	
6 Amount (\$) \$94.11	7 Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/09/2025	Payee name Amazon	
Amount (\$) \$48.03	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/10/2025	Payee name Amazon	
Amount (\$) \$48.70	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 collapsible wagon.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 22/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/10/2025	5 Payee name Amazon	
6 Amount (\$) \$85.47	7 Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/10/2025	Payee name Amazon	
Amount (\$) \$119.03	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/10/2025	Payee name Amazon	
Amount (\$) \$144.69	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 23/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/22/2025	5 Payee name Amazon	
6 Amount (\$) \$85.38	7 Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/23/2025	Payee name Amazon	
Amount (\$) \$38.92	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 Clipboards for campaign staff.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/24/2025	Payee name Amazon	
Amount (\$) \$10.81	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 bowls for campaign 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: 24/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/24/2025	5 Payee name Amazon	
6 Amount (\$) \$21.64	7 Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 baskets.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/24/2025	Payee name Amazon	
Amount (\$) \$35.60	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/24/2025	Payee name Amazon	
Amount (\$) \$35.60	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 25/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/24/2025	5 Payee name Amazon	
6 Amount (\$) \$42.10	7 Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/24/2025	Payee name Amazon	
Amount (\$) \$79.11	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/24/2025	Payee name Amazon	
Amount (\$) \$79.11	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 26/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/24/2025	5 Payee name Amazon	
6 Amount (\$) \$79.11	7 Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/24/2025	Payee name Amazon	
Amount (\$) \$86.58	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 folding table.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/24/2025	Payee name Amazon	
Amount (\$) \$93.07	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 27/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/25/2025	5 Payee name Amazon	
6 Amount (\$) \$15.14	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
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 artificial flowers.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/25/2025	Payee name Amazon	
Amount (\$) \$57.24	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/03/2025	Payee name Amazon	
Amount (\$) \$392.63	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
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 candy for event, sign holders, campaign tshirts, desk accessories for campaign staff.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 28/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/04/2025	5 Payee name Amazon	
6 Amount (\$) \$43.29	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
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 mints for campaign events.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/13/2025	Payee name Amazon	
Amount (\$) \$27.05	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
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 OFFICE SUPPLIES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/25/2025	Payee name Amazon	
Amount (\$) \$48.53	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
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 acrylic sign holders, clipboards, and basket.
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: 29/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 11/28/2025	5 Payee name Amazon		
6 Amount (\$) \$53.17	7 Payee address; City; 410 Terry Ave N Seattle, WA 98109	State; Zip Code	
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 OFFICE SUPPLIES	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/28/2025	Payee name Amazon		
Amount (\$) \$96.32	Payee address; City; 410 Terry Ave N Seattle, WA 98109	State; Zip Code	
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 campaign tshirts.	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/07/2025	Payee name Amazon		
Amount (\$) \$15.80	Payee address; City; 410 Terry Ave N Seattle, WA 98109	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 office supplies	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 30/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/12/2025	5 Payee name Amazon	
6 Amount (\$) \$9.39	7 Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/14/2025	Payee name Amazon	
Amount (\$) \$17.31	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/15/2025	Payee name Amazon	
Amount (\$) \$151.54	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 31/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/03/2025	5 Payee name Amazon	
6 Amount (\$) \$122.33	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
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 OFFICE SUPPLIES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/22/2025	Payee name Amazon	
Amount (\$) \$1,700.00	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
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 OFFICE SUPPLIES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/09/2025	Payee name American Air	
Amount (\$) \$625.48	Payee address; City; State; Zip Code 1 Skyview Drive Fort Worth, TX 76155	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FLIGHT
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: 32/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/09/2025	5 Payee name American Air	
6 Amount (\$) \$625.48	7 Payee address; City; 1 Skyview Drive Fort Worth, TX 76155	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FLIGHT
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/09/2025	Payee name American Air	
Amount (\$) \$625.48	Payee address; City; 1 Skyview Drive Fort Worth, TX 76155	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FLIGHT
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/09/2025	Payee name American Air	
Amount (\$) \$625.48	Payee address; City; 1 Skyview Drive Fort Worth, TX 76155	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FLIGHT
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: 33/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/14/2025	5 Payee name American Air	
6 Amount (\$) \$247.48	7 Payee address; City; 1 Skyview Drive Fort Worth, TX 76155	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FLIGHT
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name American Air	
Amount (\$) \$247.48	Payee address; City; 2 Skyview Drive Fort Worth, TX 76155	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FLIGHT
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name American Air	
Amount (\$) \$447.97	Payee address; City; 3 Skyview Drive Fort Worth, TX 76155	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FLIGHT
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: 34/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/21/2025	5 Payee name American Air	
6 Amount (\$) \$25.91	7 Payee address; City; 1 Skyview Drive Fort Worth, TX 76155	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/21/2025	Payee name American Air	
Amount (\$) \$254.49	Payee address; City; 1 Skyview Drive Fort Worth, TX 76155	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/21/2025	Payee name American Air	
Amount (\$) \$254.49	Payee address; City; 1 Skyview Drive Fort Worth, TX 76155	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight
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: 35/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/21/2025	5 Payee name American Air	
6 Amount (\$) \$317.48	7 Payee address; City; 1 Skyview Drive Fort Worth, TX 76155	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/12/2025	Payee name American Airlines	
Amount (\$) \$1,133.97	Payee address; City; 1 Skyview Drive Fort Worth, TX 76155	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name American Airlines	
Amount (\$) \$12.00	Payee address; City; 1 Skyview Drive Fort Worth, TX 76155	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense INFLIGHT INTERNET
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: 36/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/18/2025	5 Payee name American Airlines	
6 Amount (\$) \$12.00	7 Payee address; City; 1 Skyview Drive Fort Worth, TX 76155	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense INFLIGHT INTERNET
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/18/2025	Payee name AneDot	
Amount (\$) \$21.30	Payee address; City; 3723 Greenville Ave Suite 41002 Dallas, TX 75206	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/31/2025	Payee name Anedot	
Amount (\$) \$1,531.67	Payee address; City; 3723 Greenville Ave Dallas, TX 75206	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation processing fees.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 37/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/17/2025	5 Payee name Anthem Media Inc	
6 Amount (\$) \$1,343.43	7 Payee address; City; 7415 Southwest Pkwy Austin, TX 78735	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/17/2025	Payee name Anthem Media Inc	
Amount (\$) \$21,174.50	Payee address; City; 7415 Southwest Pkwy Austin, TX 78735	
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 Media Production
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/26/2025	Payee name Atasoca County GOP	
Amount (\$) \$100.00	Payee address; City; 3100 FM 1784 Pleasanton, TX 78064	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reagan Dinner Tickets
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: 38/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/31/2025	5 Payee name Avila, Ava	
6 Amount (\$) \$1,250.00	7 Payee address; City; 1301 Ledbetter St Round Rock, TX 78681	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Avila, Ava	Office sought Office held
Date 12/22/2025	Payee name Avila, Ava	
Amount (\$) \$230.76	Payee address; City; 1301 Ledbetter St Round Rock, TX 78681	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense mileage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Avila, Ava	Office sought Office held
Date 12/15/2025	Payee name Avila, Ava	
Amount (\$) \$1,250.00	Payee address; City; 1301 Ledbetter St Round Rock, TX 78681	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Avila, Ava	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: 39/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/28/2025	5 Payee name Avila, Ava	
6 Amount (\$) \$1,250.00	7 Payee address; City; 1301 Ledbetter St Round Rock, TX 78681	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Avila, Ava	Office sought Office held
Date 11/17/2025	Payee name Avila, Ava	
Amount (\$) \$1,250.00	Payee address; City; 1301 Ledbetter St Round Rock, TX 78681	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name BLUESTONE CREATIVES	Office sought Office held
Date 11/24/2025	Payee name BLUESTONE CREATIVES	
Amount (\$) \$78,988.32	Payee address; City; PO BOX 123 COLLEYVILLE, TX 76034	
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 texting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Avila, Ava	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: 40/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/22/2025	5 Payee name Banner Buzz	
6 Amount (\$) \$63.01	7 Payee address; City; State; Zip Code 1200 Northbrook Parkway Suwanee, GA 30024	
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 printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/10/2025	Payee name Banner Buzz	
Amount (\$) \$75.00	Payee address; City; State; Zip Code 1200 Northbrook Parkway Suwanee, GA 30024	
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 printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/31/2025	Payee name Baselice & Associates, Inc.	
Amount (\$) \$68,591.00	Payee address; City; State; Zip Code PO BOX 50238 AUSTIN, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 Polling
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: 41/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/26/2025	5 Payee name Baselice & Associates, Inc.	
6 Amount (\$) \$2,500.00	7 Payee address; City; PO BOX 50238 AUSTIN, TX 78763	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 Polling
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/03/2025	Payee name Baselice & Associates, Inc.	
Amount (\$) \$3,045.00	Payee address; City; PO BOX 50238 AUSTIN, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 Polling
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/23/2025	Payee name Blakemore & Associates	
Amount (\$) \$15,000.00	Payee address; City; 1 E Greenway Plaza Ste 225 Houston, TX 77046	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

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: 42/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/17/2025	5 Payee name Blakemore & Associates	
6 Amount (\$) \$2,500.00	7 Payee address; City; 1 E Greenway Plaza Ste 225 Houston, TX 77046	
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 Polling & Message Development
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Blakemore & Associates	Office sought Office held
Date 11/17/2025	Payee name Blakemore & Associates	
Amount (\$) \$15,000.00	Payee address; City; 1 E Greenway Plaza Ste 225 Houston, TX 77046	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Blakemore & Associates	Office sought Office held
Date 10/16/2025	Payee name Blakemore & Associates	
Amount (\$) \$15,000.00	Payee address; City; 1 E Greenway Plaza Ste 225 Houston, TX 77046	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Blakemore & Associates	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: 43/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/11/2025	5 Payee name Blakemore & Associates	
6 Amount (\$) \$15,000.00	7 Payee address; City; 1 E Greenway Plaza Ste 225 Houston, TX 77046	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Blakemore & Associates	Office sought Office held
Date 08/07/2025	Payee name Blakemore & Associates	
Amount (\$) \$15,000.00	Payee address; City; 1 E Greenway Plaza Ste 225 Houston, TX 77046	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Blakemore & Associates	Office sought Office held
Date 08/07/2025	Payee name Blakemore & Associates	
Amount (\$) \$1,500.00	Payee address; City; 1 E Greenway Plaza Ste 225 Houston, TX 77046	
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 Polling & Message Development
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Blakemore & Associates	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: 44/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/03/2025	5 Payee name Blakemore & Associates	
6 Amount (\$) \$15,000.00	7 Payee address; City; 1 E Greenway Plaza Ste 225 Houston, TX 77046	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/01/2025	Payee name Bluestone Creatives, LLC	
Amount (\$) \$15,000.00	Payee address; City; PO Box 123 Colleyville, TX 76034	
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 Display Advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/31/2025	Payee name Bluestone Creatives, LLC	
Amount (\$) \$15,000.00	Payee address; City; PO Box 123 Colleyville, TX 76034	
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 digital
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: 45/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 12/11/2025	5 Payee name Bluestone Creatives, LLC		
6 Amount (\$) \$21,700.00	7 Payee address; City; PO BOX 123 Colleyville, TX 76034	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/11/2025	Payee name Bluestone Creatives, LLC		
Amount (\$) \$170.09	Payee address; City; PO BOX 123 Colleyville, TX 76034	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Team Meals	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/10/2025	Payee name Bluestone Creatives, LLC		
Amount (\$) \$19,880.00	Payee address; City; PO BOX 123 Colleyville, TX 76034	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting	
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: 46/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 10/31/2025	5 Payee name Bluestone Creatives, LLC		
6 Amount (\$) \$12,270.35	7 Payee address; City; PO BOX 123 Colleyville, TX 76034	State; Zip Code	
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 Texting	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/27/2025	Payee name Bluestone Creatives, LLC		
Amount (\$) \$27,373.53	Payee address; City; PO BOX 123 Colleyville, TX 76034	State; Zip Code	
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 Texting	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/27/2025	Payee name Bluestone Creatives, LLC		
Amount (\$) \$24,069.21	Payee address; City; PO BOX 123 Colleyville, TX 76034	State; Zip Code	
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 Texting	
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: 47/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/09/2025	5 Payee name Bluestone Creatives, LLC	
6 Amount (\$) \$32,500.00	7 Payee address; City; PO BOX 123 Colleyville, TX 76034	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/10/2025	Payee name Bluestone Creatives, LLC	
Amount (\$) \$17,500.00	Payee address; City; PO BOX 123 Colleyville, TX 76034	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/10/2025	Payee name Bluestone Creatives, LLC	
Amount (\$) \$2,425.92	Payee address; City; PO BOX 123 Colleyville, TX 76034	
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 Monday Work Management
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: 48/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/10/2025	5 Payee name Bluestone Creatives, LLC	
6 Amount (\$) \$75.36	7 Payee address; City; PO BOX 123 Colleyville, TX 76034	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Uber
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/08/2025	Payee name Bluestone Creatives, LLC	
Amount (\$) \$26,956.84	Payee address; City; PO BOX 123 Colleyville, TX 76034	State; Zip Code
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 Texting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/20/2025	Payee name Bluestone Creatives, LLC	
Amount (\$) \$85,446.31	Payee address; City; PO BOX 123 Colleyville, TX 76034	State; Zip Code
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 Texting
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: 49/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/07/2025	5 Payee name Bluestone Creatives, LLC	
6 Amount (\$) \$3,000.00	7 Payee address; City; PO BOX 123 Colleyville, TX 76034	
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 Research Consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/21/2025	Payee name Bluestone Creatives, LLC	
Amount (\$) \$65,642.06	Payee address; City; PO BOX 123 Colleyville, TX 76034	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/16/2025	Payee name Bluestone Creatives, LLC	
Amount (\$) \$2,500.00	Payee address; City; PO BOX 123 Colleyville, TX 76034	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor - Marketing
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: 50/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/10/2025	5 Payee name Bluestone Creatives, LLC	
6 Amount (\$) \$9,000.00	7 Payee address; City; PO BOX 123 Colleyville, TX 76034	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting - Research
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/03/2025	Payee name Bluestone Creatives, LLC	
