

# 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) 00089848	2 Total pages filed: 44	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Jeffrey N.	MI MI	<b>OFFICE USE ONLY</b>  Date Received ELECTRONICALLY FILED 01/14/2026
	NICKNAME Jeff	LAST Forrester	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 2906 Katie Circle  Wylie, TX 75098			Date Hand-delivered or Date Postmarked
				Receipt # Amount
				Date Processed
				Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Gerald R.	MI MI	
	NICKNAME J.J.	LAST Forrester	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 418 Cole Lane  Midlothian, TX 76065			
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 924-5292			
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 Day Year    THROUGH    Month Day Year 09/04/2025    12/31/2025			
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) None		12 OFFICE SOUGHT (if known) State Representative District 89	

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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<b>13 C / OH NAME</b> Forrester, Jeffrey N. (Mr.)	<b>14 Filer ID</b> (Ethics Commission Filers) 00089848
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<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> Additional Pages	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.		
	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>	
	<input type="checkbox"/> GENERAL	<b>COMMITTEE ADDRESS</b>	
	<input type="checkbox"/> SPECIFIC		
	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>		
<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>			

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 50,269.59
----- <b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 14,826.12
----- <b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 78,628.17
----- <b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 35,000.00

**17 AFFIDAVIT**

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

Mr. Jeffrey N. Forrester  
\_\_\_\_\_  
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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<b>18 FILER NAME</b> Forrester, Jeffrey N. (Mr.)		<b>19 Filer ID</b> 00089848	(Ethics Commission Filers)
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	50,269.59
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	10,121.00
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$	35,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	5,796.69
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00
7.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	0.00
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	9,029.43
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	0.00
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**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/29 Rpt: 4/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 10/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguilar-Epstein, Colleen (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75074	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Unknown		<b>9</b> Employer (See Instructions) Unknown
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albright, Stephanie (Mrs.) <hr/> Contributor address; City; State; Zip Code  Allen, TX 75002	Amount of Contribution (\$)  \$26.03
Principal occupation / Job title (See Instructions) ESS		Employer (See Instructions) Substitute Teacher
Date 10/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Katie (Mrs.) <hr/> Contributor address; City; State; Zip Code  Trenton, TX 75490	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, W Allan (Dr.) <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75238	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALES, COURTNEY (Mrs.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$104.10
Principal occupation / Job title (See Instructions) DIRECTOR OPERATIONS		Employer (See Instructions) OMNI KEY PROPERTY MANAGEMENT

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/29 Rpt: 5/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 09/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGESS, LYNN (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  LUCAS, TX 75002	<b>7</b> Amount of Contribution (\$)  \$208.20
<b>8</b> Principal occupation / Job title (See Instructions) PASTOR		<b>9</b> Employer (See Instructions) NEW HOPE CHURCH
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Booth, Doug (Mr.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Health System		Employer (See Instructions) Administration
Date 12/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boudreaux, DAVID (Dr.) <hr/> Contributor address; City; State; Zip Code  TYLER, TX 75707	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breckenridge-Moore, Lee (Mrs.) <hr/> Contributor address; City; State; Zip Code  McKinney, TX 75072	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, JOSHUA (Mr.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$104.10
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) FLOOR COVERINGS INTERNATONAL

