

**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) 00081273	2 Total pages filed: 54		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST The Honorable Candace T.	MI	OFFICE USE ONLY		
	NICKNAME	LAST Candy	SUFFIX Noble	Date Received ELECTRONICALLY FILED 01/15/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 1105 E. Main Street #223 Allen, TX 75002			Date Hand-delivered or Date Postmarked		
				Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Mr.	MI			
	NICKNAME	LAST Ryan	SUFFIX Jacquess			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 1105 E. Main Street #223 Allen, TX 75002		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 552-5328					
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)					
9 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special			
11 OFFICE	OFFICE HELD (if any) State Representative District 89 Collin			12 OFFICE SOUGHT (if known) State Representative District 89		

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

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

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13 C / OH NAME	Noble, Candace T. (The Honorable)		14 Filer ID (Ethics Commission Filers) 00081273
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	COMMITTEE NAME Texas Alliance for Life PAC	
	<input checked="" type="checkbox"/> GENERAL	COMMITTEE ADDRESS 8000 Centre Park Drive Suite 380 Austin, TX 78754	
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME Shaw, James	
		COMMITTEE CAMPAIGN TREASURER ADDRESS 4505 Corazon Cv Round Rock, TX 78681	
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 258,338.75
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 1,140.29
	4. TOTAL POLITICAL EXPENDITURES		\$ 84,025.55
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 245,112.28
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00

17 AFFIDAVIT

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

The Honorable Candace T. Noble

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)
Noble, Candace T. (The Honorable)	00081273	
20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	212,701.92
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	45,636.83
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	78,823.78
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	5,201.77
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/31 Rpt: 4/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ATMOS Energy Corporation PAC	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75240	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Abiog, Sam (The Honorable)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Bryan, TX 77808	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/19/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00863696 Americans for Citizen Voting PAC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Woodbridge, VA 22913	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Apartment Association of Greater Dallas PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75240	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: BNSF Rail PAC	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Ft. Worth, TX 76161	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/31 Rpt: 5/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 12/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baird, Sondra (Ms.)	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Plano, TX 75093	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballweg, Charles (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballweg, Charles (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballweg, Charles (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ben E. Keith PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76102	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/31 Rpt: 6/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ben E. Keith PAC 6 Contributor address; City; State; Zip Code Fort Worth, TX 76102	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Self
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Tim (Mr.) Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Tim (Mr.) Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Kimberly (Mrs.) Contributor address; City; State; Zip Code Plano, TX 75093	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogdan, Roxanne (Ms.) Contributor address; City; State; Zip Code Parker, TX 75002	Amount of Contribution (\$) \$520.51
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/31 Rpt: 7/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 11/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouressa, Christopher (Mr.)	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Plano, TX 75094	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowden, Marlene (Mrs.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Frisco, TX 75034	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Melinda (Mrs.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Plano, TX 75023	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byboth, Brenda (Ms.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Wylie, TX 75098	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cansler, Tommy (Mr.)	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Colleyville, TX 76034	
Principal occupation / Job title (See Instructions) CEO/Owner		Employer (See Instructions) TCCI Land Development

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/31 Rpt: 8/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 12/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carruthers, Todd (Dr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75230	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cauthorn, Jaclynn (Mrs.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Lucas, TX 75002	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Will (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chappell, Tim (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Plano, TX 75074	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chisenhall, Marla (Mrs.)	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Howe, TX 75459	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/31 Rpt: 9/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 11/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chisenhall, Marla (Mrs.)	7 Amount of Contribution (\$) \$260.25