Amount (\$) \$204.87	Payee address; City; PO BOX 123 Colleyville, TX 76034	
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 Docusign
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/03/2025	Payee name Bluestone Creatives, LLC	
Amount (\$) \$11.82	Payee address; City; PO BOX 123 Colleyville, TX 76034	
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 TicketTailor
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: 51/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 07/03/2025	5 Payee name Bluestone Creatives, LLC		
6 Amount (\$) \$27.30	7 Payee address; City; PO BOX 123 Colleyville, TX 76034	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/03/2025	Payee name Bluestone Creatives, LLC		
Amount (\$) \$12,000.00	Payee address; City; PO BOX 123 Colleyville, TX 76034	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/07/2025	Payee name Bluestone Creatives		
Amount (\$) \$17,500.00	Payee address; City; PO BOX 123 Colleyville, TX 76034	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting	
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: 52/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 12/15/2025	5 Payee name Bluestone Creatives		
6 Amount (\$) \$106,700.85	7 Payee address; City; PO BOX 123 Colleyville, TX 76034	State; Zip Code	
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 texting	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/31/2025	Payee name Breaux, Chris		
Amount (\$) \$1,000.00	Payee address; City; 419 Messina Rd Sour Lake, TX 77659	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/15/2025	Payee name Breaux, Chris		
Amount (\$) \$1,000.00	Payee address; City; 419 Messina Rd Sour Lake, TX 77659	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor	
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: 53/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/28/2025	5 Payee name Breaux, Chris	
6 Amount (\$) \$1,000.00	7 Payee address; City; 419 Messina Rd Sour Lake, TX 77659	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name Breaux, Chris	
Amount (\$) \$1,000.00	Payee address; City; 419 Messina Rd Sour Lake, TX 77659	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/31/2025	Payee name Burch, Sam	
Amount (\$) \$500.00	Payee address; City; 241 W Maple St Lombard, IL 60148	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
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: 54/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/15/2025	5 Payee name Burch, Sam	
6 Amount (\$) \$500.00	7 Payee address; City; 241 W Maple St Lombard, IL 60148	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/28/2025	Payee name Burch, Sam	
Amount (\$) \$500.00	Payee address; City; 241 W Maple St Lombard, IL 60148	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name Burch, Sam	
Amount (\$) \$500.00	Payee address; City; 241 W Maple St Lombard, IL 60148	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
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: 55/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/31/2025	5 Payee name Burch, Sam	
6 Amount (\$) \$500.00	7 Payee address; City; 241 W Maple St Lombard, IL 60148	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/17/2025	Payee name Burch, Sam	
Amount (\$) \$500.00	Payee address; City; 241 W Maple St Lombard, IL 60148	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/20/2025	Payee name Bush, Kyle	
Amount (\$) \$1,050.00	Payee address; City; 1160 N White Chapel Blvd Southlake, TX 76092	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
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: 56/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/14/2025	5 Payee name CCF LEGAL	
6 Amount (\$) \$3,390.00	7 Payee address; City; 1203 TRINITY ST LIBERTY, TX 77575	
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 FEES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/16/2025	Payee name CCF Legal	
Amount (\$) \$750.00	Payee address; City; 1203 Trinity St. Liberty, TX 77575	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense legal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/15/2025	Payee name CCFLegal	
Amount (\$) \$1,742.00	Payee address; City; 1203 Trinity St. Liberty, TX 77575	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense legal fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 57/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/06/2025	5 Payee name CEFCO Convenience Store	
6 Amount (\$) \$47.83	7 Payee address; City; State; Zip Code 1699 Central Expressway Lampasas, TX 76550	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/18/2025	Payee name CVS PHARMACY	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 8335 Westchester Drive Dallas, TX 75225	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense volunteer appreciation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/31/2025	Payee name Cabrera, Roxanne	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 10419 High Hollows Drive Unit 209 Dallas, TX 75230	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
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: 58/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/28/2025	5 Payee name Cabrera, Roxanne	
6 Amount (\$) \$3,000.00	7 Payee address; City; State; Zip Code 10419 High Hollows Drive Unit 209 Dallas, TX 75230	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Cabrera, Roxanne	Office sought Office held
Date 10/31/2025	Payee name Cabrera, Roxanne	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 10419 High Hollows Drive Unit 209 Dallas, TX 75230	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Cabrera, Roxanne	Office sought Office held
Date 09/30/2025	Payee name Cabrera, Roxanne	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 10419 High Hollows Drive Unit 209 Dallas, TX 75230	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Cabrera, Roxanne	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: 59/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/29/2025	5 Payee name Cabrera, Roxanne	
6 Amount (\$) \$3,000.00	7 Payee address; City; State; Zip Code 10419 High Hollows Drive Unit 209 Dallas, TX 75230	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Cabrera, Roxanne	Office sought Office held
Date 08/05/2025	Payee name Cabrera, Roxanne	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 10419 High Hollows Drive Unit 209 Dallas, TX 75230	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Cabrera, Roxanne	Office sought Office held
Date 07/01/2025	Payee name Cabrera, Roxanne	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 10419 High Hollows Drive Unit 209 Dallas, TX 75230	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Cabrera, Roxanne	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: 60/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/16/2025	5 Payee name Canva	
6 Amount (\$) \$106.60	7 Payee address; City; State; Zip Code 3212 E Cesar Chavez Street 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 subscription
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought
Date 11/10/2025	Payee name Chandler, Cook & Fitzgerald PLLC	Office held Office held
Amount (\$) \$930.00	Payee address; City; State; Zip Code 1203 Trinity St Liberty, TX 77575	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Attorney
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought
Date 12/30/2025	Payee name Chandler, Cook, & Fitzgerald PLLC	Office held Office held
Amount (\$) \$3,985.00	Payee address; City; State; Zip Code 1203 TRINITY ST LIBERTY, TX 77575	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Legal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 61/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/08/2025	5 Payee name CheckOne Investigations LLC	
6 Amount (\$) \$1,293.00	7 Payee address; City; State; Zip Code 163 Stratham Heights Rd Stratham, NH 03885-2513	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense background check
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/03/2025	Payee name CheckOne Investigations LLC	
Amount (\$) \$597.00	Payee address; City; State; Zip Code 163 Stratham Heights Rd Stratham, NH 03885-2513	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense background check
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/02/2025	Payee name CheckOne Investigations LLC	
Amount (\$) \$796.00	Payee address; City; State; Zip Code 163 Stratham Heights Rd Stratham, NH 03885-2513	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense background check
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: 62/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 11/20/2025	5 Payee name Clear Channel Outdoor		
6 Amount (\$) \$8,194.15	7 Payee address; City; 4830 N Loop 1604 W Suite 11 San Antonio, TX 78249	State; Zip Code	
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 billboards	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/08/2025	Payee name Collin County GOP		
Amount (\$) \$500.00	Payee address; City; 2963 W 15th Suite 2981 Plano, TX 75075	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/26/2025	Payee name Concert Car Service		
Amount (\$) \$696.00	Payee address; City; 530 W Broadview D San Antonio, TX 78228	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car rental	
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: 63/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/08/2025	5 Payee name Conservative Media Properties	
6 Amount (\$) \$20,000.00	7 Payee address; City; 1533 W. Alabama Houston, TX 77006	
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 newspaper ad
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name Cuddle Creation	
Amount (\$) \$83.20	Payee address; City; 9105 High Oaks Dr North Richland Hills, TX 76182	
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 merchandise embroidery
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/27/2025	Payee name Cuddle Creation	
Amount (\$) \$104.00	Payee address; City; 9105 High Oaks Dr North Richland Hills, TX 76182	
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 embroidery merchandise
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: 64/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/12/2025	5 Payee name Cuddle Creation	
6 Amount (\$) \$101.33	7 Payee address; City; 9105 High Oaks Dr North Richland Hills, TX 76182	
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 merchandise embroidery
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name CyFair Republican Women	
Amount (\$) \$1,000.00	Payee address; City; 8524 Hwy. 6 North Suite 550 Houston, TX 77095	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/24/2025	Payee name DPM GROUP	
Amount (\$) \$7,736.25	Payee address; City; 1910 S. Nicklas Avenue Oklahoma City, OK 73128	
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 direct mail
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: 65/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/26/2025	5 Payee name DPM GROUP	
6 Amount (\$) \$7,845.74	7 Payee address; City; State; Zip Code 1910 S. Nicklas Avenue Oklahoma City, OK 73128	
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 direct mail
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/17/2025	Payee name Dallas Printing	
Amount (\$) \$900.32	Payee address; City; State; Zip Code 6162 Sherry Lane Dallas, TX 75225	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/30/2025	Payee name Data Solved	
Amount (\$) \$782.65	Payee address; City; State; Zip Code 6160 Warren Pkwy STE 100 Frisco, TX 75034	
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 IT services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 66/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/25/2025	5 Payee name DataSolved	
6 Amount (\$) \$51.96	7 Payee address; City; 6160 Warren Pkwy Ste 100 Frisco, TX 75034	
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 IT Support
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name DataSolved	Office sought Office held
Date 12/01/2025	Payee name DataSolved	
Amount (\$) \$51.96	Payee address; City; 6160 Warren Pkwy Frisco, TX 75034	
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 IT expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Denton County Conservative Coalition	Office sought Office held
Date 10/09/2025	Payee name Denton County Conservative Coalition	
Amount (\$) \$750.00	Payee address; City; 1301 Justin Rd., suite 201 Lewisville, TX 75077	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SPONSORSHIP
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name DataSolved	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: 67/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/05/2025	5 Payee name Door Dash	
6 Amount (\$) \$50.90	7 Payee address; City; State; Zip Code 303 2nd Street Suite 800 San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/23/2025	Payee name DoorDash	
Amount (\$) \$30.63	Payee address; City; State; Zip Code 303 2nd St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name E.H Teasley & Com	
Amount (\$) \$2,308.90	Payee address; City; State; Zip Code 4443 Simonton Rd Farmers Branch, TX 75244	
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 billboard printing
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: 68/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/14/2025	5 Payee name El Paso GOP	
6 Amount (\$) \$5,000.00	7 Payee address; City; 7717 Lockheed Dr STE D El Paso, TX 79925	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense el paos regan dinner tickets / sponsor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/23/2025	Payee name EyesOver LLC	
Amount (\$) \$3,000.00	Payee address; City; 3745 Medina Road Ste C Medina, OH 44256	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 Polling
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name EyesOver LLC	
Amount (\$) \$3,000.00	Payee address; City; 3745 Medina Road Ste C Medina, OH 44256	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 Polling
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: 69/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/16/2025	5 Payee name EyesOver LLC	
6 Amount (\$) \$3,000.00	7 Payee address; City; 3745 Medina Road Ste C Medina, OH 44256	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 Polling
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/26/2025	Payee name EyesOver LLC	
Amount (\$) \$9,000.00	Payee address; City; 3745 Medina Road Ste C Medina, OH 44256	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 Polling
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/07/2025	Payee name EyesOver LLC	
Amount (\$) \$3,000.00	Payee address; City; 3745 Medina Road Ste C Medina, OH 44256	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 Polling
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: 70/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 10/01/2025	5 Payee name Facebook		
6 Amount (\$) \$5,400.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/02/2025	Payee name Facebook		
Amount (\$) \$1,800.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/02/2025	Payee name Facebook		
Amount (\$) \$7.13	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 71/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 10/03/2025	5 Payee name Facebook		
6 Amount (\$) \$1,800.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/06/2025	Payee name Facebook		
Amount (\$) \$6,300.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/07/2025	Payee name Facebook		
Amount (\$) \$1,800.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 72/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 10/08/2025	5 Payee name Facebook		
6 Amount (\$) \$1,800.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/09/2025	Payee name Facebook		
Amount (\$) \$2,700.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/10/2025	Payee name Facebook		
Amount (\$) \$1,800.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 73/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/15/2025	5 Payee name Facebook	
6 Amount (\$) \$2,700.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code
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 Social Media
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 10/16/2025	Payee name Facebook	Office held
Amount (\$) \$1,800.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code
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 Social Media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 10/17/2025	Payee name Facebook	Office held
Amount (\$) \$2,700.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code
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 Social Media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 74/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 10/20/2025	5 Payee name Facebook		
6 Amount (\$) \$6,299.72	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/21/2025	Payee name Facebook		
Amount (\$) \$2,700.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/22/2025	Payee name Facebook		
Amount (\$) \$2,700.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 75/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 10/23/2025	5 Payee name Facebook		
6 Amount (\$) \$1,800.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/24/2025	Payee name Facebook		
Amount (\$) \$1,800.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/27/2025	Payee name Facebook		
Amount (\$) \$8,100.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 76/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 10/28/2025	5 Payee name Facebook		
6 Amount (\$) \$2,700.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/29/2025	Payee name Facebook		
Amount (\$) \$2,700.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/30/2025	Payee name Facebook		
Amount (\$) \$5,400.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 77/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 10/31/2025	5 Payee name Facebook		
6 Amount (\$) \$4,500.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/03/2025	Payee name Facebook		
Amount (\$) \$17.98	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media Ads	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/07/2025	Payee name Facebook		
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media Ads	
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: 78/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 07/07/2025	5 Payee name Facebook		
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media Ads	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/07/2025	Payee name Facebook		
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media Ads	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/07/2025	Payee name Facebook		
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media Ads	
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: 79/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 07/07/2025	5 Payee name Facebook		
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media Ads	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/07/2025	Payee name Facebook		
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media Ads	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/07/2025	Payee name Facebook		
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media Ads	
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: 80/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/07/2025	5 Payee name Facebook	
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 Social Media Ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/07/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 Social Media Ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/07/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 Social Media Ads
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: 81/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 07/07/2025	5 Payee name Facebook		