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/29 Rpt: 6/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 11/04/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEEK, PAULA (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  ALLEN, TX 75013	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRANFORD, SUSAN (Mrs.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$208.20
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) TEXAS FAST POOLS
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWE, JILL (Mrs.) <hr/> Contributor address; City; State; Zip Code  ST PAUL, TX 75098	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) RETIRED
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWE, JOHN (Mr.) <hr/> Contributor address; City; State; Zip Code  ST PAUL, TX 75098	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) RETIRED
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cameron, Jo Ann (Mrs.) <hr/> Contributor address; City; State; Zip Code  McKinney, TX 75072	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/29 Rpt: 7/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 10/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Abigail (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Wylie, TX 75098	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Unknown		<b>9</b> Employer (See Instructions) Unknown
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, Jennifer (Mrs.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheek, Paula (Mrs.) <hr/> Contributor address; City; State; Zip Code  Allen, TX 75002	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Chase (Mr.) <hr/> Contributor address; City; State; Zip Code  Plano, TX 75074	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creacy, Allene (Mrs.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/29 Rpt: 8/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 10/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowe, Jill (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Wylie, TX 75098	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Unknown		<b>9</b> Employer (See Instructions) Unknown
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowe, Jill (Mrs.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$104.10
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowe, John (Mr.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Snap-On Industrial		Employer (See Instructions) Sales
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIEL, WENDELL (Mr.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$208.20
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) ALL PEST SOLUTIONS
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devine, Patrick A (Mr.) <hr/> Contributor address; City; State; Zip Code  Allen, TX 75002	Amount of Contribution (\$)  \$52.05
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/29 Rpt: 9/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 10/25/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockery, Charles (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Wylie, TX 75098	<b>7</b> Amount of Contribution (\$)  \$104.10
<b>8</b> Principal occupation / Job title (See Instructions) Unknown		<b>9</b> Employer (See Instructions) Unknown
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORRESTER, GERALD (Mr.) <hr/> Contributor address; City; State; Zip Code  Midlothian, TX 76065	Amount of Contribution (\$)  \$25,000.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORRESTER, HARRIETTE (Mrs.) <hr/> Contributor address; City; State; Zip Code  MIDLOTHIAN, TX 76065	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) RETIRED
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULLER, MARVIN (Mr.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) INWOOD BANK
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forrester, Gerald (Mr.) <hr/> Contributor address; City; State; Zip Code  Midlothian, TX 76065	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/29 Rpt: 10/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 10/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forrester, Harriette (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Midlothian, TX 76065	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GASHI, SYTRIM (Mrs.) <hr/> Contributor address; City; State; Zip Code  ALLEN, TX 75002	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) HOUSEWIFE
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GASHI, TIMMY (Mr.) <hr/> Contributor address; City; State; Zip Code  ALLEN, TX 75002	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) NAPOLI'S ALLEN
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAYKEN, BRIAN (Mr.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) DIRECTOR MATERIALS MANAGEMENT		Employer (See Instructions) MILLER SIERRA
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAYKEN, HARLEY (Miss) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) PARA-PROFESSIONAL		Employer (See Instructions) WISD

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/29 Rpt: 11/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 09/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAYKEN, TRAVIS (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  WYLIE, TX 75098	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) NONE		<b>9</b> Employer (See Instructions) STUDENT
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREISER, JENNIFER (Mrs.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$208.20
Principal occupation / Job title (See Instructions) DEVELOPMENT		Employer (See Instructions) WHATABURGER CORPORATE
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gayken, Brian (Mr.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) DIRECTOR MATERIALS MANAGEMENT		Employer (See Instructions) Miller Sierra
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gayken, Shelia (Mrs.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Community ISD		Employer (See Instructions) Teacher
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goff, Dawn (Mrs.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/29 Rpt: 12/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 10/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goff, Lance (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  WYLIE, TX 75098	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Vp		<b>9</b> Employer (See Instructions) Phil Ins
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goff, Lance (Mr.) <hr/> Contributor address; City; State; Zip Code  Whlie, TX 75098	Amount of Contribution (\$)  \$208.20
Principal occupation / Job title (See Instructions) Philadelphia ins		Employer (See Instructions) Vp
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEYDRICK, DONNA (Mrs.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) RETIRED
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEYDRICK, JEFF (Mr.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) RETIRED
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOVER, SID (Mr.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$104.10
Principal occupation / Job title (See Instructions) INSTRUCTOR		Employer (See Instructions) CHL TEXAS

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/29 Rpt: 13/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 09/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULEN, ERIC (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  WYLIE, TX 75098	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) BUS ANALYST		<b>9</b> Employer (See Instructions) STATE FARM INS
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanson, Catherine (Mrs.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Admin		Employer (See Instructions) American Express
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanson, Denney (Mr.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haspel, Erin (Mrs.) <hr/> Contributor address; City; State; Zip Code  Midlothian, TX 76065	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Ellis County Moving
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haspel, Steel (Mr.) <hr/> Contributor address; City; State; Zip Code  Midlothian, TX 76065	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Ellis County Moving