	6 Contributor address; City; State; Zip Code Howe, TX 75459	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chisenhall, Marla (Mrs.)	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Howe, TX 75459	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, David (Mr.)	Amount of Contribution (\$) \$312.30
	Contributor address; City; State; Zip Code Frisco, TX 75035	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Click, Kayla (Mrs.)	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Sherman, TX 75090	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Richard (The Honorable)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75206	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/31 Rpt: 10/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 11/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colyandro, John (Mr.)	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Austin, TX 78701	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Harris Cook LLP
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, David (Mr.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Mansfield, TX 76063	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Harris Cook LLP
Date 11/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Kenneth (The Honorable)	Amount of Contribution (\$) \$260.25
	Contributor address; City; State; Zip Code Allen, TX 75013	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dallas Police Officer PAC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas , TX 75215	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darden, Richard (Mr.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Abilene, TX 79601	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/31 Rpt: 11/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 12/25/2025	5 Full name of contributor Dawson, Betty (Mrs.)	7 Amount of Contribution (\$) \$52.05
	6 Contributor address; City; State; Zip Code Dallas, TX 75205	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/19/2025	Full name of contributor Dawson, Steven (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Allen , TX 75002	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/07/2025	Full name of contributor Dexter, Penna (Mrs.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/14/2025	Full name of contributor Dobson, David (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Murphy, TX 75094	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/19/2025	Full name of contributor Dodson, Richard (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code McKinney, TX 75072	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/31 Rpt: 12/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 12/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodson, Richard (Mr.)	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code McKinney, TX 75072	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorrance, Cheryl (Ms.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Plano, TX 75074	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durham, Clarence (Mr.)	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Parker, TX 75002	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dustin Burrows Campaign	Amount of Contribution (\$) \$40,000.00
	Contributor address; City; State; Zip Code Lubbock, TX 78767	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dutton, Jill (The Honorable)	Amount of Contribution (\$) \$260.25
	Contributor address; City; State; Zip Code Ben Wheeler, TX 75754	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/31 Rpt: 13/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 10/10/2025	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00097568</u>) Employees of RTX Corporation PAC 6 Contributor address; City; State; Zip Code Arlington, VA 22209	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Advanced Fixture Inc.
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewing, Anthony (Mr.) Contributor address; City; State; Zip Code Farmersville, TX 75442	Amount of Contribution (\$) \$2,602.54
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Advanced Fixture Inc.
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friends of UT Dallas PAC Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funds Available for Involved Reporters Contributor address; City; State; Zip Code Athens, TX 75751	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/08/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00494047</u>) Genen PAC Contributor address; City; State; Zip Code South San Francisco, CA 94080	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/31 Rpt: 14/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 12/08/2025	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00076810</u>) General Motor Company PAC Washington, DC 20001	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Julio (Mr.) Royse City, TX 75189	Amount of Contribution (\$) \$52.05
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grace & McEwan Consulting LLC Austin, TX 78701	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gulf States Toyota Inc., State PAC Houston, TX 77077	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOME PAC of Texas Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/31 Rpt: 15/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 12/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOME PAC of Texas 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hausenfluck, Amber (Ms.) Contributor address; City; State; Zip Code Dallas, TX 78704-1060	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helfenbein, Kendall (Mr.) Contributor address; City; State; Zip Code Richardson, TX 75082	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hemmig, Ray (Mr.) Contributor address; City; State; Zip Code Parker, TX 75002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hemmig, Ray (Mr.) Contributor address; City; State; Zip Code Parker, TX 75002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/31 Rpt: 16/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 12/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hemmig, Ray (Mr.)	7 Amount of Contribution (\$) \$104.10
	6 Contributor address; City; State; Zip Code Parker, TX 75002	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henfling, Christopher (Mr.)	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Georgetown, TX 78633	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henfling, Christopher (Mr.)	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Georgetown, TX 78633	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrmann, Diane (Mrs.)	Amount of Contribution (\$) \$26.03