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media Ads	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/07/2025	Payee name Facebook		
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 Social Media Ads	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/08/2025	Payee name Facebook		
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media ads	
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: 82/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/14/2025	5 Payee name Facebook	
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/14/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/14/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
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: 83/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/14/2025	5 Payee name Facebook	
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	Office sought Office held
Date 07/14/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	Office sought Office held
Date 07/14/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	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: 84/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/14/2025	5 Payee name Facebook	
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/14/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/14/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
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: 85/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/14/2025	5 Payee name Facebook	
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/15/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/15/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
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: 86/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 07/15/2025	5 Payee name Facebook		
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025		
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 social media ads	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/16/2025	Payee name Facebook		
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025		
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 social media ads	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/16/2025	Payee name Facebook		
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025		
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 social media ads	
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: 87/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/16/2025	5 Payee name Facebook	
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	Office sought Office held
Date 07/16/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	Office sought Office held
Date 07/17/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	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: 88/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/17/2025	5 Payee name Facebook	
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	Office sought Office held
Date 07/17/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	Office sought Office held
Date 07/21/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	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: 89/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 07/21/2025	5 Payee name Facebook		
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media ads	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/21/2025	Payee name Facebook		
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media ads	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/21/2025	Payee name Facebook		
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media ads	
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: 90/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/21/2025	5 Payee name Facebook	
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/21/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/21/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
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: 91/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/21/2025	5 Payee name Facebook	
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/21/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/21/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
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: 92/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 07/21/2025	5 Payee name Facebook		
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025		
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 social media ads	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/22/2025	Payee name Facebook		
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025		
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 social media ads	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/22/2025	Payee name Facebook		
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025		
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 social media ads	
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: 93/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/22/2025	5 Payee name Facebook	
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/22/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/23/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
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: 94/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/23/2025	5 Payee name Facebook	
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/23/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/24/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
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: 95/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/24/2025	5 Payee name Facebook	
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	Office sought Office held
Date 07/24/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	Office sought Office held
Date 07/24/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	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: 96/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/25/2025	5 Payee name Facebook	
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/25/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/25/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
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: 97/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/25/2025	5 Payee name Facebook	
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	Office sought Office held
Date 07/28/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	Office sought Office held
Date 07/28/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	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: 98/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/28/2025	5 Payee name Facebook	
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	Office sought Office held
Date 07/28/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	Office sought Office held
Date 07/28/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	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: 99/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 07/28/2025	5 Payee name Facebook		
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media ads	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/28/2025	Payee name Facebook		
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media ads	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/28/2025	Payee name Facebook		
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media ads	
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: 100/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/28/2025	5 Payee name Facebook	
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	Office sought Office held
Date 07/28/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	Office sought Office held
Date 07/29/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	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: 101/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/29/2025	5 Payee name Facebook	
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/29/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/29/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
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: 102/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/30/2025	5 Payee name Facebook	
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/30/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/30/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
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: 103/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/30/2025	5 Payee name Facebook	
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/31/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/31/2025	Payee name Facebook	
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
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: 104/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/31/2025	5 Payee name Facebook	
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/02/2025	Payee name Facebook	
Amount (\$) \$10,524.75	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/03/2025	Payee name Facebook	
Amount (\$) \$1,800.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 105/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 09/04/2025	5 Payee name Facebook		
6 Amount (\$) \$1,800.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/05/2025	Payee name Facebook		
Amount (\$) \$2,700.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/08/2025	Payee name Facebook		
Amount (\$) \$5,400.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 106/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/09/2025	5 Payee name Facebook	
6 Amount (\$) \$2,700.00	7 Payee address; City; State; Zip Code 1 Meta Way Menlo Park, CA 94025	
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 social media
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/10/2025	Payee name Facebook	
Amount (\$) \$1,800.00	Payee address; City; State; Zip Code 1 Meta Way Menlo Park, CA 94025	
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 social media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/11/2025	Payee name Facebook	
Amount (\$) \$1,800.00	Payee address; City; State; Zip Code 1 Meta Way Menlo Park, CA 94025	
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 social media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 107/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 09/12/2025	5 Payee name Facebook		
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/15/2025	Payee name Facebook		
Amount (\$) \$4,500.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/16/2025	Payee name Facebook		
Amount (\$) \$1,800.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 108/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 09/17/2025	5 Payee name Facebook		
6 Amount (\$) \$1,800.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/18/2025	Payee name Facebook		
Amount (\$) \$2,700.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/19/2025	Payee name Facebook		
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 109/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 09/22/2025	5 Payee name Facebook		
6 Amount (\$) \$3,600.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/23/2025	Payee name Facebook		
Amount (\$) \$1,800.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/24/2025	Payee name Facebook		
Amount (\$) \$1,800.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 110/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 09/25/2025	5 Payee name Facebook		
6 Amount (\$) \$2,700.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/26/2025	Payee name Facebook		
Amount (\$) \$1,800.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/29/2025	Payee name Facebook		
Amount (\$) \$9,000.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 111/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 09/30/2025	5 Payee name Facebook		
6 Amount (\$) \$15,300.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/03/2025	Payee name Facebook		
Amount (\$) \$5,587.36	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/04/2025	Payee name Facebook		
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 112/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 11/05/2025	5 Payee name Facebook		
6 Amount (\$) \$2,700.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/06/2025	Payee name Facebook		
Amount (\$) \$1,800.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/07/2025	Payee name Facebook		
Amount (\$) \$3,600.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 113/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 11/10/2025	5 Payee name Facebook		
6 Amount (\$) \$16,200.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/10/2025	Payee name Facebook		
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/12/2025	Payee name Facebook		
Amount (\$) \$5,400.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 114/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 11/13/2025	5 Payee name Facebook		
6 Amount (\$) \$7,200.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/14/2025	Payee name Facebook		
Amount (\$) \$5,449.77	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/17/2025	Payee name Facebook		
Amount (\$) \$18,000.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 115/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 11/17/2025	5 Payee name Facebook		
6 Amount (\$) \$2,700.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/18/2025	Payee name Facebook		
Amount (\$) \$7,200.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/19/2025	Payee name Facebook		
Amount (\$) \$3,600.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 116/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 11/20/2025	5 Payee name Facebook		
6 Amount (\$) \$5,400.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/20/2025	Payee name Facebook		
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/21/2025	Payee name Facebook		
Amount (\$) \$7,200.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 117/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 11/24/2025	5 Payee name Facebook		
6 Amount (\$) \$11,700.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/24/2025	Payee name Facebook		
Amount (\$) \$8,100.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/25/2025	Payee name Facebook		
Amount (\$) \$5,400.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 118/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 11/26/2025	5 Payee name Facebook		
6 Amount (\$) \$6,300.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/28/2025	Payee name Facebook		
Amount (\$) \$14,400.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/01/2025	Payee name Facebook		
Amount (\$) \$2,700.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 119/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 08/04/2025	5 Payee name Facebook		
6 Amount (\$) \$84.17	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/04/2025	Payee name Facebook		
Amount (\$) \$6,300.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/06/2025	Payee name Facebook		
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 120/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/07/2025	5 Payee name Facebook	
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/11/2025	Payee name Facebook	
Amount (\$) \$3,600.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/12/2025	Payee name Facebook	
Amount (\$) \$3,600.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	
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 social media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 121/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 08/14/2025	5 Payee name Facebook		
6 Amount (\$) \$1,800.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/14/2025	Payee name Facebook		
Amount (\$) \$659.19	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/15/2025	Payee name Facebook		
Amount (\$) \$1,800.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 122/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 08/18/2025	5 Payee name Facebook		
6 Amount (\$) \$2,699.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/01/2025	Payee name Facebook		
Amount (\$) \$25,200.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/01/2025	Payee name Facebook		
Amount (\$) \$4,501.01	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 123/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 12/03/2025	5 Payee name Facebook		
6 Amount (\$) \$54,000.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/03/2025	Payee name Facebook		
Amount (\$) \$4,500.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/05/2025	Payee name Facebook		
Amount (\$) \$4,500.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 124/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 12/08/2025	5 Payee name Facebook		
6 Amount (\$) \$13,500.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/08/2025	Payee name Facebook		
Amount (\$) \$4,500.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/09/2025	Payee name Facebook		
Amount (\$) \$4,500.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 125/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 12/10/2025	5 Payee name Facebook		
6 Amount (\$) \$2,700.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/11/2025	Payee name Facebook		
Amount (\$) \$3,600.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/12/2025	Payee name Facebook		
Amount (\$) \$5,400.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 126/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 12/15/2025	5 Payee name Facebook		
6 Amount (\$) \$11,700.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/16/2025	Payee name Facebook		
Amount (\$) \$4,500.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/17/2025	Payee name Facebook		
Amount (\$) \$5,400.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 127/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 12/18/2025	5 Payee name Facebook		
6 Amount (\$) \$5,400.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/19/2025	Payee name Facebook		
Amount (\$) \$4,500.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/22/2025	Payee name Facebook		
Amount (\$) \$8,100.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1: Sch: 128/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 12/22/2025	5 Payee name Facebook		
6 Amount (\$) \$7,200.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/26/2025	Payee name Facebook		
Amount (\$) \$7,200.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/29/2025	Payee name Facebook		
Amount (\$) \$3,600.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 129/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 12/29/2025	5 Payee name Facebook		
6 Amount (\$) \$12,600.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/29/2025	Payee name Facebook		
Amount (\$) \$3,600.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/30/2025	Payee name Facebook		
Amount (\$) \$8,100.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 130/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 12/30/2025	5 Payee name Facebook		
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/31/2025	Payee name Facebook		
Amount (\$) \$10,800.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/24/2025	Payee name Facebook		
Amount (\$) \$4,500.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 131/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 12/26/2025	5 Payee name Facebook		
6 Amount (\$) \$900.00	7 Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/23/2025	Payee name Facebook		