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/29 Rpt: 14/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haspel, Steele (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Waxahachie, TX 75165	<b>7</b> Amount of Contribution (\$)  \$260.25
<b>8</b> Principal occupation / Job title (See Instructions) Self Employed		<b>9</b> Employer (See Instructions) Business Owner
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinshaw, Kristine (Mrs.) <hr/> Contributor address; City; State; Zip Code  Plano, TX 75094	Amount of Contribution (\$)  \$312.30
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Real Estate Broker
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodnett, Sandy (Mrs.) <hr/> Contributor address; City; State; Zip Code  Midlothian, TX 76065	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huddleston, Kason (Mr.) <hr/> Contributor address; City; State; Zip Code  Rockwall, TX 75087	Amount of Contribution (\$)  \$104.10
Principal occupation / Job title (See Instructions) Freedom place church		Employer (See Instructions) Minister
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Deborah (Mrs.) <hr/> Contributor address; City; State; Zip Code  Allen, TX 75002	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/29 Rpt: 15/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 12/27/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Diane (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Wylie, TX 75098	<b>7</b> Amount of Contribution (\$)  \$52.05
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Diane (Mrs.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$26.03
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Marla (Mrs.) <hr/> Contributor address; City; State; Zip Code  Allen, TX 75002	Amount of Contribution (\$)  \$156.15
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keech, Jeffrey (Mr.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koehler, Christopher (Mr.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/29 Rpt: 16/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koehler, Christopher (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Wylie, TX 75098	<b>7</b> Amount of Contribution (\$)  \$41.64
<b>8</b> Principal occupation / Job title (See Instructions) Solutionz		<b>9</b> Employer (See Instructions) Director of Engineering
Date 10/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Konkel, Joan (Mrs.) <hr/> Contributor address; City; State; Zip Code  Plano, TX 75024	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Konkel, Joan (Mrs.) <hr/> Contributor address; City; State; Zip Code  Plano, TX 75024	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCERO, MARIA (Mrs.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) OPERATIONS		Employer (See Instructions) ANB TEXAS
Date 12/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyons, Michael (Mr.) <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75201	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Lyons & Simmons LLP		Employer (See Instructions) Attorney



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/29 Rpt: 17/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 09/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, CLIFF (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  WYLIE, TX 75098	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) NONE		<b>9</b> Employer (See Instructions) RETIRED
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, ADRIENNE (Mrs.) <hr/> Contributor address; City; State; Zip Code  MIDLOTHIAN, TX 76065	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) MISD
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, DAVID (Mr.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) RETIRED
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, JAN (Mrs.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) RETIRED
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meeks, Billy (Mr.) <hr/> Contributor address; City; State; Zip Code  Comanche, TX 76442	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/29 Rpt: 18/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 10/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meeks, Jason (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Crockett, TX 75835	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Unknown		<b>9</b> Employer (See Instructions) Unknown
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meeks, Jason (Mr.) <hr/> Contributor address; City; State; Zip Code  Crockett, TX 75835	Amount of Contribution (\$)  \$41.64
Principal occupation / Job title (See Instructions) Cattle Mafia		Employer (See Instructions) Advocate
Date 10/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meeks, Natalie (Mrs.) <hr/> Contributor address; City; State; Zip Code  Crockett, TX 75835	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Adrienne (Mrs.) <hr/> Contributor address; City; State; Zip Code  Midlothian, TX 76065	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) MISD
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Adrienne (Mrs.) <hr/> Contributor address; City; State; Zip Code  Midlothian, TX 76065	Amount of Contribution (\$)  \$338.33
Principal occupation / Job title (See Instructions) MISD		Employer (See Instructions) Teacher

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/29 Rpt: 19/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 10/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Tommy (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Midlothian, TX 76065	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Unknown		<b>9</b> Employer (See Instructions) Unknown
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Lee (Mrs.) <hr/> Contributor address; City; State; Zip Code  Fairview, TX 75069	Amount of Contribution (\$)  \$104.10
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulliqi, Genc (Mr.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Napoli's Italian Wylie
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEILL, GEORGE (Mr.) <hr/> Contributor address; City; State; Zip Code  ATHENS, TX 75751	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) NEILL ENGINEERING
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NRANICI, SHQIPRIM (Mr.) <hr/> Contributor address; City; State; Zip Code  MCKINNEY, TX 75072	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) HOUSEWIFE