	Contributor address; City; State; Zip Code Rowlett, TX 75088	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hibbets, Kay (Mrs.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75252	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/31 Rpt: 17/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 12/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks Pate Strategies LLC	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Austin, TX 78767	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hight, Dalayr (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Allen, TX 75002	
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#: _____) Hight, Dalayr (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hight, Dalayr (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hock, Stacy (Mr.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78746	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/31 Rpt: 18/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogue, Eric (The Honorable)	7 Amount of Contribution (\$) \$260.25
	6 Contributor address; City; State; Zip Code Wylie, TX 75098	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holland and Knight Texas PAC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holland, Elle (The Honorable)	Amount of Contribution (\$) \$20.82
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holland, Elle (The Honorable)	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaquess, Tori (Mrs.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/31 Rpt: 19/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 10/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Alan (Mr.)	7 Amount of Contribution (\$) \$104.10
	6 Contributor address; City; State; Zip Code Plano, TX 75074	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Alan (Mr.)	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Plano, TX 75074	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Candy (Mrs.)	Amount of Contribution (\$) \$52.05
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kolean, Charles (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kroll, John (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/31 Rpt: 20/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 11/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LLK LLC	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Austin, TX 78701	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaRose, Randy (Mrs.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Fairview, TX 75069	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindsey, Jordan (Mr.)	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Parker, TX 75002	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindsey, Jordan (Mr.)	Amount of Contribution (\$) \$260.25
	Contributor address; City; State; Zip Code Parker, TX 75002	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger Goggan Blair & Sampson, LLC	Amount of Contribution (\$) \$4,000.00
	Contributor address; City; State; Zip Code Austin, TX 78760	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/31 Rpt: 21/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 12/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lokey, Derrel (Mr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code St. Paul, TX 75098	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Marcos (Mr.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Wylie, TX 75098	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Marcos (Mr.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Wylie, TX 75098	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lorenz, Philip (Dr.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Richardson, TX 75082	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madden, Jerry (The Honorable)	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Richardson, TX 75080	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/31 Rpt: 22/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 12/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manufacturers PAC of Texas 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$1,000.00
	8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marchant Leadership Fund Contributor address; City; State; Zip Code Carrolton, TX 75006	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Angela (Mrs.) Contributor address; City; State; Zip Code Lucas, TX 75002	Amount of Contribution (\$) \$260.25
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAllister, Bruce (Mr.) Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$104.10
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCraw, Mark (Mr.) Contributor address; City; State; Zip Code McKinney, TX 75069	Amount of Contribution (\$) \$520.51
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/31 Rpt: 23/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGuire, Michael (Mr.)	7 Amount of Contribution (\$) \$1,500.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75205	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Andrews Distributing
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medlin, Brenda (Mrs.)	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Winchester, VA 22601	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medlin, Brenda (Mrs.)	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Winchester, VA 22601	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medlin, Brenda (Mrs.)	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Winchester, VA 22601	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medlin, Brenda (Mrs.)	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Winchester, VA 22601	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/31 Rpt: 24/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 11/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meier, Joe (Dr.)	7 Amount of Contribution (\$) \$2,602.54
	6 Contributor address; City; State; Zip Code Tyler, TX 75073	
8 Principal occupation / Job title (See Instructions) MD/Emergency Medicine		9 Employer (See Instructions) Self