Amount (\$) \$5,400.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/24/2025	Payee name Facebook		
Amount (\$) \$900.00	Payee address; City; 1 Meta Way Menlo Park, CA 94025	State; Zip Code	
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 social media	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 132/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/01/2025	5 Payee name FedEx	
6 Amount (\$) \$38.00	7 Payee address; City; 2201 Stemmons Fwy Dallas, TX 75207	
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 postage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name FedEx	
Amount (\$) \$28.50	Payee address; City; 2201 Stemmons Fwy Dallas, TX 75207	
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
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/21/2025	Payee name FedEx	
Amount (\$) \$54.33	Payee address; City; 2201 Stemmons Fwy Dallas, TX 75207	
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
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: 133/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/10/2025	5 Payee name FedEx	
6 Amount (\$) \$13.75	7 Payee address; City; 2201 Stemmons Fwy Dallas, TX 75207	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/10/2025	Payee name FedEx	
Amount (\$) \$29.52	Payee address; City; 2201 Stemmons Fwy Dallas, TX 75207	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/10/2025	Payee name FedEx	
Amount (\$) \$432.98	Payee address; City; 2201 Stemmons Fwy Dallas, TX 75207	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
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: 134/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/25/2025	5 Payee name FedEx	
6 Amount (\$) \$981.88	7 Payee address; City; State; Zip Code 2201 Stemmons Fwy Dallas, TX 75207	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/26/2025	Payee name FedEx	
Amount (\$) \$66.10	Payee address; City; State; Zip Code 2201 Stemmons Fwy Dallas, TX 75207	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/04/2025	Payee name FedEx	
Amount (\$) \$561.55	Payee address; City; State; Zip Code 415 E State Hwy 114 Grapevine, TX 76051	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
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: 135/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/05/2025	5 Payee name FedEx	
6 Amount (\$) \$55.00	7 Payee address; City; State; Zip Code 5615 Colleyville Blvd Suite 210 Colleyville, TX 76034	
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 printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/25/2025	Payee name FedEx	
Amount (\$) \$17.12	Payee address; City; State; Zip Code 415 E State Hwy 114 Grapevine, TX 76051	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/25/2025	Payee name FedEx	
Amount (\$) \$227.31	Payee address; City; State; Zip Code 415 E State Hwy 114 Grapevine, TX 76051	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
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: 136/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/28/2025	5 Payee name FedEx	
6 Amount (\$) \$13.75	7 Payee address; City; 415 E State Hwy 114 Grapevine, TX 76051	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 12/16/2025	Payee name FedEx	
Amount (\$) \$41.25	Payee address; City; 5615 Colleyville Blvd Suite 210 Colleyville, TX 76034	
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 printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 12/18/2025	Payee name FedEx	
Amount (\$) \$75.14	Payee address; City; 5615 Colleyville Blvd Suite 210 Colleyville, TX 76034	
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 printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 137/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/22/2025	5 Payee name FedEx	
6 Amount (\$) \$58.61	7 Payee address; City; State; Zip Code 5615 Colleyville Blvd Suite 210 Colleyville, TX 76034	
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 printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/23/2025	Payee name FedEx	
Amount (\$) \$1,817.02	Payee address; City; State; Zip Code 5615 Colleyville Blvd Suite 210 Colleyville, TX 76034	
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 printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/12/2025	Payee name Fedex	
Amount (\$) \$50.87	Payee address; City; State; Zip Code 2201 Stemmons Fwy Dallas, TX 75207	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
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: 138/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/15/2025	5 Payee name Fedex	
6 Amount (\$) \$27.50	7 Payee address; City; 2201 Stemmons Fwy Dallas, TX 75207	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/18/2025	Payee name Fedex	
Amount (\$) \$32.21	Payee address; City; 2201 Stemmons Fwy Dallas, TX 75207	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/23/2025	Payee name Flying Fish No. 3	
Amount (\$) \$108.39	Payee address; City; 6126 Luther Lane Dallas, TX 75225	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense lunch for staff
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: 139/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/10/2025	5 Payee name For Liberty and Justice	
6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 1701 Oakhurst Scenic Drive Fort Worth, TX 76111	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event tickets / sponsor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/17/2025	Payee name Fredericksburg Tea	
Amount (\$) \$3,167.15	Payee address; City; State; Zip Code P.O. Box 343 Fredericksburg, TX 78624	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/28/2025	Payee name Gibson, Leigh	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 136 Upala Springs Ranch Rd Kerrville, TX 78028	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
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: 140/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/17/2025	5 Payee name Gibson, Leigh	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 136 Upala Springs Ranch Rd Kerrville, TX 78028	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Gibson, Leigh	Office sought Office held
Date 11/13/2025	Payee name Gibson, Leigh	
Amount (\$) \$350.00	Payee address; City; State; Zip Code 136 Upala Springs Ranch Rd Kerrville, TX 78028	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense mileage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Gibson, Leigh	Office sought Office held
Date 10/31/2025	Payee name Gibson, Leigh	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 136 Upala Springs Ranch Rd Kerrville, TX 78028	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Gibson, Leigh	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: 141/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/17/2025	5 Payee name Gibson, Leigh	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 136 Upala Springs Ranch Rd Kerrville, TX 78028	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Gibson, Leigh	Office sought Office held
Date 10/01/2025	Payee name Gibson, Leigh	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 136 Upala Springs Ranch Rd Kerrville, TX 78028	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Gideons 300 BAMN LLC	Office sought Office held
Date 11/10/2025	Payee name Gideons 300 BAMN LLC	
Amount (\$) \$1,090.25	Payee address; City; State; Zip Code 9031 Cedar Ridge Argyle, TX 76226	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor - Grassroots mileage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Gideons 300 BAMN LLC	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: 142/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 08/26/2025	5 Payee name Gideons 300 BAMN LLC		
6 Amount (\$) \$7,500.00	7 Payee address; City; 9031 Cedar Rdg Argyle, TX 76226	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor - Grassroots	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/10/2025	Payee name Gideons 300 BAMN LLC		
Amount (\$) \$15,000.00	Payee address; City; 9031 Cedar Rdg Argyle, TX 76226	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor - Grassroots	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/10/2025	Payee name Gideons 300 BAMN LLC		
Amount (\$) \$15,000.00	Payee address; City; 9031 Cedar Rdg Argyle, TX 76226	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor - Grassroots	
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: 143/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/11/2025	5 Payee name Gideons 300 BAMN LLC	
6 Amount (\$) \$15,000.00	7 Payee address; City; 9031 Cedar Rdg Argyle, TX 76626	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor - Grassroots
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/24/2025	Payee name Grand Hyatt	
Amount (\$) \$25.98	Payee address; City; 600 E Market St San Antonio, TX 78205	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TFRW convention
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/27/2025	Payee name Grand Hyatt	
Amount (\$) \$18.67	Payee address; City; 600 E Market St San Antonio, TX 78205	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TFRW convention
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: 144/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/27/2025	5 Payee name Grand Hyatt	
6 Amount (\$) \$136.40	7 Payee address; City; 600 E Market St San Antonio, TX 78205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TFRW convention
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/27/2025	Payee name Grand Hyatt	
Amount (\$) \$579.33	Payee address; City; 600 E Market St San Antonio, TX 78205	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TFRW convention
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/27/2025	Payee name Grand Hyatt	
Amount (\$) \$878.66	Payee address; City; 600 E Market St San Antonio, TX 78205	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TFRW convention
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: 145/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/27/2025	5 Payee name Grand Hyatt	
6 Amount (\$) \$999.18	7 Payee address; City; 600 E Market St San Antonio, TX 78205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TFRW convention
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/07/2025	Payee name Grassroots America We the People	
Amount (\$) \$5,154.48	Payee address; City; PO BOX 130012 Tyler, TX 75713	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/23/2025	Payee name IAH Jetero Market	
Amount (\$) \$8.84	Payee address; City; 2800 Terminal Rd N Houston, TX 77032	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense coffee
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: 146/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/21/2025	5 Payee name INTUIT	
6 Amount (\$) \$267.04	7 Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense quickbooks
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/22/2025	Payee name INTUIT	
Amount (\$) \$280.89	Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense quickbooks
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/23/2025	Payee name Instacart	
Amount (\$) \$22.98	Payee address; City; State; Zip Code 92 South Park Avenue San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food
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: 147/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/22/2025	5 Payee name Intuit Quickbooks	
6 Amount (\$) \$183.89	7 Payee address; City; State; Zip Code 5601 Headquarters Drive Plano, TX 75024	
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 accounting subscription
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought
Date 10/03/2025	Payee name Jetsuitex inc.	Office held Office held
Amount (\$) \$353.00	Payee address; City; State; Zip Code 7201 Lemmon Avenue DALLAS, TX 75209	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FLIGHT
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought
Date 10/10/2025	Payee name Jetsuitex inc.	Office held Office held
Amount (\$) \$1,598.00	Payee address; City; State; Zip Code 7201 Lemmon Avenue DALLAS, TX 75209	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 148/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/31/2025	5 Payee name Joe's Crab Shack	
6 Amount (\$) \$1,058.37	7 Payee address; City; 444 N Shoreline Corpus Christi, TX 78401	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/31/2025	Payee name Jones, Ronnie	
Amount (\$) \$1,500.00	Payee address; City; 6007 Thorn Trl Flower Mound, TX 75028	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/22/2025	Payee name Jones, Ronnie	
Amount (\$) \$537.35	Payee address; City; 6007 Thorn Trl Flower Mound, TX 75028	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense mileage
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: 149/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/15/2025	5 Payee name Jones, Ronnie	
6 Amount (\$) \$1,500.00	7 Payee address; City; 6007 Thorn Trl Flower Mound, TX 75028	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/28/2025	Payee name Jones, Ronnie	
Amount (\$) \$1,500.00	Payee address; City; 6007 Thorn Trl Flower Mound, TX 75028	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name Jones, Ronnie	
Amount (\$) \$1,500.00	Payee address; City; 6007 Thorn Trl Flower Mound, TX 75028	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
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: 150/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/13/2025	5 Payee name Jones, Ronnie	
6 Amount (\$) \$271.32	7 Payee address; City; 6007 Thorn Trl Flower Mound, TX 75028	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense mileage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/31/2025	Payee name Jones, Ronnie	
Amount (\$) \$1,500.00	Payee address; City; 6007 Thorn Trl Flower Mound, TX 75028	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/17/2025	Payee name Jones, Ronnie	
Amount (\$) \$1,500.00	Payee address; City; 6007 Thorn Trl Flower Mound, TX 75028	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
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: 151/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/07/2025	5 Payee name Jose Mendoza, Jose	
6 Amount (\$) \$350.00	7 Payee address; City; 812 Green River Trl Fort Worth, TX 76103	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Katy Christian Magazine	Office sought Office held
Date 12/16/2025	Payee name Katy Christian Magazine	
Amount (\$) \$5,500.00	Payee address; City; 650 W Bough Ln Houston, TX 77024	State; Zip Code
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 print advertisement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Keepers Press, LCCD	Office sought Office held
Date 07/23/2025	Payee name Keepers Press, LCCD	
Amount (\$) \$671.84	Payee address; City; 1905 Alpha Dr Suite 170 Rockwall, TX 75087	State; Zip Code
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 Printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Keepers Press, LCCD	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: 152/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/06/2025	5 Payee name Keepers Press	
6 Amount (\$) \$547.20	7 Payee address; City; State; Zip Code 1905 Alpha Dr Suite 170 Rockwall, TX 75087	
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 printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name Keepers Press	
Amount (\$) \$4,361.24	Payee address; City; State; Zip Code 1905 Alpha Dr Suite 170 Rockwall, TX 75087	
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 printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name Keepers Press	
Amount (\$) \$9,872.70	Payee address; City; State; Zip Code 1905 Alpha Dr Suite 170 Rockwall, TX 75087	
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 printing
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: 153/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 10/14/2025	5 Payee name Keepers Press		
6 Amount (\$) \$3,264.39	7 Payee address; City; 1905 Alpha Dr Suite 170 Rockwall, TX 75087		
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 printing	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/31/2025	Payee name Keepers Press		
Amount (\$) \$2,696.07	Payee address; City; 1905 Alpha Dr Suite 170 Rockwall, TX 75087		
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 printing	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/12/2025	Payee name Keepers Press		
Amount (\$) \$309.60	Payee address; City; 1905 Alpha Dr Suite 170 Rockwall, TX 75087		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

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: 154/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/12/2025	5 Payee name Keepers Press	
6 Amount (\$) \$3,121.93	7 Payee address; City; 1905 Alpha Dr Suite 170 Rockwall, TX 75087	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/06/2025	Payee name Keepers Press	
Amount (\$) \$586.56	Payee address; City; 1905 Alpha Dr Suite 170 Rockwall, TX 75087	
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 printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/18/2025	Payee name Lindmark Billboards, LLC	
Amount (\$) \$10,315.00	Payee address; City; 2931 Texoma Dr, Denison, TX 75020	
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 billboards
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: 155/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 11/18/2025	5 Payee name Lindmark Billboards, LLC		
6 Amount (\$) \$25,838.40	7 Payee address; City; 2931 Texoma Dr, Denison, TX 75020	State; Zip Code	
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 billboards	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/20/2025	Payee name Lindmark Billboards, LLC		
Amount (\$) \$19,362.50	Payee address; City; 2931 Texoma Dr, Denison, TX 75020	State; Zip Code	
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 billboards	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/20/2025	Payee name Lindmark Billboards, LLC		
Amount (\$) \$55,356.60	Payee address; City; 2931 Texoma Dr, Denison, TX 75020	State; Zip Code	
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 billboards	
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: 156/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/10/2025	5 Payee name Llano County GOP	
6 Amount (\$) \$1,562.81	7 Payee address; City; PO Box 262 Kingsland, TX 78639	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SPONSORSHIP
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/29/2025	Payee name Mail Chimp	
Amount (\$) \$117.26	Payee address; City; 405 N Angier Ave Atlanta, GA 30308	State; Zip Code
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 website hosting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/29/2025	Payee name Mailchimp	
Amount (\$) \$117.26	Payee address; City; 405 N Angier Ave. NE Atlanta, GA 30308	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 Email system
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: 157/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/29/2025	5 Payee name Mailchimp	
6 Amount (\$) \$117.26	7 Payee address; City; 405 N Angier Ave Atlanta, GA 30308	
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 website hosting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Mailchimp	Office sought Office held
Date 12/01/2025	Payee name Mailchimp	
Amount (\$) \$117.26	Payee address; City; 405 N Angier Ave Atlanta, GA 30308	
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 email hosting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Mailchimp	Office sought Office held
Date 12/29/2025	Payee name Mailchimp	
Amount (\$) \$117.26	Payee address; City; 405 N Angier Ave Atlanta, GA 30308	
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 email hosting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Mailchimp	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 158/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/31/2025	5 Payee name Malish, Casey	