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/29 Rpt: 20/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neal, Judith (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75025	<b>7</b> Amount of Contribution (\$)  \$52.05
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Curtis (Mr.) <hr/> Contributor address; City; State; Zip Code  Allen, TX 75002	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Curtis (Mr.) <hr/> Contributor address; City; State; Zip Code  Allen, TX 75002	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Nelson Consulting
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Curtis (Mr.) <hr/> Contributor address; City; State; Zip Code  Allen, TX 75002	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Nelson Consulting
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLLRY, ROBERT (Mr.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) RETIRED

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/29 Rpt: 21/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 09/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, MATTHEW (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  WYLIE, TX 75098	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) VP OPERATIONS		<b>9</b> Employer (See Instructions) TEXAS HEALTH
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRIVETT, CHERIE (Mrs.) <hr/> Contributor address; City; State; Zip Code  PLANO, TX 75074	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) FOUNDER		Employer (See Instructions) CITY MISSIONS
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRIVETT, KEVIN (Mr.) <hr/> Contributor address; City; State; Zip Code  PLANO, TX 75074	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) MAINTENANCE SUPERVISOR		Employer (See Instructions) WISD
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURDOM, HARVEY (Mr.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) RETIRED
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pattent, LLC <hr/> Contributor address; City; State; Zip Code  PLANO, TX 75025	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/29 Rpt: 22/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 12/27/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paulson, John (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75074	<b>7</b> Amount of Contribution (\$)  \$72.87
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Karen (Mrs.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75707	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickens, Becca (Mrs.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) The Marriage Place		Employer (See Instructions) Director
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Amber (Mrs.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Matthew (Mr.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) MHC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/29 Rpt: 23/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Matthew (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Wylie, TX 75098	<b>7</b> Amount of Contribution (\$)  \$104.10
<b>8</b> Principal occupation / Job title (See Instructions) THPG		<b>9</b> Employer (See Instructions) Director
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Privett, Cherie (Mrs.) <hr/> Contributor address; City; State; Zip Code  Plano, TX 75074	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) City Missions
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Privett, Cherie (Mrs.) <hr/> Contributor address; City; State; Zip Code  Plano, TX 75074	Amount of Contribution (\$)  \$156.15
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) City Missions
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Privett, Kevin (Mr.) <hr/> Contributor address; City; State; Zip Code  Plano, TX 75074	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Maintenance Supervisor		Employer (See Instructions) WISD
Date 09/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSHITI, GEZIM (Mr.) <hr/> Contributor address; City; State; Zip Code  FRISCO, TX 75035	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) AAA SOLUTIONS

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/29 Rpt: 24/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Sue (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fairview, TX 75069	<b>7</b> Amount of Contribution (\$)  \$41.64
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard Parker, Inc <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Cheri (Mrs.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Julio (Mr.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roettele, Karen (Mrs.) <hr/> Contributor address; City; State; Zip Code  Plano, TX 75074	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/29 Rpt: 25/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 09/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SELEN, ADRIAN (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  LEWISVILLE, TX 75067	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) OWNER		<b>9</b> Employer (See Instructions) NAPOLI'S ALLEN
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SELEN, DOKO (Mrs.) <hr/> Contributor address; City; State; Zip Code  LEWISVILLE, TX 75067	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) HOUSEWIFE
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOLZ, BEN (Mr.) <hr/> Contributor address; City; State; Zip Code  LAVON, TX 75166	Amount of Contribution (\$)  \$104.10
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) RETIRED
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMIAHYI, MRIO (Mr.) <hr/> Contributor address; City; State; Zip Code  ROCKWALL, TX 75087	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) RETIRED
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPEARS, DEBBIE (Mrs.) <hr/> Contributor address; City; State; Zip Code  LUCAS, TX 75002	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) RETIRED