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NABIP Texas PAC	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Cranford, NJ 07016	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ostrander, Peggy (Mrs.)	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAC of the Independent Insurance Agents of Texas	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Austin, TX 78768	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padilla, Michael (Mr.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Murphy, TX 75094	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/31 Rpt: 25/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peden, Rena (Mrs.)	7 Amount of Contribution (\$) \$260.25
	6 Contributor address; City; State; Zip Code Ft. Worth, TX 76109	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Neil (Mr.)	Amount of Contribution (\$) \$52.05
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petitt, Robert (The Honorable)	Amount of Contribution (\$) \$2,082.03
	Contributor address; City; State; Zip Code Lowry Crossing, TX 75069	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Petitt Associates
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pettle, Lee (The Honorable)	Amount of Contribution (\$) \$26.03
	Contributor address; City; State; Zip Code Parker, TX 75002	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Jerry (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Lubbock, TX 79490	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/31 Rpt: 26/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 12/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reuber, Stanley (Mr.)	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code Plano, TX 75023	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Donald (Mr.)	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Parker, TX 75002	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Douglas (Mr.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code McKinney, TX 75069	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodenbaugh, Kimberly (Mrs.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Allen, TX 75013	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roller, Tom (Mr.)	Amount of Contribution (\$) \$208.20
	Contributor address; City; State; Zip Code Amarillo, TX 79124	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/31 Rpt: 27/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 07/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roller, Tom (Mr.)	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code Amarillo, TX 79124	
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Self
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rovner, Ivan (Dr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Plano, TX 75025	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sampson, Chance (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samuels, Ron (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Fairview, TX 75069	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samuels, Warren (Mr.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code McKinney, TX 75070	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/31 Rpt: 28/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 07/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samuels, Warren (Mr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code McKinney, TX 75070	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Robert (The Honorable) Contributor address; City; State; Zip Code St Paul, TX 75098	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Ron (The Honorable) Contributor address; City; State; Zip Code Lewisville, TX 75056	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sinacola, Cheryl (Mrs.) Contributor address; City; State; Zip Code Fairview, TX 75069	Amount of Contribution (\$) \$520.51
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sween, Paul (Mr.) Contributor address; City; State; Zip Code Paradise Valley, AZ 85253	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/31 Rpt: 29/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 11/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TALA PAC	7 Amount of Contribution (\$) \$1,500.00
	6 Contributor address; City; State; Zip Code Austin, TX 78759	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAPTP PAC	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Helotes, TX 78023	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREPAC, Texas Association of Realtors PAC	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TXTA Truck PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78762	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform PAC	Amount of Contribution (\$) \$50,000.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/31 Rpt: 30/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 12/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform PAC 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$40,000.00
	8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Alliance for Life PAC Austin, TX 78754	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Apartment Association PAC Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Automobile Dealers Association PAC Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 10/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Land and Title Association PAC Austin, TX 78703	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/31 Rpt: 31/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 12/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Oil and Gas Association - Good Government Committee 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$3,000.00
	8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas and Southwest Cattle Raisers Association PAC Contributor address; City; State; Zip Code Fort Worth, TX 76185	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, John (Mr.) Contributor address; City; State; Zip Code Fairview, TX 75069	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 10/10/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00542365) Toyota Motor North America, Inc. PAC Contributor address; City; State; Zip Code Washington, DC 20004	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00542365) Toyota Motor North America, Inc. PAC Contributor address; City; State; Zip Code Washington, DC 20004	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/31 Rpt: 32/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 12/08/2025	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00274431</u>) United Health Group PAC	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Washington, DC 20004	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vistra Employee PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Irving, TX 75039	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/08/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00093054</u>) Walmart Inc PAC for Responsible Government	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code Bentonville, AR 72716	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Michael (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Michael (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/31 Rpt: 33/54