6 Amount (\$) \$1,875.00	7 Payee address; City; 4011 Peppermill Road Houston, TX 78080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Malish, Casey	Office sought Office held
Date 10/17/2025	Payee name Malish, Casey	
Amount (\$) \$1,875.00	Payee address; City; 4011 Peppermill Road Houston, TX 77080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Malish, Casey	Office sought Office held
Date 10/17/2025	Payee name Malish, Casey	
Amount (\$) \$1,125.00	Payee address; City; 4011 Peppermill Road Houston, TX 77080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Malish, Casey	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: 159/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/31/2025	5 Payee name Martinez, Rosalba	
6 Amount (\$) \$1,500.00	7 Payee address; City; 16585 Blanco Rd 707 San Antonio, TX 78232	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/22/2025	Payee name Martinez, Rosalba	
Amount (\$) \$137.57	Payee address; City; 16585 Blanco Rd 707 San Antonio, TX 78232	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense mileage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/15/2025	Payee name Martinez, Rosalba	
Amount (\$) \$1,500.00	Payee address; City; 16585 Blanco Rd 707 San Antonio, TX 78232	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
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: 160/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/28/2025	5 Payee name Martinez, Rosalba	
6 Amount (\$) \$1,500.00	7 Payee address; City; 16585 Blanco Rd 707 San Antonio, TX 78232	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Martinez, Rosalba	Office sought Office held
Date 11/17/2025	Payee name Martinez, Rosalba	
Amount (\$) \$1,500.00	Payee address; City; 16585 Blanco Rd 707 San Antonio, TX 78232	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Martinez, Rosalba	Office sought Office held
Date 11/13/2025	Payee name Martinez, Rosalba	
Amount (\$) \$601.37	Payee address; City; 16585 Blanco Rd 707 San Antonio, TX 78232	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense mileage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Martinez, Rosalba	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: 161/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/31/2025	5 Payee name Martinez, Rosalba	
6 Amount (\$) \$1,500.00	7 Payee address; City; 16585 Blanco Rd 707 San Antonio, TX 78232	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Martinez, Rosalba	Office sought Office held
Date 10/17/2025	Payee name Martinez, Rosalba	
Amount (\$) \$1,500.00	Payee address; City; 16585 Blanco Rd 707 San Antonio, TX 78232	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Martinez, Rosalba	Office sought Office held
Date 10/01/2025	Payee name Martinez, Rosalba	
Amount (\$) \$3,000.00	Payee address; City; 16585 Blanco Rd 707 San Antonio, TX 78232	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Martinez, Rosalba	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: 162/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/17/2025	5 Payee name Martitas Lunch Box	
6 Amount (\$) \$1,863.69	7 Payee address; City; 3623 Buckner St El Paso, TX 79925	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food for campaign event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/20/2025	Payee name Media Eyes, LLC	
Amount (\$) \$2,136.63	Payee address; City; 2949 Cheshire Way Grand Prairie, TX 75052	
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 billboards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/07/2025	Payee name Microsoft	
Amount (\$) \$28.57	Payee address; City; One Microsoft Way Redmond, WA 98052	
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 Email Hosting
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: 163/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/23/2025	5 Payee name Microsoft	
6 Amount (\$) \$51.16	7 Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052	
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 email hosting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/05/2025	Payee name Microsoft	
Amount (\$) \$28.57	Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052	
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 subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/23/2025	Payee name Microsoft	
Amount (\$) \$86.67	Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052	
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 subscription
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: 164/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/05/2025	5 Payee name Microsoft	
6 Amount (\$) \$28.57	7 Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052	
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 subscription
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/08/2025	Payee name Minuteman Press Dallas	
Amount (\$) \$275.69	Payee address; City; State; Zip Code 12640 E Northwest Hwy Dallas, TX 75528	
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 printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/10/2025	Payee name Montague County Republican Party	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 212 Montague, TX 76251	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sponsorship
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: 165/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/10/2025	5 Payee name Montgomery County Republican Party	
6 Amount (\$) \$5,353.04	7 Payee address; City; State; Zip Code 18001 Hwy 105 W Montgomery, TX 77356	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sponsorship
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/11/2025	Payee name Montgomery County Republican Women	
Amount (\$) \$253.00	Payee address; City; State; Zip Code P.O. Box 1766 Conroe, TX 77305	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/10/2025	Payee name Montgomery County Tea Party PAC	
Amount (\$) \$520.51	Payee address; City; State; Zip Code 11 Marquise Oaks Place The Woodlands, TX 77382	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sponsorship
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: 166/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 10/06/2025	5 Payee name NNT Microsoft		
6 Amount (\$) \$28.57	7 Payee address; City; One Microsoft Way Redmond, WA 98052	State; Zip Code	
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 subscription	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name NNT Microsoft	Office sought Redmond, WA 98052	Office held
Date 10/23/2025	Payee name NNT Microsoft		
Amount (\$) \$116.99	Payee address; City; One Microsoft Way Redmond, WA 98052	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 subscription	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name NNT Microsoft	Office sought	Office held
Date 11/05/2025	Payee name NNT Microsoft		
Amount (\$) \$28.57	Payee address; City; One Microsoft Way Redmond, WA 98052	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 subscription	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name NNT Microsoft	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: 167/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/24/2025	5 Payee name NNT Microsoft	
6 Amount (\$) \$123.01	7 Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052	
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 subscription
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/05/2025	Payee name NNT Microsoft	
Amount (\$) \$28.57	Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052	
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 subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/22/2025	Payee name NNT Microsoft	
Amount (\$) \$128.72	Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052	
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 subscription
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: 168/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/09/2025	5 Payee name Nametag Wizard	
6 Amount (\$) \$78.24	7 Payee address; City; 1860 N. E. 43rd Avenue Hillsboro, OR 97124	
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 printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Nametag Wizard	Office sought Office held
Date 11/04/2025	Payee name Nametag Wizard	
Amount (\$) \$22.17	Payee address; City; 1860 N. E. 43rd Avenue Hillsboro, OR 97124	
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 printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Nametag Wizard	Office sought Office held
Date 11/25/2025	Payee name Nametag Wizard	
Amount (\$) \$135.12	Payee address; City; 1860 N. E. 43rd Avenue Hillsboro, OR 97124	
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 printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Nametag Wizard	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: 169/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/29/2025	5 Payee name Nametagwizard.com	
6 Amount (\$) \$22.16	7 Payee address; City; 1860 N. E. 43rd Avenue Hillsboro, OR 97124	State; Zip Code
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 name tag printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 07/30/2025	Payee name North Texas Freedom Rally	
Amount (\$) \$250.00	Payee address; City; 1608 Vail Meadow Lane Dallas, TX 75253	State; Zip Code
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 Magazine Ad
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 07/21/2025	Payee name North Texas Freedom Rally	Office held
Amount (\$) \$250.00	Payee address; City; 1608 Vail Meadow Lane Dallas, TX 75253	State; Zip Code
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 Magazine Ad
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: 170/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/12/2025	5 Payee name Numinar Analytics	
6 Amount (\$) \$7,500.00	7 Payee address; City; 1201 Wilson Boulevard Arlington, VA 22209	
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 voter data
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/22/2025	Payee name PCI- Dallas Love Field	
Amount (\$) \$35.00	Payee address; City; 2702 Love Field Dr Dallas, TX 75235	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/10/2025	Payee name Parking Management Company	
Amount (\$) \$5.99	Payee address; City; 3713 Charlotte Ave Nashville, TN 37209	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense valet tip
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: 171/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/23/2025	5 Payee name Pavon Coffee Den	
6 Amount (\$) \$8.84	7 Payee address; City; 1216 W Clay St Houston, TX 77019	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense coffee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/07/2025	Payee name Political Communications Advertising	
Amount (\$) \$112,200.00	Payee address; City; 11 E 44th St. Suite 301 New York, NY 10017	
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 radio ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/14/2025	Payee name Political Communications Advertising	
Amount (\$) \$14,784.00	Payee address; City; 11 E 44th St. Suite 301 New York, NY 10017	
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 radio ads
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: 172/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 11/21/2025	5 Payee name Political Communications Advertising		
6 Amount (\$) \$7,339.20	7 Payee address; City; 11 E 44th St. Suite 301 New York, NY 10017	State; Zip Code	
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 radio ads	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/24/2025	Payee name Political Communications Advertising		
Amount (\$) \$5,940.00	Payee address; City; 11 E 44th St. Suite 301 New York, NY 10017	State; Zip Code	
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 radio ads	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/17/2025	Payee name Political Communications Advertising		
Amount (\$) \$108,200.00	Payee address; City; 11 E 44th St. Suite 301 New York, NY 10017	State; Zip Code	
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 radio ads	
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: 173/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/14/2025	5 Payee name Pure Buttons	
6 Amount (\$) \$1,301.36	7 Payee address; City; 2991 Interstate Parkway Brunswick, OH 44212	
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 campaign buttons
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/24/2025	Payee name Purebuttons	
Amount (\$) \$70.21	Payee address; City; 2991 Interstate Parkway Brunswick, OH 44212	
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 campaign buttons
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/24/2025	Payee name Purebuttons	
Amount (\$) \$79.08	Payee address; City; 2991 Interstate Parkway Brunswick, OH 44212	
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 campaign buttons
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: 174/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/24/2025	5 Payee name Purebuttons	
6 Amount (\$) \$79.96	7 Payee address; City; State; Zip Code 2991 Interstate Parkway Brunswick, OH 44212	
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 campaign buttons
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/24/2025	Payee name Purebuttons	
Amount (\$) \$106.02	Payee address; City; State; Zip Code 2991 Interstate Parkway Brunswick, OH 44212	
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 campaign buttons
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/07/2025	Payee name Purebuttons	
Amount (\$) \$223.93	Payee address; City; State; Zip Code 2991 Interstate Parkway Brunswick, OH 44212	
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 campaign buttons
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: 175/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/21/2025	5 Payee name Quick Books	
6 Amount (\$) \$239.32	7 Payee address; City; State; Zip Code 5601 Headquarters Drive Plano, TX 75024	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense accounting expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/21/2025	Payee name Quickbooks	
Amount (\$) \$173.76	Payee address; City; State; Zip Code 5601 Headquarters Drive Plano, TX 75024	
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 bookkeeping software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/17/2025	Payee name Raconteur Media Company	
Amount (\$) \$15,427.00	Payee address; City; State; Zip Code 1717 W 6th St Suite 215 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor - Marketing
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: 176/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID 00069651	(Ethics Commission Filers)
4 Date 12/17/2025	5 Payee name Raconteur Media Company		
6 Amount (\$) \$1,050.00	7 Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	State; Zip Code	
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 Email System	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/17/2025	Payee name Raconteur Media Company		
Amount (\$) \$8,907.50	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	State; Zip Code	
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 Texting	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/17/2025	Payee name Raconteur Media Company		
Amount (\$) \$18,254.02	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	State; Zip Code	
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 Social Media Ads - Google	
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: 177/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/17/2025	5 Payee name Raconteur Media Company	
6 Amount (\$) \$17,066.28	7 Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	
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 Social Media Ad Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name Raconteur Media Company	
Amount (\$) \$18,513.00	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor - Marketing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name Raconteur Media Company	
Amount (\$) \$1,050.00	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	
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 Email System
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: 178/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/17/2025	5 Payee name Raconteur Media Company	
6 Amount (\$) \$4,370.15	7 Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	
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 Texting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name Raconteur Media Company	
Amount (\$) \$17,528.52	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	
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 Social Media Ads - Google
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name Raconteur Media Company	
Amount (\$) \$8,937.74	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	
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 Social Media Ad Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 179/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/16/2025	5 Payee name Raconteur Media Company	
6 Amount (\$) \$18,513.00	7 Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor - Marketing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/16/2025	Payee name Raconteur Media Company	
Amount (\$) \$1,050.00	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	
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 Email System
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/16/2025	Payee name Raconteur Media Company	
Amount (\$) \$3,136.40	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	
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 Texting
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: 180/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/16/2025	5 Payee name Raconteur Media Company	
6 Amount (\$) \$692.30	7 Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	State; Zip Code
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 Social Media Ads - Google
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/16/2025	Payee name Raconteur Media Company	
Amount (\$) \$9,384.50	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	State; Zip Code
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 Social Media Ad Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/17/2025	Payee name Raconteur Media Company	
Amount (\$) \$18,663.00	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor - Marketing
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: 181/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/17/2025	5 Payee name Raconteur Media Company	
6 Amount (\$) \$1,050.00	7 Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	State; Zip Code
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 Email System
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Raconteur Media Company	Office sought Office held
Date 09/17/2025	Payee name Raconteur Media Company	
Amount (\$) \$2,712.45	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	State; Zip Code
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 Texting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Raconteur Media Company	Office sought Office held
Date 09/17/2025	Payee name Raconteur Media Company	
Amount (\$) \$37.89	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	State; Zip Code
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 Social Media Ads - Google
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Raconteur Media Company	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: 182/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/17/2025	5 Payee name Raconteur Media Company	
6 Amount (\$) \$7,440.40	7 Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	