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/29 Rpt: 26/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 09/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPEARS, ROBERT (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  LUCAS, TX 75002	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) NONE		<b>9</b> Employer (See Instructions) RETIRED
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPEARS, ROBERT (Mr.) <hr/> Contributor address; City; State; Zip Code  LUCAS, TX 75002	Amount of Contribution (\$)  \$520.51
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) RETIRED
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPURGIN, KEITH (Mr.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) SR PASTOR		Employer (See Instructions) NEW HOPE CHURCH
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPURGIN, SUSAN (Mrs.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) RETIRED
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sardo, Pam (Dr.) <hr/> Contributor address; City; State; Zip Code  Josephine, TX 75173	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/29 Rpt: 27/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 10/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwerin, Michael (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Wylie, TX 75098	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Unknown		<b>9</b> Employer (See Instructions) Unknown
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shelley, Julia A. (Mrs.) <hr/> Contributor address; City; State; Zip Code  Plano, TX 75023	Amount of Contribution (\$)  \$260.25
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sineni, Christy (Mrs.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Bob (Mr.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75707	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spears, Debbie (Mrs.) <hr/> Contributor address; City; State; Zip Code  Allen, TX 75002	Amount of Contribution (\$)  \$520.51
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/29 Rpt: 28/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 10/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Sandra (Miss) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Wylie, TX 75098	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stufft, Daniel (Mr.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Wylie Tire
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swatloski, Dan (Mr.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$104.10
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Job Seeker
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOBAR, JACKI (Mrs.) <hr/> Contributor address; City; State; Zip Code  ST PAUL, TX 75098	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) PROVEN TITLE
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, ANGELA (Mrs.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) REMAX

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/29 Rpt: 29/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 10/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tower, Angela (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lavon, TX 75166	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Unknown		<b>9</b> Employer (See Instructions) Unknown
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tower, Chuck (Mr.) <hr/> Contributor address; City; State; Zip Code  Lavon, TX 75166	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tusant, Andre (Mr.) <hr/> Contributor address; City; State; Zip Code  Hickory Creek, TX 75065	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Dallas Central Appraisal District		Employer (See Instructions) Cybersecurity
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALLEY, RICK (Mr.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$260.25
Principal occupation / Job title (See Instructions) Restaurant Owner		Employer (See Instructions) Creekside Fine Grill
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaughan, Mary (Mrs.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/29 Rpt: 30/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 10/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaughan, Robert (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  WYLIE, TX 75098	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Unknown		<b>9</b> Employer (See Instructions) Unknown
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, RANDALL (Mr.) <hr/> Contributor address; City; State; Zip Code  SACHSE, TX 75048	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) WYLIE CHRISTIAN CARE FACILITY
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTERS, JASON (Mr.) <hr/> Contributor address; City; State; Zip Code  ST PAUL, TX 75098	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) PROVEN SUITES
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wakin, Jackie (Mrs.) <hr/> Contributor address; City; State; Zip Code  The Colony, TX 75056	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitehead, Steve (Mr.) <hr/> Contributor address; City; State; Zip Code  Royse City, TX 75189	Amount of Contribution (\$)  \$520.51
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/29 Rpt: 31/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 10/27/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitt, Maggie (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75094	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Connie (Mrs.) <hr/> Contributor address; City; State; Zip Code  Nevada, TX 75173	Amount of Contribution (\$)  \$104.10
Principal occupation / Job title (See Instructions) Citi		Employer (See Instructions) IT Manager
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winkel, Amy (Mrs.) <hr/> Contributor address; City; State; Zip Code  McKinney, TX 75072	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winkel, Jens (Mr.) <hr/> Contributor address; City; State; Zip Code  McKinney, TX 75072	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winkle, Jens (Mr.) <hr/> Contributor address; City; State; Zip Code  McKinney, TX 75072	Amount of Contribution (\$)  \$130.13
Principal occupation / Job title (See Instructions) Com Pam LLC		Employer (See Instructions) Engineer

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/29 Rpt: 32/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 10/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Bill (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Wylie, TX 75098	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Bill (Mr.) <hr/> Contributor address; City; State; Zip Code  WYLIE, TX 75098	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, William (Mr.) <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$520.51
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) sims, kyle (Mr.) <hr/> Contributor address; City; State; Zip Code  Mckinney, TX 75071	Amount of Contribution (\$)  \$41.64
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired



# PLEDGED CONTRIBUTIONS

## SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:  
Sch: 1/1 Rpt: 33/44

2 FILER NAME  
Forrester, Jeffrey N. (Mr.)

3 Filer ID (Ethics Commission Filers)  
00089848

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date  
  
12/15/2025

6 Full name of pledgor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Forrester, Gerald

7 Pledgor Address; City; State; Zip Code

Midlothian, TX 76065

8 Amount of  
pledge (\$)  
  
\$10,121.00

9 In-kind description  
(If applicable)

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)  
Retired

11 Employer (See Instructions)  
Retired

# LOANS

## SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: Sch: 1/1 Rpt: 34/44
<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$</b> 0.00
<b>5</b> Date of loan 11/10/2025	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Forrester, Jeffrey	<b>9</b> Loan Amount (\$) \$35,000.00
<b>6</b> Is lender a financial institution? No	<b>8</b> Lender address; City; State; Zip Code  Wylie, TX 75098	<b>10</b> Interest Rate 0.00
		<b>11</b> Maturity Date 04/01/2026
<b>12</b> Principal occupation / Job title (See Instructions) Consultant		<b>13</b> Employer (See Instructions) Self Employed
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; City; State; Zip Code	
<b>20</b> Principal occupation		<b>21</b> Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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.

<b>1</b> Total pages Schedule F1: Sch: 1/3 Rpt: 35/44	<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 10/01/2025	<b>5</b> Payee name American National Bank of Texas	
<b>6</b> Amount (\$) \$4.95	<b>7</b> Payee address; City; State; Zip Code 102 W Moore Ave  Terrell, TX 75160	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/01/2025	Candidate/Officeholder name Office sought Office held	
Payee name American National Bank of Texas		
Amount (\$) \$4.95	Payee address; City; State; Zip Code 102 W Moore Ave  Terrell, TX 75160	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/01/2025	Candidate/Officeholder name Office sought Office held	
Payee name American National Bank of Texas		
Amount (\$) \$4.95	Payee address; City; State; Zip Code 102 W Moore Ave  Terrell, TX 75160	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/01/2025	Candidate/Officeholder name Office sought Office held	
Payee name American National Bank of Texas		
Amount (\$) \$4.95	Payee address; City; State; Zip Code 102 W Moore Ave  Terrell, TX 75160	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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.

<b>1</b> Total pages Schedule F1: Sch: 2/3 Rpt: 36/44	<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 11/08/2025	<b>5</b> Payee name Collin County Republican Party	
<b>6</b> Amount (\$) \$750.00	<b>7</b> Payee address; City; State; Zip Code 2963 W. 15th Suite 2981 Plano, TX 75075	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Candidate Filing
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/05/2025	Payee name Ribeiro, Eduardo	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 2314 Maserati Dr Frisco, TX 75034	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2025	Payee name Ribeiro, Eduardo	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 2314 Maserati Dr Frisco, TX 75034	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete <u>ONLY</u> 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  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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.

<b>1</b> Total pages Schedule F1: Sch: 3/3 Rpt: 37/44	<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> Date 12/05/2025	<b>5</b> Payee name Ribeiro, Eduardo	
<b>6</b> Amount (\$) \$1,500.00	<b>7</b> Payee address; City; State; Zip Code 2314 Maserati Dr  Frisco, TX 75034	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2025	Payee name WINRED	
Amount (\$) \$531.84	Payee address; City; State; Zip Code 4250 Fairfax Dr Ste 600 Arlington, VA 22203	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Fees
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.

<b>1</b> Total pages Schedule F4: Sch: 1/7 Rpt: 38/44	<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> CREDIT CARD ISSUER	Name of financial institution AMEX		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 0.00
<b>6</b> PAYMENT	(a) Amount Charged \$462.68	(b) Date of Charge 09/23/2025	(c) Date(s) Credit Card Issuer Paid 09/09/2025
<b>7</b> PAYEE	(a) Payee name Imprint		(b) Payee address; City, State, Zip Code 1400 Beechnut Street Houston, TX 77083
<b>8</b> 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 Bracelets
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
<b>PAYMENT</b>	(a) Amount Charged \$1,000.00	(b) Date of Charge 09/25/2025	(c) Date(s) Credit Card Issuer Paid 10/13/2025
<b>PAYEE</b>	(a) Payee name Rogers, Brett		(b) Payee address; City, State, Zip Code 4514 Edinburgh Drive Tyler, TX 75703
<b>PURPOSE OF EXPENDITURE</b> <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 Volunteer Software
	(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		
<b>PAYMENT</b>	(a) Amount Charged \$150.00	(b) Date of Charge 09/29/2025	(c) Date(s) Credit Card Issuer Paid 10/13/2025
<b>PAYEE</b>	(a) Payee name Hopper for Texas Kick-Off Dinner		(b) Payee address; City, State, Zip Code 204 W. Walnut Street Decatur, TX 76234
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Campaign Kick-Off 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 Hopper, Andy		