2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 Date 11/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Weaver, Joyce (Mrs.)	7 Amount of Contribution (\$) \$104.10
	6 Contributor address; City; State; Zip Code Allen, TX 75002	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Weis, Charles (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Whitcomb, Mike (Mr.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Wylie, TX 75095	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Whitt, Margaret (Ms.)	Amount of Contribution (\$) \$52.05
	Contributor address; City; State; Zip Code Murphy, TX 75094	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Wholesale Beer Distributors of Texas PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 31/31 Rpt: 34/54
2 FILER NAME Noble, Candace T. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00081273
4 Date 11/14/2025	5 Full name of contributor Yancey, Jerry (Mr.) 6 Contributor address; City; State; Zip Code Plano, TX 75074	7 Amount of Contribution (\$) \$250.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date 12/21/2025	Full name of contributor Zarsk, Debra (Mrs.) Contributor address; City; State; Zip Code Irving, TX 75039	Amount of Contribution (\$) \$104.10	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>				<p>1 Total pages Schedule A2: Sch: 1/2 Rpt: 35/54</p>
<p>2 FILER NAME Noble, Candace T. (The Honorable)</p>				<p>3 Filer ID (Ethics Commission Filers) 00081273</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				\$
<p>5 Date 10/07/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dustin Burrows Campaign</p> <p>7 Contributor address; City; State; Zip Code Lubbock, TX 78767</p>		<p>8 Amount of contribution (\$) \$7,750.00</p>	<p>9 In-kind contribution description Campaign Polling</p>
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>				
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 12/12/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dustin Burrows Campaign</p> <p>Contributor address; City; State; Zip Code Lubbock, TX 78767</p>		<p>Amount of contribution (\$) \$14,650.00</p>	<p>In-kind contribution description Campaign Polling</p>
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>				
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 11/11/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenney, Jackie (Mrs.)</p> <p>Contributor address; City; State; Zip Code Lucas, TX 75002</p>		<p>Amount of contribution (\$) \$1,586.83</p>	<p>In-kind contribution description Fundraising event expenses</p>
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>				
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Owner</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions) Kenney Industries</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A2: Sch: 2/2 Rpt: 36/54</p>
<p>2 FILER NAME Noble, Candace T. (The Honorable)</p>		<p>3 Filer ID (Ethics Commission Filers) 00081273</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>		<p>\$</p>
<p>5 Date 10/07/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform PAC 7 Contributor address; City; State; Zip Code Austin, TX 78701</p>	<p>8 Amount of contribution (\$) \$7,000.00</p> <p>9 In-kind contribution description Campaign Polling</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p>
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p>
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		
<p>Date 12/10/2025</p> <p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code Austin, TX 78701</p>		<p>Amount of contribution (\$) \$14,650.00</p> <p>In-kind contribution description Campaign Polling</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/10 Rpt: 37/54	2 FILER NAME Noble, Candace T. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081273
4 Date 07/26/2025	5 Payee name Allen Fairview Chamber of Commerce	
6 Amount (\$) \$130.00	7 Payee address; City; State; Zip Code 210 W McDermott Allen, TX 75013	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign annual membership fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/13/2025	Payee name Bender Partners	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 3 Piedra Court Westlake , TX 76262	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin monthly apartment rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/08/2025	Payee name Brannon, Kevin (Mr.)	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 1911 Lorraine Allen, TX 75002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consultant 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: 2/10 Rpt: 38/54	2 FILER NAME Noble, Candace T. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081273
4 Date 10/10/2025	5 Payee name Brannon, Kevin (Mr.)	
6 Amount (\$) \$1,500.00	7 Payee address; City; 1911 Lorraine Allen, TX 75002	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 Campaign consultant expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Brannon, Kevin (Mr.)	Office sought Office held
Date 11/11/2025	Payee name Brannon, Kevin (Mr.)	
Amount (\$) \$1,500.00	Payee address; City; 1911 Lorraine Allen, TX 75002	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 Campaign consultant expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Brannon, Kevin (Mr.)	Office sought Office held
Date 12/04/2025	Payee name Brannon, Kevin (Mr.)	
Amount (\$) \$1,500.00	Payee address; City; 1911 Lorraine Allen, TX 75002	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 Campaign consultant expenses
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Brannon, Kevin (Mr.)	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/10 Rpt: 39/54	2 FILER NAME Noble, Candace T. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081273
4 Date 07/01/2025	5 Payee name Brannon, Kevin (Mr.)	
6 Amount (\$) \$3,000.00	7 Payee address; City; 1911 Lorraine Allen, TX 75002	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 Campaign Consultant Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Brannon, Kevin (Mr.)	Office sought Office held
Date 08/02/2025	Payee name Brannon, Kevin (Mr.)	