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 Social Media Ad Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/15/2025	Payee name Raconteur Media Company	
Amount (\$) \$19,384.00	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor - Marketing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/15/2025	Payee name Raconteur Media Company	
Amount (\$) \$1,050.00	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	
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 Email System
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: 183/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/15/2025	5 Payee name Raconteur Media Company	
6 Amount (\$) \$6,699.03	7 Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	
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 Texting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/15/2025	Payee name Raconteur Media Company	
Amount (\$) \$3,997.07	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	
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 Social Media Ads - Meta
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/15/2025	Payee name Raconteur Media Company	
Amount (\$) \$1,487.72	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	
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 Social Media Ads - Google
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: 184/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/15/2025	5 Payee name Raconteur Media Company	
6 Amount (\$) \$6,000.00	7 Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	
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 Geofence Advertising
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/15/2025	Payee name Raconteur Media Company	
Amount (\$) \$9,858.65	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	
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 Social Media Ad Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/10/2025	Payee name Raconteur Media Company	
Amount (\$) \$18,513.00	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor - Marketing
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: 185/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/10/2025	5 Payee name Raconteur Media Company	
6 Amount (\$) \$1,050.00	7 Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	State; Zip Code
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 Email System
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/10/2025	Payee name Raconteur Media Company	
Amount (\$) \$6,705.23	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	State; Zip Code
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 Texting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/10/2025	Payee name Raconteur Media Company	
Amount (\$) \$17,114.41	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	State; Zip Code
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 Social Media Ads - Meta
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: 186/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 07/10/2025	5 Payee name Raconteur Media Company		
6 Amount (\$) \$913.55	7 Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	State; Zip Code	
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 Social Media Ads - Google	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/10/2025	Payee name Raconteur Media Company		
Amount (\$) \$4,645.31	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	State; Zip Code	
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 Social Media Ads - X	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/10/2025	Payee name Raconteur Media Company		
Amount (\$) \$6,000.00	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	State; Zip Code	
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 Geofence Advertising	
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: 187/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/10/2025	5 Payee name Raconteur Media Company	
6 Amount (\$) \$2,867.33	7 Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	
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 Social Media Ad Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/17/2025	Payee name Raconteur Media Company	
Amount (\$) \$211,776.97	Payee address; City; 1717 W 6th St Suite 215 Austin, TX 78703	
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 tv advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/04/2025	Payee name Reed, Courtney	
Amount (\$) \$1,553.30	Payee address; City; 804 Omaha Trail Keller, TX 76248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography
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: 188/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/27/2025	5 Payee name Republican Party of Rockwall County	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 112 Kenway St Rockwall, TX 75087	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event sponsorship
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/07/2025	Payee name Republican Party of Texas	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code PO BOX 2206 Austin, TX 78768	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/14/2025	Payee name Republican Women of Arlington	
Amount (\$) \$5,208.65	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) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event ticket/ sponsor
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: 189/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/08/2025	5 Payee name Republican Women of Arlington	
6 Amount (\$) \$7,812.81	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) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event sponsorship
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/14/2025	Payee name Republican Women of Trinity County	
Amount (\$) \$253.00	Payee address; City; 109 N Robb St Trinity, TX 75862	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/08/2025	Payee name Rush Order Tees	
Amount (\$) \$738.06	Payee address; City; 2727 Commerce Way Philadelphia, PA 19154	State; Zip Code
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 merchandise
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: 190/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/02/2025	5 Payee name Rush Order Tees	
6 Amount (\$) \$341.38	7 Payee address; City; 2727 Commerce Way Philadelphia, PA 19154	
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 campaign shirts
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Ryan Data & Research	Office sought Office held
Date 08/26/2025	Payee name Ryan Data & Research	
Amount (\$) \$21,000.00	Payee address; City; P.O. Box 202675 Austin, TX 78720-2675	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting - Research
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Sims, Kyle	Office sought Office held
Date 12/31/2025	Payee name Sims, Kyle	
Amount (\$) \$1,875.00	Payee address; City; 5312 Fox Chase Ln McKinney, TX 75071	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
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: 191/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/15/2025	5 Payee name Sims, Kyle	
6 Amount (\$) \$1,875.00	7 Payee address; City; 5312 Fox Chase Ln McKinney, TX 75071	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/28/2025	Payee name Sims, Kyle	
Amount (\$) \$1,875.00	Payee address; City; 5312 Fox Chase Ln McKinney, TX 75071	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name Sims, Kyle	
Amount (\$) \$1,875.00	Payee address; City; 5312 Fox Chase Ln McKinney, TX 75071	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
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: 192/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/13/2025	5 Payee name Sims, Kyle	
6 Amount (\$) \$155.40	7 Payee address; City; 5312 Fox Chase Ln McKinney, TX 75071	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense mileage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/31/2025	Payee name Sims, Kyle	
Amount (\$) \$5,000.00	Payee address; City; 5312 Fox Chase Ln McKinney, TX 75071	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/30/2025	Payee name Sims, Kyle	
Amount (\$) \$5,000.00	Payee address; City; 5312 Fox Chase Ln McKinney, TX 75071	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
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: 193/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 08/29/2025	5 Payee name Sims, Kyle	
6 Amount (\$) \$5,000.00	7 Payee address; City; 5312 Fox Chase Ln McKinney, TX 75071	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/05/2025	Payee name Sims, Kyle	
Amount (\$) \$5,000.00	Payee address; City; 5312 Fox Chase Ln McKinney, TX 75071	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/01/2025	Payee name Sims, Kyle	
Amount (\$) \$5,000.00	Payee address; City; 5312 Fox Chase Ln McKinney, TX 75071	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
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: 194/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/20/2025	5 Payee name Site Ascension	
6 Amount (\$) \$236.80	7 Payee address; City; 11526 Beachside Galveston, TX 77554	
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 website development
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/31/2025	Payee name Site Ascension	
Amount (\$) \$575.08	Payee address; City; 11526 Beachside Galveston, TX 77554	
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 website development
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/09/2025	Payee name Site Ascension	
Amount (\$) \$1,894.38	Payee address; City; 11526 Beachside Galveston, TX 77554	
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 website development
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: 195/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/03/2025	5 Payee name South Texas Organics	
6 Amount (\$) \$9,009.00	7 Payee address; City; 6700 N Doffing Rd Mission, TX 78574	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gifts to volunteers and donors for christmas
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/11/2025	Payee name South Texas Organics	
Amount (\$) \$8,145.00	Payee address; City; 6700 N Doffing Rd Mission, TX 78574	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense appreciation gifts
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/12/2025	Payee name Southwest Airlines	
Amount (\$) \$842.96	Payee address; City; 2702 Love Field Drive Dallas, TX 75235	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight
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: 196/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/01/2025	5 Payee name Southwest	
6 Amount (\$) \$814.96	7 Payee address; City; 2702 Love Field Dr Dallas, TX 75235	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/02/2025	Payee name Southwest	
Amount (\$) \$814.96	Payee address; City; 2702 Love Field Dr Dallas, TX 75235	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/20/2025	Payee name Southwest	
Amount (\$) \$844.96	Payee address; City; 2702 Love Field Dr Dallas, TX 75235	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight
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: 197/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/20/2025	5 Payee name Southwest	
6 Amount (\$) \$844.96	7 Payee address; City; 2702 Love Field Dr Dallas, TX 75235	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/22/2025	Payee name Southwest	
Amount (\$) \$437.48	Payee address; City; 2702 Love Field Dr Dallas, TX 75235	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/22/2025	Payee name Southwest	
Amount (\$) \$437.48	Payee address; City; 2702 Love Field Dr Dallas, TX 75235	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight
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: 198/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 12/17/2025	5 Payee name Space Seed Studios LLC		
6 Amount (\$) \$8,189.15	7 Payee address; City; 2202 Briarwood Drive Bridgeport, TX 76426	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor - Videography	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/10/2025	Payee name Space Seed Studios LLC		
Amount (\$) \$10,275.38	Payee address; City; 2202 Briarwood Drive Bridgeport, TX 76426	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor - Videography	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/16/2025	Payee name Space Seed Studios LLC		
Amount (\$) \$11,180.65	Payee address; City; 2202 Briarwood Drive Bridgeport, TX 76426	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor - Videography	
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: 199/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 09/11/2025	5 Payee name Space Seed Studios LLC		
6 Amount (\$) \$9,383.85	7 Payee address; City; 2202 Briarwood Drive Bridgeport, TX 76426	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor - Videography	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/07/2025	Payee name Space Seed Studios LLC		
Amount (\$) \$7,532.60	Payee address; City; 2202 Briarwood Drive Bridgeport, TX 76426	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor - Videography	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/03/2025	Payee name Space Seed Studios LLC		
Amount (\$) \$4,681.00	Payee address; City; 2202 Briarwood Drive Bridgeport, TX 76426	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor - Videography	
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: 200/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/31/2025	5 Payee name Spencer, Liza	
6 Amount (\$) \$1,500.00	7 Payee address; City; 4505 Hugo Reyes Dr El Paso, TX 79938	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Spencer, Liza	Office sought Office held
Date 12/22/2025	Payee name Spencer, Liza	
Amount (\$) \$363.44	Payee address; City; 4505 Hugo Reyes Dr El Paso, TX 79938	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense mileage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Spencer, Liza	Office sought Office held
Date 12/15/2025	Payee name Spencer, Liza	
Amount (\$) \$1,500.00	Payee address; City; 4505 Hugo Reyes Dr El Paso, TX 79938	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Spencer, Liza	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: 201/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/28/2025	5 Payee name Spencer, Liza	
6 Amount (\$) \$1,500.00	7 Payee address; City; 4505 Hugo Reyes Dr El Paso, TX 79938	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/20/2025	Payee name Spencer, Liza	
Amount (\$) \$1,500.00	Payee address; City; 4505 Hugo Reyes Dr El Paso, TX 79938	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/13/2025	Payee name Spencer, Liza	
Amount (\$) \$491.15	Payee address; City; 4505 Hugo Reyes Dr El Paso, TX 79938	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense mileage
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: 202/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/31/2025	5 Payee name Spencer, Liza	
6 Amount (\$) \$1,500.00	7 Payee address; City; 4505 Hugo Reyes Dr El Paso, TX 79938	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/17/2025	Payee name Spencer, Liza	
Amount (\$) \$1,500.00	Payee address; City; 4505 Hugo Reyes Dr El Paso, TX 79938	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/11/2025	Payee name Sprout Social Inc.	
Amount (\$) \$11,474.42	Payee address; City; 131 S Dearborn Chicago, IL 60603	
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 social media software
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: 203/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/03/2025	5 Payee name Starbucks	
6 Amount (\$) \$17.32	7 Payee address; City; 2702 Love Field Dr Dallas, TX 75235	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense coffee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/08/2025	Payee name Stellar Bank	
Amount (\$) \$66.74	Payee address; City; 8222 Douglas Avenue Dallas, TX 75225	
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 fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/17/2025	Payee name Stellar Bank	
Amount (\$) \$415.87	Payee address; City; 8222 Preston Way Dallas, TX 75225	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bank 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: 204/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/09/2025	5 Payee name Stellar Bank	
6 Amount (\$) \$35.00	7 Payee address; City; State; Zip Code 8222 Douglass Ave Dallas, TX 75225	
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 bank fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/10/2025	Payee name Sticker Mule	
Amount (\$) \$1,461.24	Payee address; City; State; Zip Code 336 Forest Ave Amsterdam, NY 12010	
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 printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/15/2025	Payee name Sticker Mule	
Amount (\$) \$294.84	Payee address; City; State; Zip Code 336 Forest Ave Amsterdam, NY 12010	
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 campaign stickers
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: 205/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/10/2025	5 Payee name Sticker Mule	
6 Amount (\$) \$881.28	7 Payee address; City; 336 Forest Ave Amsterdam, NY 12010	
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 printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/02/2025	Payee name Sticker Mule	
Amount (\$) \$1,395.36	Payee address; City; 336 Forest Ave Amsterdam, NY 12010	
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 printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/12/2025	Payee name Stickerbros	
Amount (\$) \$881.15	Payee address; City; 1905 Alpha Dr Suite 170 Rockwall, TX 75087	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

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: 206/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/20/2025	5 Payee name Stratus Intelligence LLC	
6 Amount (\$) \$30,400.00	7 Payee address; City; 3745 Medina Rd Unit C Medina, OH 44256	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 Polling
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/25/2025	Payee name Stratus Intelligence	
Amount (\$) \$8,100.00	Payee address; City; 515 King St Alexandria, VA 22314	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 polling
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/12/2025	Payee name Stratus Intelligence	
Amount (\$) \$650.00	Payee address; City; 515 King St Alexandria, VA 22314	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 polling
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: 207/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/15/2025	5 Payee name Stratus Intelligence	
6 Amount (\$) \$2,025.00	7 Payee address; City; 515 King St Alexandria, VA 22314	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 polling
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 11/17/2025	Payee name Sundance Travel	
Amount (\$) \$4.99	Payee address; City; 2400 Aviation Dr DFW AIRPORT, TX 75261	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense water
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 11/17/2025	Payee name TARGET	
Amount (\$) \$262.97	Payee address; City; 8335 Westchester Dr Suite 200 Dallas, TX 75225	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 208/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/17/2025	5 Payee name TFRW	
6 Amount (\$) \$2,083.65	7 Payee address; City; PO Box 171146 Austin, TX 78717	
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 sponsorship
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/16/2025	Payee name TFVC	
Amount (\$) \$5,000.00	Payee address; City; 1540 Keller Pkwy Keller, TX 76248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/03/2025	Payee name Texans for Medical Freedom	