## 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.

<b>1</b> Total pages Schedule F4: Sch: 2/7 Rpt: 39/44	<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 0.00
<b>6</b> PAYMENT	(a) Amount Charged \$129.88	(b) Date of Charge 10/05/2025	(c) Date(s) Credit Card Issuer Paid 10/13/2025
<b>7</b> PAYEE	(a) Payee name Amazon		(b) Payee address; City, State, Zip Code 410 Terry Avenue North Seattle, WA 98109
<b>8</b> 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 Boo on Ballard Hand Outs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
<b>PAYMENT</b>	(a) Amount Charged \$247.25	(b) Date of Charge 10/06/2025	(c) Date(s) Credit Card Issuer Paid 10/13/2025
<b>PAYEE</b>	(a) Payee name Zeffy		(b) Payee address; City, State, Zip Code 651 N Broad Street Suite 206 Middleton, DE 19709
<b>PURPOSE OF EXPENDITURE</b> <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 Event Sponsor
	(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		
<b>PAYMENT</b>	(a) Amount Charged \$636.12	(b) Date of Charge 10/14/2025	(c) Date(s) Credit Card Issuer Paid 10/13/2025
<b>PAYEE</b>	(a) Payee name CheapestTees.com		(b) Payee address; City, State, Zip Code 1400 Rollins Road Burlingame, CA 94010
<b>PURPOSE OF EXPENDITURE</b> <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 T-Shirts
	(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.

<b>1</b> Total pages Schedule F4: Sch: 3/7 Rpt: 40/44	<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 0.00
<b>6</b> PAYMENT	(a) Amount Charged \$200.00	(b) Date of Charge 11/03/2025	(c) Date(s) Credit Card Issuer Paid 12/09/2025
<b>7</b> PAYEE	(a) Payee name Collin County Republican Party		(b) Payee address; City, State, Zip Code 2963 W. 15th Suite 2981 Plano, TX 75075
<b>8</b> PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Car Show Sponsor
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
<b>PAYMENT</b>	(a) Amount Charged \$350.00	(b) Date of Charge 11/24/2025	(c) Date(s) Credit Card Issuer Paid 12/09/2025
<b>PAYEE</b>	(a) Payee name Wylie Area Chamber of		(b) Payee address; City, State, Zip Code 307 N. Ballard Ave Wylie, TX 75098
<b>PURPOSE OF EXPENDITURE</b> <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 Elfin Gala Sponsor
	(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		
<b>PAYMENT</b>	(a) Amount Charged \$150.00	(b) Date of Charge 11/25/2025	(c) Date(s) Credit Card Issuer Paid 12/09/2025
<b>PAYEE</b>	(a) Payee name Shelly Luther Kick-Off Dinner		(b) Payee address; City, State, Zip Code 100 N Travis St Sherman, TX 75090
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Campaign Kick-Off 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 Luther, Shelley		



## 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.

<b>1</b> Total pages Schedule F4: Sch: 4/7 Rpt: 41/44	<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 0.00
<b>6</b> PAYMENT	(a) Amount Charged \$151.08	(b) Date of Charge 11/30/2025	(c) Date(s) Credit Card Issuer Paid 12/09/2025
<b>7</b> PAYEE	(a) Payee name Banners on the Cheap		(b) Payee address; City, State, Zip Code 11525a Stonehollow Drive Austin, TX 78758
<b>8</b> 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 Truck Sign Banner
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
<b>PAYMENT</b>	(a) Amount Charged \$500.00	(b) Date of Charge 12/01/2025	(c) Date(s) Credit Card Issuer Paid 12/09/2025
<b>PAYEE</b>	(a) Payee name American Jewish Conservatives		(b) Payee address; City, State, Zip Code 16817 Coit Road Suite 1147 Dallas, TX 75248
<b>PURPOSE OF EXPENDITURE</b> <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 Event Sponsor
	(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		
<b>PAYMENT</b>	(a) Amount Charged \$313.58	(b) Date of Charge 12/02/2025	(c) Date(s) Credit Card Issuer Paid 12/09/2025
<b>PAYEE</b>	(a) Payee name Fast Signs DFW		(b) Payee address; City, State, Zip Code 4714 Greenville Ave Dallas, TX 75206
<b>PURPOSE OF EXPENDITURE</b> <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 Truck Wrap
	(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.