Amount (\$) \$1,500.00	Payee address; City; 1911 Lorraine Allen, TX 75002	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 Campaign consultant expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Chase Card Services	Office sought Office held
Date 09/13/2025	Payee name Chase Card Services	
Amount (\$) \$1,669.72	Payee address; City; P.O. Box 6294 Carol Stream, IL 60197-6294	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly campaign credit card payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Brannon, Kevin (Mr.)	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/10 Rpt: 40/54	2 FILER NAME Noble, Candace T. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081273
4 Date 10/20/2025	5 Payee name Chase Card Services	
6 Amount (\$) \$1,035.20	7 Payee address; City; P.O. Box 6294 Carol Stream, IL 60197-6294	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly campaign credit card payment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/10/2025	Payee name Chase Card Services	
Amount (\$) \$408.06	Payee address; City; P.O. Box 6294 Carol Stream, IL 60197-6294	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly campaign credit card payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/12/2025	Payee name Chase Card Services	
Amount (\$) \$1,052.26	Payee address; City; P.O. Box 6294 Carol Stream, IL 60197-6294	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly campaign credit card payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/10 Rpt: 41/54	2 FILER NAME Noble, Candace T. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081273
4 Date 07/19/2025	5 Payee name Chase Card Services	
6 Amount (\$) \$295.82	7 Payee address; City; P.O. Box 6294 Carol Stream, IL 60197-6294	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly campaign credit card payment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Date 08/13/2025	Office sought Payee name Chase Card Services
	Amount (\$) \$97.02	Office held
	Payee address; City; P.O. Box 6294 Carol Stream, IL 60197-6294	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly campaign credit card payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Date 12/04/2025	Office sought Payee name Collin County Republican Party
	Amount (\$) \$750.00	Office held
	Payee address; City; 2963 West 15th Street Suite 2981 Plano, TX 75075	
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 Campaign filing 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: 6/10 Rpt: 42/54	2 FILER NAME Noble, Candace T. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081273
4 Date 12/17/2025	5 Payee name Drogin Group	
6 Amount (\$) \$10,000.00	7 Payee address; City; 6705 W. Highway 290 Suite 50281 Austin, TX 78735	
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 digital marketing expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/08/2025	Payee name Golden Corridor Republican Women	
Amount (\$) \$550.00	Payee address; City; P.O. Box 162 Frisco, TX 75034	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Sponsorship for event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/07/2025	Payee name Golden Corridor Republican Women	
Amount (\$) \$550.00	Payee address; City; P.O. Box 162 Frisco, TX 75034	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Sponsorship for event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/10 Rpt: 43/54	2 FILER NAME Noble, Candace T. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081273
4 Date 11/23/2025	5 Payee name Graphics Management	
6 Amount (\$) \$13,249.96	7 Payee address; City; 9322 Moss Trail Dallas, TX 75213	
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 mailer
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/03/2025	Payee name Graphics Management	
Amount (\$) \$13,249.96	Payee address; City; 9322 Moss Trail Dallas, TX 75213	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(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 mailer
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/10/2025	Payee name Graphics Management	
Amount (\$) \$13,249.96	Payee address; City; 9322 Moss Trail Dallas, TX 75213	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(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 mailer
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: 8/10 Rpt: 44/54	2 FILER NAME Noble, Candace T. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081273
4 Date 12/11/2025	5 Payee name Graphics Management	
6 Amount (\$) \$5,205.79	7 Payee address; City; 9322 Moss Trail Dallas, TX 75213	
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 sign expenses
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/04/2025	Payee name Lane, Robert (Mr.)	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Richardson, TX 75082	
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 Labor expense for campaign
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/02/2025	Payee name Morgan Meyer for Texas	
Amount (\$) \$970.00	Payee address; City; State; Zip Code 3838 Oaklawn Ave. #400 Dallas, TX 75219	
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 Costs for campaign fund raiser
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: 9/10 Rpt: 45/54	2 FILER NAME Noble, Candace T. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081273	
4 Date 11/04/2025	5 Payee name TEXAS VALUES ACTION		