Amount (\$) \$5,208.65	Payee address; City; PO Box 175272 Arlington, TX 76012	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sponsorship
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: 209/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/30/2025	5 Payee name Texas FRW PAC	
6 Amount (\$) \$1,041.98	7 Payee address; City; 13740 US-183 J4 Austin, TX 78750	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/07/2025	Payee name Texas GOP	
Amount (\$) \$500.00	Payee address; City; PO Box 2206 Austin, TX 78768	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/07/2025	Payee name Texas GOP	
Amount (\$) \$1,000.00	Payee address; City; PO Box 2206 Austin, TX 78768	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contribution
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: 210/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/11/2025	5 Payee name Texas Gun Rights Organization	
6 Amount (\$) \$5,208.65	7 Payee address; City; State; Zip Code 214 Santa Fe Dr Weatherford, TX 76086	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Even Sponsorship
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/16/2025	Payee name Texas Strong Republican Women	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 543 Argyle, TX 76226	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/25/2025	Payee name Texas Values	
Amount (\$) \$128.11	Payee address; City; State; Zip Code 1005 Congress Ave Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sponsorship
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: 211/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/24/2025	5 Payee name TexasFRW PAC	
6 Amount (\$) \$20,833.65	7 Payee address; City; 13740 US-183 J4 Austin, TX 78750	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense convention sponsorship
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/03/2025	Payee name The LINK Letter	
Amount (\$) \$300,000.00	Payee address; City; 10924 Grant Road #133 Houston, TX 77070	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense advertising mailer
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name The McIntosh Company	
Amount (\$) \$15,000.00	Payee address; City; 9203 Esplanade Drive Dallas, TX 75220	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting - Fundraising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 212/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 11/17/2025	5 Payee name The McIntosh Company		
6 Amount (\$) \$100.00	7 Payee address; City; 9203 Esplanade Drive Dallas, TX 75220	State; Zip Code	
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 Admin Fee	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/17/2025	Payee name The McIntosh Company		
Amount (\$) \$599.64	Payee address; City; 9203 Esplanade Drive Dallas, TX 75220	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Luncheon Food	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/17/2025	Payee name The McIntosh Company		
Amount (\$) \$576.00	Payee address; City; 9203 Esplanade Drive Dallas, TX 75220	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight to Luncheon	
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: 213/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 11/17/2025	5 Payee name The McIntosh Company		
6 Amount (\$) \$2,798.26	7 Payee address; City; 9203 Esplanade Drive Dallas, TX 75220	State; Zip Code	
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 Fundraising Mailer	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/17/2025	Payee name The McIntosh Company		
Amount (\$) \$4,409.00	Payee address; City; 9203 Esplanade Drive Dallas, TX 75220	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting - Fundraising	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/17/2025	Payee name The McIntosh Company		
Amount (\$) \$30,000.00	Payee address; City; 9203 Esplanade Drive Dallas, TX 75220	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting - Fundraising	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 214/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/17/2025	5 Payee name The McIntosh Company	
6 Amount (\$) \$300.00	7 Payee address; City; 9203 Esplanade Drive Dallas, TX 75220	
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 Admin Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 09/17/2025	Payee name The McIntosh Company	
Amount (\$) \$145.48	Payee address; City; 9203 Esplanade Drive Dallas, TX 75220	
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 Courier Services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 09/17/2025	Payee name The McIntosh Company	
Amount (\$) \$57,362.50	Payee address; City; 9203 Esplanade Drive Dallas, TX 75220	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting - Fundraising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 215/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 09/17/2025	5 Payee name The McIntosh Company		
6 Amount (\$) \$81.99	7 Payee address; City; 9203 Esplanade Drive Dallas, TX 75220	State; Zip Code	
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 USPS Stamps	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/26/2025	Payee name The McIntosh Company		
Amount (\$) \$10,000.00	Payee address; City; 9203 Esplanade Drive Dallas, TX 75220	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting - Fundraising	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/26/2025	Payee name The McIntosh Company		
Amount (\$) \$100.00	Payee address; City; 9203 Esplanade Drive Dallas, TX 75220	State; Zip Code	
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 Admin 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: 216/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 08/15/2025	5 Payee name The McIntosh Company		
6 Amount (\$) \$89,419.01	7 Payee address; City; 9203 Esplanade Drive Dallas, TX 75220	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting - Fundraising	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/17/2025	Payee name The Plaza Hotel		
Amount (\$) \$72.70	Payee address; City; 106 W Mills Ave El Paso, TX 79901	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food and beverage	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/18/2025	Payee name The Plaza Hotel		
Amount (\$) \$1,995.33	Payee address; City; 106 W Mills Ave El Paso, TX 79901	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense hotel during el paso visit	
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: 217/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/01/2025	5 Payee name Ticket Tailor	
6 Amount (\$) \$8.00	7 Payee address; City; State; Zip Code 203-213 Mare Street London E8 3LY United Kingdom	
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 Event Ticketing Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Ticket Tailor	Office sought Office held
Date 10/01/2025	Payee name Ticket Tailor	
Amount (\$) \$8.00	Payee address; City; State; Zip Code 203-213 Mare Street London E8 3LY United Kingdom	
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 Event ticketing software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Ticket Tailor	Office sought Office held
Date 09/02/2025	Payee name Ticket Tailor	
Amount (\$) \$8.00	Payee address; City; State; Zip Code 203-213 Mare Street London E8 3LY United Kingdom	
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 hosting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Ticket Tailor	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: 218/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/03/2025	5 Payee name Ticket Tailor	
6 Amount (\$) \$8.00	7 Payee address; City; State; Zip Code 203-213 Mare Street London E8 3LY United Kingdom	
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 Event ticketing software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Ticket Tailor	Office sought Office held
Date 08/01/2025	Payee name Ticket Tailor	
Amount (\$) \$8.00	Payee address; City; State; Zip Code 203-213 Mare Street London E8 3LY United Kingdom	
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 EVENT TICKETING SOFTWARE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Ticket Tailor	Office sought Office held
Date 12/01/2025	Payee name Ticket Tailor	
Amount (\$) \$8.00	Payee address; City; State; Zip Code 203-213 Mare Street London E8 3LY United Kingdom	
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 Event ticketing software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Ticket Tailor	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: 219/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/17/2025	5 Payee name Totally Promotional	
6 Amount (\$) \$260.88	7 Payee address; City; 450 S 2nd St Coldwater, OH 45828	
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 printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/15/2025	Payee name Totally Promotional	
Amount (\$) \$192.25	Payee address; City; 450 S. Second St. Coldwater, OH 45828	
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 merchandise
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/24/2025	Payee name Totally Promotional	
Amount (\$) \$187.27	Payee address; City; 450 S. Second St. Coldwater, OH 45828	
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 printing
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: 220/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/21/2025	5 Payee name TransparencyUSA	
6 Amount (\$) \$75.00	7 Payee address; City; 4416 Briarwood Ave 110 Midland, TX 79707	
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 subscription
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/24/2025	Payee name True Impact Media Inc	
Amount (\$) \$203,964.70	Payee address; City; 2028 E Ben White Blvd Suite 240-2600 Austin, TX 78741	
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 BILLBOARDS
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/04/2025	Payee name True Impact Media Inc	
Amount (\$) \$50,516.88	Payee address; City; 2028 E Ben White Blvd Suite 240-2600 Austin, TX 78741	
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 BILLBOARDS
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: 221/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 12/17/2025	5 Payee name True Impact Media Inc		
6 Amount (\$) \$70,224.10	7 Payee address; City; 2028 E Ben White Blvd Suite 240-2600 Austin, TX 78741	State; Zip Code	
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 BILLBOARDS	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/26/2025	Payee name True Impact Media Inc		
Amount (\$) \$100,339.58	Payee address; City; 2028 E Ben White Blvd Suite 240-2600 Austin, TX 78741	State; Zip Code	
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 BILLBOARDS	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/21/2025	Payee name Uber		
Amount (\$) \$28.29	Payee address; City; 1725 3rd Street San Fancisco, CA 94158	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAR RENTAL	
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: 222/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/22/2025	5 Payee name Uber	
6 Amount (\$) \$30.98	7 Payee address; City; 1725 3rd Street San Fancisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/22/2025	Payee name Uber	
Amount (\$) \$86.35	Payee address; City; 1725 3rd Street San Fancisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/22/2025	Payee name Uber	
Amount (\$) \$5.00	Payee address; City; 1725 3rd Street San Fancisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car
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: 223/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/22/2025	5 Payee name Uber	
6 Amount (\$) \$7.00	7 Payee address; City; 1725 3rd Street San Fancisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/22/2025	Payee name Uber	
Amount (\$) \$23.09	Payee address; City; 1725 3rd Street San Fancisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/23/2025	Payee name Uber	
Amount (\$) \$5.00	Payee address; City; 1725 3rd Street San Fancisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAR
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: 224/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/23/2025	5 Payee name Uber	
6 Amount (\$) \$34.33	7 Payee address; City; State; Zip Code 1725 3rd Street San Fancisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAR
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/23/2025	Payee name Uber	
Amount (\$) \$119.85	Payee address; City; State; Zip Code 1725 3rd Street San Fancisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAR
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/23/2025	Payee name Uber	
Amount (\$) \$153.01	Payee address; City; State; Zip Code 1725 3rd Street San Fancisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAR
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: 225/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/23/2025	5 Payee name Uber	
6 Amount (\$) \$186.81	7 Payee address; City; State; Zip Code 1725 3rd Street San Fancisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAR
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/24/2025	Payee name Uber	
Amount (\$) \$23.97	Payee address; City; State; Zip Code 1725 3rd Street San Fancisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/27/2025	Payee name Uber	
Amount (\$) \$26.24	Payee address; City; State; Zip Code 1725 3rd Street San Fancisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car
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: 226/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/27/2025	5 Payee name Uber	
6 Amount (\$) \$55.82	7 Payee address; City; 1725 3rd Street San Fancisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/26/2025	Payee name Uber	
Amount (\$) \$32.90	Payee address; City; 1725 3rd Street San Fancisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/26/2025	Payee name Uber	
Amount (\$) \$93.71	Payee address; City; 1725 3rd Street San Fancisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car
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: 227/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/29/2025	5 Payee name Uber	
6 Amount (\$) \$20.00	7 Payee address; City; State; Zip Code 1725 3rd Street San Fancisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/29/2025	Payee name Uber	
Amount (\$) \$30.00	Payee address; City; State; Zip Code 1725 3rd Street San Fancisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/29/2025	Payee name Uber	
Amount (\$) \$30.73	Payee address; City; State; Zip Code 1725 3rd Street San Fancisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car
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: 228/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/29/2025	5 Payee name Uber	
6 Amount (\$) \$83.83	7 Payee address; City; 1725 3rd Street San Fancisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/29/2025	Payee name Uber	
Amount (\$) \$106.33	Payee address; City; 1725 3rd Street San Fancisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/29/2025	Payee name Uber	
Amount (\$) \$122.84	Payee address; City; 1725 3rd Street San Fancisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car
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: 229/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/29/2025	5 Payee name Uber	
6 Amount (\$) \$143.12	7 Payee address; City; State; Zip Code 1725 3rd Street San Fancisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/29/2025	Payee name Uber	
Amount (\$) \$151.28	Payee address; City; State; Zip Code 1725 3rd Street San Fancisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/29/2025	Payee name Uber	
Amount (\$) \$173.09	Payee address; City; State; Zip Code 1725 3rd Street San Fancisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car
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: 230/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/30/2025	5 Payee name Uber	
6 Amount (\$) \$28.62	7 Payee address; City; State; Zip Code 1725 3rd Street San Fancisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/14/2025	Payee name Uber	
Amount (\$) \$30.49	Payee address; City; State; Zip Code 1725 3rd Street San Fancisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAR RENTAL
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name Uber	
Amount (\$) \$66.63	Payee address; City; State; Zip Code 1725 3rd Street San Fancisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense travel
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: 231/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/20/2025	5 Payee name Uber	
6 Amount (\$) \$234.97	7 Payee address; City; State; Zip Code 1725 3rd Street San Fancisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense travel
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/27/2025	Payee name United Airlines InFlight	
Amount (\$) \$12.00	Payee address; City; State; Zip Code 233 S. Wacker Drive Chicago, IL 60606	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense inflight internet
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/10/2025	Payee name United	
Amount (\$) \$32.24	Payee address; City; State; Zip Code 609 Main St Houston, TX 77253	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight
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: 232/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/10/2025	5 Payee name United	
6 Amount (\$) \$32.24	7 Payee address; City; 609 Main St Houston, TX 77253	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/10/2025	Payee name United	
Amount (\$) \$32.24	Payee address; City; 609 Main St Houston, TX 77253	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/10/2025	Payee name United	
Amount (\$) \$32.24	Payee address; City; 609 Main St Houston, TX 77253	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight
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: 233/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/10/2025	5 Payee name United	
6 Amount (\$) \$218.49	7 Payee address; City; 609 Main St Houston, TX 77253	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/10/2025	Payee name United	
Amount (\$) \$218.49	Payee address; City; 609 Main St Houston, TX 77253	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/10/2025	Payee name United	
Amount (\$) \$218.49	Payee address; City; 609 Main St Houston, TX 77253	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight
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: 234/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/10/2025	5 Payee name United	
6 Amount (\$) \$218.49	7 Payee address; City; 609 Main St Houston, TX 77253	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flight
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/24/2025	Payee name United	
Amount (\$) \$40.00	Payee address; City; 609 Main St Houston, TX 77253	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense baggage fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/24/2025	Payee name United	
Amount (\$) \$40.00	Payee address; City; 609 Main St Houston, TX 77253	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense baggage 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: 235/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/31/2025	5 Payee name Velasquez, Matt	
6 Amount (\$) \$1,875.00	7 Payee address; City; State; Zip Code 6811 Chessley Chase Dr Sugar Land, TX 77479	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/15/2025	Payee name Velasquez, Matt	
Amount (\$) \$1,875.00	Payee address; City; State; Zip Code 6811 Chessley Chase Dr Sugar Land, TX 77479	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/09/2025	Payee name Walmart	
Amount (\$) \$45.87	Payee address; City; State; Zip Code 1521 N Cockrell Hill Rd Dallas, TX 75211	
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 office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 236/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/31/2025	5 Payee name Whitten, Sandra	