<b>1</b> Total pages Schedule F4: Sch: 5/7 Rpt: 42/44	<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 0.00
<b>6</b> PAYMENT	(a) Amount Charged \$993.74	(b) Date of Charge 12/04/2025	(c) Date(s) Credit Card Issuer Paid 12/09/2025
<b>7</b> PAYEE	(a) Payee name Atwoods Farm Supply		(b) Payee address; City, State, Zip Code 5222 Wesley Street Greenville, TX 75402
<b>8</b> 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 T-Post
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
<b>PAYMENT</b>	(a) Amount Charged \$171.15	(b) Date of Charge 12/07/2025	(c) Date(s) Credit Card Issuer Paid 12/09/2025
<b>PAYEE</b>	(a) Payee name Frankie's Casa Restaurant		(b) Payee address; City, State, Zip Code 302 N. Ballard Ave Wylie, TX 75098
<b>PURPOSE OF EXPENDITURE</b> <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 Campaign Staff Christmas Dinner
	(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		
<b>PAYMENT</b>	(a) Amount Charged \$95.00	(b) Date of Charge 12/08/2025	(c) Date(s) Credit Card Issuer Paid 12/09/2025
<b>PAYEE</b>	(a) Payee name Campaign Verify		(b) Payee address; City, State, Zip Code 1215 31st Street NW P.O. Box 3554 Washington, DC 20007-9998
<b>PURPOSE OF EXPENDITURE</b> <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 Text Software
	(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.

<b>1</b> Total pages Schedule F4: Sch: 6/7 Rpt: 43/44	<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 0.00
<b>6</b> PAYMENT	(a) Amount Charged \$75.76	(b) Date of Charge 12/12/2025	(c) Date(s) Credit Card Issuer Paid 12/09/2025
<b>7</b> PAYEE	(a) Payee name Tractor Supply		(b) Payee address; City, State, Zip Code 900 Westgate Wylie, TX 75098
<b>8</b> 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 T-Post Tools
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
<b>PAYMENT</b>	(a) Amount Charged \$2,500.00	(b) Date of Charge 12/17/2025	(c) Date(s) Credit Card Issuer Paid 12/09/2025
<b>PAYEE</b>	(a) Payee name Collin County Republican Party		(b) Payee address; City, State, Zip Code 2963 W. 15th Suite 2981 Plano, TX 75075
<b>PURPOSE OF EXPENDITURE</b> <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 Lincoln Day Sponsor
	(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		
<b>PAYMENT</b>	(a) Amount Charged \$207.24	(b) Date of Charge 12/19/2025	(c) Date(s) Credit Card Issuer Paid 12/09/2025
<b>PAYEE</b>	(a) Payee name Personal Creations		(b) Payee address; City, State, Zip Code 23801 Calabasas Road Calabasas, CA 91302
<b>PURPOSE OF EXPENDITURE</b> <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
	(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.

<b>1</b> Total pages Schedule F4: Sch: 7/7 Rpt: 44/44	<b>2</b> FILER NAME Forrester, Jeffrey N. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089848
<b>4</b> CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 0.00
<b>6</b> PAYMENT	(a) Amount Charged \$436.18	(b) Date of Charge 12/31/2025	(c) Date(s) Credit Card Issuer Paid 12/09/2025
<b>7</b> PAYEE	(a) Payee name Think with Ink		(b) Payee address; City, State, Zip Code 2703 National Pl Garland, TX 75041
<b>8</b> 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 Door Hangers
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
<b>PAYMENT</b>	(a) Amount Charged \$259.77	(b) Date of Charge 12/31/2025	(c) Date(s) Credit Card Issuer Paid 12/09/2025
<b>PAYEE</b>	(a) Payee name American Jewish Conservatives		(b) Payee address; City, State, Zip Code 16817 Coit Road Suite 1147 Dallas, TX 75248
<b>PURPOSE OF EXPENDITURE</b> <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 Event Sponsor
	(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		