6 Amount (\$) \$500.00	7 Payee address; City; 900 Congress Avenue Suite L115 Austin, TX 78701	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 Sponsorship for event	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/17/2025	Payee name USPS		
Amount (\$) \$234.00	Payee address; City; 401 Century Parkway Allen, TX 75013	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage for campaign mail	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/01/2025	Payee name ViCi Media Group		
Amount (\$) \$227.33	Payee address; City; 5101 Bonneville Blvd Austin, TX 78744	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 website hosting expenses	
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: 10/10 Rpt: 46/54	2 FILER NAME Noble, Candace T. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081273
4 Date 07/01/2025	5 Payee name ViCi Media Group	
6 Amount (\$) \$70.00	7 Payee address; City; 5101 Bonneville Blvd Austin, TX 78744	
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 website renewal
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name WinRed	Office sought Office held
Date 12/30/2025	Payee name WinRed	
Amount (\$) \$747.74	Payee address; City; 1776 Wilson Blvd 530 Arlington, VA 22209	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees for contributions made via credit card from 20250701 through 20251230
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wylie Chamber of Commerce	Office sought Office held
Date 09/30/2025	Payee name Wylie Chamber of Commerce	
Amount (\$) \$154.00	Payee address; City; 307 N. Ballard Ave. Wylie, TX 75098	
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 Annual campaign membership fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/8 Rpt: 47/54	2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 CREDIT CARD ISSUER	Name of financial institution Chase		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 713.33
6 PAYMENT	(a) Amount Charged \$78.61	(b) Date of Charge 09/23/2025	(c) Date(s) Credit Card Issuer Paid 10/19/2025
7 PAYEE	(a) Payee name WAL-MART #5672		(b) Payee address; City, State, Zip Code 2662 W Lucas Rd Lucas, TX 75002
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Candy to hand out a campaign event
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$44.48	(b) Date of Charge 09/29/2025	(c) Date(s) Credit Card Issuer Paid 10/19/2025
PAYEE	(a) Payee name WAL-MART #5672		(b) Payee address; City, State, Zip Code 2662 W Lucas Rd Lucas, TX 75002
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Candy to hand out a campaign event
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$31.20	(b) Date of Charge 10/14/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
PAYEE	(a) Payee name USPS		(b) Payee address; City, State, Zip Code 401 Century Parkway Allen, TX 75013
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Postage for campaign mail
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 2/8 Rpt: 48/54	2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 713.33
6 PAYMENT	(a) Amount Charged \$57.56	(b) Date of Charge 10/17/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
7 PAYEE	(a) Payee name MailChimp - The Rocket Services		(b) Payee address; City, State, Zip Code 675 Ponce de Leon Ave. NE Suite 5000 Atlanta, GA 30308
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Monthly charge for campaign email service
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$146.64	(b) Date of Charge 10/18/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
PAYEE	(a) Payee name WAL-MART #5672		(b) Payee address; City, State, Zip Code 2662 W Lucas Rd Lucas, TX 75002
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Candy to hand out a campaign event
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$62.40	(b) Date of Charge 11/10/2025	(c) Date(s) Credit Card Issuer Paid 12/24/2025
PAYEE	(a) Payee name USPS		(b) Payee address; City, State, Zip Code 401 Century Parkway Allen, TX 75013
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Postage for campaign mail
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 3/8 Rpt: 49/54	2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 713.33
6 PAYMENT	(a) Amount Charged \$649.50	(b) Date of Charge 11/17/2025	(c) Date(s) Credit Card Issuer Paid 12/24/2025
7 PAYEE	(a) Payee name Capitol Gift Shop		(b) Payee address; City, State, Zip Code 1100 Congress Ave Austin, TX 78701
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description Christmas gifts to campaign supporter
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$57.56	(b) Date of Charge 12/17/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name MailChimp - The Rocket Services		(b) Payee address; City, State, Zip Code 675 Ponce de Leon Ave. NE Suite 5000 Atlanta, GA 30308
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Monthly charge for campaign email service
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$15.60	(b) Date of Charge 09/15/2025	(c) Date(s) Credit Card Issuer Paid 10/19/2025
PAYEE	(a) Payee name USPS		(b) Payee address; City, State, Zip Code 401 Century Parkway Allen, TX 75013
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Postage for campaign mail
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 4/8 Rpt: 50/54	2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 713.33
6 PAYMENT	(a) Amount Charged \$57.56	(b) Date of Charge 09/17/2025	(c) Date(s) Credit Card Issuer Paid 10/19/2025