6 Amount (\$) \$1,875.00	7 Payee address; City; 205 Blue Jay Ln Laredo, TX 78045	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/22/2025	Payee name Whitten, Sandra	
Amount (\$) \$1,376.20	Payee address; City; 205 Blue Jay Ln Laredo, TX 78045	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/15/2025	Payee name Whitten, Sandra	
Amount (\$) \$1,875.00	Payee address; City; 205 Blue Jay Ln Laredo, TX 78045	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
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: 237/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/28/2025	5 Payee name Whitten, Sandra	
6 Amount (\$) \$1,875.00	7 Payee address; City; 205 Blue Jay Ln Laredo, TX 78045	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name Whitten, Sandra	
Amount (\$) \$1,875.00	Payee address; City; 205 Blue Jay Ln Laredo, TX 78045	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/12/2025	Payee name Whitten, Sandra	
Amount (\$) \$1,638.98	Payee address; City; 205 Blue Jay Ln Laredo, TX 78045	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense mileage
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: 238/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/31/2025	5 Payee name Whitten, Sandra	
6 Amount (\$) \$1,875.00	7 Payee address; City; 205 Blue Jay Ln Laredo, TX 78045	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/17/2025	Payee name Whitten, Sandra	
Amount (\$) \$1,875.00	Payee address; City; 205 Blue Jay Ln Laredo, TX 78050	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/02/2025	Payee name Williamson Co Republican Party	
Amount (\$) \$8,267.82	Payee address; City; P.O. Box 393 Round Rock, TX 78680	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Golden Age Gala
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: 239/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 10/08/2025	5 Payee name WinRed	
6 Amount (\$) \$2,602.54	7 Payee address; City; 4250 FAIRFAX DR Arlington, VA 22203	
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 DONATIONS processing fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name WinRed	Office sought Office held
Date 12/31/2025	Payee name WinRed	
Amount (\$) \$975.00	Payee address; City; 4250 FAIRFAX DR Arlington, VA 22203	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation processing fees.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name WinRed	Office sought Office held
Date 09/19/2025	Payee name Winred	
Amount (\$) \$145.47	Payee address; City; 4250 FAIRFAX DR Arlington, VA 22203	
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
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Winred	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: 240/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 10/07/2025	5 Payee name Wise County Republican Party		
6 Amount (\$) \$350.00	7 Payee address; City; P.O. Box 1521 Decatur, TX 76234	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sponsorship for event	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/17/2025	Payee name Www.bannerbuzz.com		
Amount (\$) \$742.81	Payee address; City; 415 Horizon Drive Suite 250 Suwanee, GA 30024	State; Zip Code	
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 promotional banners	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/08/2025	Payee name X		
Amount (\$) \$5,000.00	Payee address; City; 1355 Market Street San Francisco, CA 94103	State; Zip Code	
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 SOClal media ads	
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: 241/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/08/2025	5 Payee name X	
6 Amount (\$) \$25,000.00	7 Payee address; City; 1355 Market Street San Francisco, CA 94103	
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 social media ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/09/2025	Payee name X	
Amount (\$) \$25,000.00	Payee address; City; 1355 Market Street San Francisco, CA 94103	
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 social media ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/10/2025	Payee name X	
Amount (\$) \$646.60	Payee address; City; 1355 Market Street San Francisco, CA 94103	
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 Social Media Ads
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: 242/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/10/2025	5 Payee name X	
6 Amount (\$) \$3,663.46	7 Payee address; City; State; Zip Code 1355 Market Street San Francisco, CA 94103	
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 Social Media Ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/08/2025	Payee name X	
Amount (\$) \$561.54	Payee address; City; State; Zip Code 1355 Market Street San Francisco, CA 94103	
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 social media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/19/2025	Payee name X	
Amount (\$) \$363.03	Payee address; City; State; Zip Code 1355 Market Street San Francisco, CA 94103	
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 social media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 243/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/22/2025	5 Payee name X	
6 Amount (\$) \$236.09	7 Payee address; City; State; Zip Code 1355 Market Street San Francisco, CA 94103	
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 social media
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/22/2025	Payee name X	
Amount (\$) \$437.24	Payee address; City; State; Zip Code 1355 Market Street San Francisco, CA 94103	
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 social media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/22/2025	Payee name X	
Amount (\$) \$2,143.69	Payee address; City; State; Zip Code 1355 Market Street San Francisco, CA 94103	
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 social media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 244/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/29/2025	5 Payee name X	
6 Amount (\$) \$665.50	7 Payee address; City; State; Zip Code 1355 Market Street San Francisco, CA 94103	
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 social media
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/30/2025	Payee name X	
Amount (\$) \$943.76	Payee address; City; State; Zip Code 1355 Market Street San Francisco, CA 94103	
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 social media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/31/2025	Payee name X	
Amount (\$) \$1,270.65	Payee address; City; State; Zip Code 1355 Market Street San Francisco, CA 94103	
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 social media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 245/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/24/2025	5 Payee name X	
6 Amount (\$) \$500.02	7 Payee address; City; State; Zip Code 1355 Market Street San Francisco, CA 94103	
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 social media
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/23/2025	Payee name X	
Amount (\$) \$432.61	Payee address; City; State; Zip Code 1355 Market Street San Francisco, CA 94103	
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 social media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/17/2025	Payee name Xpress Shipping	
Amount (\$) \$69.75	Payee address; City; State; Zip Code 909 W Spring Creek Pkwy Plano, TX 75023	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

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: 246/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/04/2025	5 Payee name Young Republicans of Texas	
6 Amount (\$) \$1,800.00	7 Payee address; City; State; Zip Code 135 E. Main St #222 Fredericksburg, TX 78624	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/15/2025	Payee name Youth for Christ El Paso	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 201 E Sunset Rd, El Paso, TX 79922	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contribution DONATIONS
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/22/2025	Payee name american jewish conservatives	
Amount (\$) \$829.02	Payee address; City; State; Zip Code 16817 Coit Rd Suite 1147 Dallas, TX 75248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event and sponsorship: Texas AG Forum
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: 247/247 Rpt:	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 11/14/2025	5 Payee name american jewish conservatives		
6 Amount (\$) \$3,106.02	7 Payee address; City; 16817 Coit Rd Suite 1147 Dallas, TX 75248		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event ticket/ sponsor	
9 Complete ONLY 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: 1/6 Rpt: 360/368	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651	
4 Date 09/08/2025	5 Payee name Donald, Huffines (Mr.)		
6 Amount (\$) \$23.83	7 Payee address; City; 8222 Douglass Ave. S Ste 250 Dallas, TX 75225		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense uber	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Self, Real Estate	Office sought	Office held
Date 09/04/2025	Payee name Donald, Huffines (Mr.)		
Amount (\$) \$651.33	Payee address; City; 8222 Douglass Ave. S Ste 251 Dallas, TX 75225		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense hotel	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Self, Real Estate	Office sought	Office held
Date 09/04/2025	Payee name Donald, Huffines (Mr.)		
Amount (\$) \$15.91	Payee address; City; 8222 Douglass Ave. S Ste 252 Dallas, TX 75225		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense uber	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Self, Real Estate	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: 2/6 Rpt: 361/368	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/05/2025	5 Payee name Donald, Huffines (Mr.)	
6 Amount (\$) \$27.95 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 8222 Douglass Ave. S Ste 253 Dallas, TX 75225	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense uber
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Self, Real Estate	Office sought Office held
Date 09/18/2025	Payee name Donald, Huffines (Mr.)	
Amount (\$) \$42.92 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 8222 Douglass Ave. S Ste 254 Dallas, TX 75225	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense amarillo airport expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Self, Real Estate	Office sought Office held
Date 09/18/2025	Payee name Donald, Huffines (Mr.)	
Amount (\$) \$296.38 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 8222 Douglass Ave. S Ste 255 Dallas, TX 75225	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car rental national
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Self, Real Estate	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: 3/6 Rpt: 362/368	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/11/2025	5 Payee name Donald, Huffines (Mr.)	
6 Amount (\$) \$237.75 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 8222 Douglass Ave. S Ste 250 Dallas, TX 75225	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense airplane ticket
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Self, Real Estate	Office sought Office held
Date 11/11/2025	Payee name Donald, Huffines (Mr.)	
Amount (\$) \$986.97 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 8222 Douglass Ave. S Ste 257 Dallas, TX 75225	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense airplane ticket
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Self, Real Estate	Office sought Office held
Date 11/15/2025	Payee name Donald, Huffines (Mr.)	
Amount (\$) \$167.48 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 8222 Douglass Ave. S Ste 250 Dallas, TX 75225	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense hotel
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Self, Real Estate	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: 4/6 Rpt: 363/368	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 11/16/2025	5 Payee name Donald, Huffines (Mr.)	
6 Amount (\$) \$11.92	7 Payee address; City; 8222 Douglass Ave. S Ste 250 Dallas, TX 75225	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense uber
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Self, Real Estate	Office sought Office held
Date 11/16/2025	Payee name Donald, Huffines (Mr.)	
Amount (\$) \$7.84	Payee address; City; 8222 Douglass Ave. S Ste 250 Dallas, TX 75225	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense uber
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Self, Real Estate	Office sought Office held
Date 11/16/2025	Payee name Donald, Huffines (Mr.)	
Amount (\$) \$361.05	Payee address; City; 8222 Douglass Ave. S Ste 250 Dallas, TX 75225	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense avis rental car
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Self, Real Estate	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: 5/6 Rpt: 364/368	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 07/31/2025	5 Payee name Donald, Huffines (Mr.)	
6 Amount (\$) \$11,487.16 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 8222 Douglass Ave. S Ste 250 Dallas, TX 75225	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense airfare
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Self, Real Estate	Office sought Office held
Date 10/31/2025	Payee name Donald, Huffines (Mr.)	
Amount (\$) \$9,660.63 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 8222 Douglass Ave. S Ste 250 Dallas, TX 75225	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense airfare
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Self, Real Estate	Office sought Office held
Date 12/31/2025	Payee name Donald, Huffines (Mr.)	
Amount (\$) \$4,889.41 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 8222 Douglass Ave. S Ste 250 Dallas, TX 75225	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense airfare
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Self, Real Estate	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: 6/6 Rpt: 365/368	2 FILER NAME Huffines, Donald B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00069651
4 Date 12/31/2025	5 Payee name Donald, Huffines (Mr.)	
6 Amount (\$) \$3,996.75 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 8222 Douglass Ave. S Ste 250 Dallas, TX 75225	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense airfare
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Self, Real Estate	Office sought Office held

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

SCHEDULE K

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule K: Sch: 1/3 Rpt: 366/368</p>
<p>2 FILER NAME Huffines, Donald B. (Mr.)</p>		<p>3 Filer ID (Ethics Commission Filers) 00069651</p>
<p>4 Date 07/01/2025</p>	<p>5 Name of person from whom amount is received Stellar Bank</p> <p>.....</p> <p>6 Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75225</p>	<p>8 Amount (\$) \$321.59</p>
	<p>7 Purpose for which amount is received interest.</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 07/31/2025</p>	<p>Name of person from whom amount is received Stellar Bank</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75225</p>	<p>Amount (\$) \$6,099.31</p>
	<p>Purpose for which amount is received interest earned.</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 07/31/2025</p>	<p>Name of person from whom amount is received Stellar Bank</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75225</p>	<p>Amount (\$) \$23,369.73</p>
	<p>Purpose for which amount is received interest earned.</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 08/31/2025</p>	<p>Name of person from whom amount is received Stellar Bank</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75225</p>	<p>Amount (\$) \$4,995.63</p>
	<p>Purpose for which amount is received interest earned.</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 08/31/2025</p>	<p>Name of person from whom amount is received Stellar Bank</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75225</p>	<p>Amount (\$) \$7,624.13</p>
	<p>Purpose for which amount is received interest earned.</p>	<input type="checkbox"/> Check if political contribution returned to filer

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

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 2/3 Rpt: 367/368
2 FILER NAME Huffines, Donald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00069651
4 Date 09/30/2025	5 Name of person from whom amount is received Stellar Bank 6 Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75225	8 Amount (\$) \$3,574.92
	7 Purpose for which amount is received interest earned.	<input type="checkbox"/> Check if political contribution returned to filer
	Date 09/30/2025	
Date 10/31/2025	Name of person from whom amount is received Stellar Bank Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75225	Amount (\$) \$7,235.67
	Purpose for which amount is received interest earned.	<input type="checkbox"/> Check if political contribution returned to filer
	Date 10/31/2025	
Date 11/30/2025	Name of person from whom amount is received Stellar Bank Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75225	Amount (\$) \$2,773.34
	Purpose for which amount is received interest earned.	<input type="checkbox"/> Check if political contribution returned to filer
	Date 10/31/2025	
Date 11/30/2025	Name of person from whom amount is received Stellar Bank Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75225	Amount (\$) \$7,248.40
	Purpose for which amount is received interest on loan.	<input type="checkbox"/> Check if political contribution returned to filer
	Date 11/30/2025	
Date 11/30/2025	Name of person from whom amount is received Stellar Bank Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75225	Amount (\$) \$1,823.98
	Purpose for which amount is received interest earned.	<input type="checkbox"/> Check if political contribution returned to filer
	Date 11/30/2025	

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

SCHEDULE K

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule K: Sch: 3/3 Rpt: 368/368</p>
<p>2 FILER NAME Huffines, Donald B. (Mr.)</p>		<p>3 Filer ID (Ethics Commission Filers) 00069651</p>
<p>4 Date 11/30/2025</p>	<p>5 Name of person from whom amount is received Stellar Bank</p> <p>.....</p> <p>6 Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75225</p>	<p>8 Amount (\$) \$6,674.30</p>
	<p>7 Purpose for which amount is received interest earned.</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 12/18/2025</p>	<p>Name of person from whom amount is received Stellar Bank</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75225</p>	<p>Amount (\$) \$103,342.46</p>
	<p>Purpose for which amount is received interest on loan.</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 12/29/2025</p>	<p>Name of person from whom amount is received Stellar Bank</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75225</p>	<p>Amount (\$) \$83,854.62</p>
	<p>Purpose for which amount is received interest on loan.</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 12/31/2025</p>	<p>Name of person from whom amount is received Stellar Bank</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75225</p>	<p>Amount (\$) \$1,118.72</p>
	<p>Purpose for which amount is received interest earned.</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 12/31/2025</p>	<p>Name of person from whom amount is received Stellar Bank</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75225</p>	<p>Amount (\$) \$5,902.65</p>
	<p>Purpose for which amount is received interest earned.</p>	<input type="checkbox"/> Check if political contribution returned to filer