7 PAYEE	(a) Payee name MailChimp - The Rocket Services		(b) Payee address; City, State, Zip Code 675 Ponce de Leon Ave. NE Suite 5000 Atlanta, GA 30308
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Monthly charge for campaign email service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$702.54	(b) Date of Charge 10/02/2025	(c) Date(s) Credit Card Issuer Paid 10/19/2025
PAYEE	(a) Payee name Natalie Roberson Photography		(b) Payee address; City, State, Zip Code 5808 County Road 171 Celina, TX 75009
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description charges for campaign head shot photos
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$30.66	(b) Date of Charge 10/14/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
PAYEE	(a) Payee name WAL-MART #5672		(b) Payee address; City, State, Zip Code 2662 W Lucas Rd Lucas, TX 75002
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Candy to hand out at a campaign event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 5/8 Rpt: 51/54	2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 713.33
6 PAYMENT	(a) Amount Charged \$57.56	(b) Date of Charge 11/17/2025	(c) Date(s) Credit Card Issuer Paid 12/24/2025
7 PAYEE	(a) Payee name MailChimp - The Rocket Services		(b) Payee address; City, State, Zip Code 675 Ponce de Leon Ave. NE Suite 5000 Atlanta, GA 30308
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Monthly charge for campaign email service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 12/17/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Golden Corridor Republican		(b) Payee address; City, State, Zip Code P.O. Box 162 Frisco, TX 75034
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Annual campaign membership fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$171.60	(b) Date of Charge 12/08/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name USPS		(b) Payee address; City, State, Zip Code 401 Century Parkway Allen, TX 75013
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Postage for campaign mail
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 6/8 Rpt: 52/54	2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 713.33
6 PAYMENT	(a) Amount Charged \$50.00	(b) Date of Charge 09/19/2025	(c) Date(s) Credit Card Issuer Paid 10/19/2025
7 PAYEE	(a) Payee name Wylie Chamber of Commerce		(b) Payee address; City, State, Zip Code 307 N. Ballard Ave. Wylie, TX 75098
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Campaign booth at Boo on Ballard event
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$1,250.00	(b) Date of Charge 08/07/2025	(c) Date(s) Credit Card Issuer Paid 09/18/2025
PAYEE	(a) Payee name Wylie Chamber of Commerce		(b) Payee address; City, State, Zip Code 307 N. Ballard Ave. Wylie, TX 75098
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Campaign Sponsorship for Wylie Rodeo
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$57.56	(b) Date of Charge 07/17/2025	(c) Date(s) Credit Card Issuer Paid 08/16/2025
PAYEE	(a) Payee name MailChimp - The Rocket Services		(b) Payee address; City, State, Zip Code 675 Ponce de Leon Ave. NE Suite 5000 Atlanta, GA 30308
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Monthly charge for campaign email service
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 7/8 Rpt: 53/54	2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 713.33
6 PAYMENT	(a) Amount Charged \$52.54	(b) Date of Charge 10/21/2025	(c) Date(s) Credit Card Issuer Paid 11/15/2025
7 PAYEE	(a) Payee name WAL-MART #5672		(b) Payee address; City, State, Zip Code 2662 W Lucas Rd Lucas, TX 75002
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food for campaign event
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$57.56	(b) Date of Charge 08/17/2025	(c) Date(s) Credit Card Issuer Paid 09/18/2025
PAYEE	(a) Payee name MailChimp - The Rocket Services		(b) Payee address; City, State, Zip Code 675 Ponce de Leon Ave. NE Suite 5000 Atlanta, GA 30308
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Monthly charge for campaign email service
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$7.31	(b) Date of Charge 08/20/2025	(c) Date(s) Credit Card Issuer Paid 09/18/2025
PAYEE	(a) Payee name WAL-MART #5672		(b) Payee address; City, State, Zip Code 2662 W Lucas Rd Lucas, TX 75002
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Expense for campaign office supplies
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 8/8 Rpt: 54/54	2 FILER NAME Noble, Candace T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081273
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 713.33
6 PAYMENT	(a) Amount Charged \$300.00	(b) Date of Charge 08/20/2025	(c) Date(s) Credit Card Issuer Paid 09/18/2025
7 PAYEE	(a) Payee name Collin County Republican Party		(b) Payee address; City, State, Zip Code 2963 West 15th Street Suite 2981 Plano, TX 75075
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Sponsorship for Labor Day Kickoff rally
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$50.00	(b) Date of Charge 11/17/2025	(c) Date(s) Credit Card Issuer Paid 12/24/2025
PAYEE	(a) Payee name Wylie Chamber of Commerce		(b) Payee address; City, State, Zip Code 307 N. Ballard Ave. Wylie, TX 75098
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Entry Fee for Christmas Parade
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held