

**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. Jeffrey N.			OFFICE USE ONLY
	NICKNAME LAST SUFFIX Jeff Forrester			Date Received ELECTRONICALLY FILED 01/14/2026
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 2906 Katie Circle			Date Hand-delivered or Date Postmarked
	Wylie, TX 75098			Receipt # <input type="text"/> Amount <input type="text"/>
				Date Processed
				Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr. Gerald R.			
	NICKNAME LAST SUFFIX J.J. Forrester			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 418 Cole Lane			APT / SUITE #; CITY; STATE; ZIP CODE
	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 09/04/2025	Day	Year	Month 12/31/2025 Day Year
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any) None	12 OFFICE SOUGHT (if known) State Representative District 89		

GO TO PAGE 2

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

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

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13 C / OH NAME	Forrester, Jeffrey N. (Mr.)		14 Filer ID (Ethics Commission Filers) 00089848
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 50,269.59
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 14,826.12
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 78,628.17
OUTSTANDING LOAN TOTALS	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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18 FILER NAME Forrester, Jeffrey N. (Mr.)	19 Filer ID (Ethics Commission Filers) 00089848
20 SCHEDULE SUBTOTALS 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

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/29 Rpt: 6/44
2 FILER NAME Forrester, Jeffrey N. (Mr.)		3 Filer ID (Ethics Commission Filers) 00089848
4 Date 11/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEEK, PAULA (Mrs.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code ALLEN, TX 75013	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRANFORD, SUSAN (Mrs.)	Amount of Contribution (\$) \$208.20
	Contributor address; City; State; Zip Code WYLIE, TX 75098	
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.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code ST PAUL, TX 75098	
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.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code ST PAUL, TX 75098	
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.)	Amount of Contribution (\$) \$400.00
	Contributor address; City; State; Zip Code McKinney, TX 75072	
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/29 Rpt: 9/44
2 FILER NAME Forrester, Jeffrey N. (Mr.)		3 Filer ID (Ethics Commission Filers) 00089848
4 Date 10/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dockery, Charles (Mr.) 6 Contributor address; City; State; Zip Code Wylie, TX 75098	7 Amount of Contribution (\$) \$104.10
8 Principal occupation / Job title (See Instructions) Unknown		9 Employer (See Instructions) Unknown
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORRESTER, GERALD (Mr.) 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.) 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.) 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.) 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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/29 Rpt: 10/44
2 FILER NAME Forrester, Jeffrey N. (Mr.)		3 Filer ID (Ethics Commission Filers) 00089848
4 Date 10/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forrester, Harriette (Mrs.)	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code Midlothian, TX 76065	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GASHI, SYTRIM (Mrs.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code ALLEN, TX 75002	
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.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code ALLEN, TX 75002	
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.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code WYLIE, TX 75098	
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)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code WYLIE, TX 75098	
Principal occupation / Job title (See Instructions) PARA-PROFESSIONAL		Employer (See Instructions) WISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/29 Rpt: 12/44
2 FILER NAME Forrester, Jeffrey N. (Mr.)		3 Filer ID (Ethics Commission Filers) 00089848
4 Date 10/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goff, Lance (Mr.)	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code WYLINE, TX 75098	
8 Principal occupation / Job title (See Instructions) Vp		9 Employer (See Instructions) Phil Ins
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goff, Lance (Mr.)	Amount of Contribution (\$) \$208.20
	Contributor address; City; State; Zip Code Whlie, TX 75098	
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.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code WYLINE, TX 75098	
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.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code WYLINE, TX 75098	
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.)	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code WYLINE, TX 75098	
Principal occupation / Job title (See Instructions) INSTRUCTOR		Employer (See Instructions) CHL TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/29 Rpt: 21/44
2 FILER NAME Forrester, Jeffrey N. (Mr.)		3 Filer ID (Ethics Commission Filers) 00089848
4 Date 09/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, MATTHEW (Mr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code WYLINE, TX 75098	
8 Principal occupation / Job title (See Instructions) VP OPERATIONS		9 Employer (See Instructions) TEXAS HEALTH
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRIVETT, CHERIE (Mrs.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code PLANO, TX 75074	
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.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code PLANO, TX 75074	
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.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code WYLINE, TX 75098	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code PLANO, TX 75025	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/29 Rpt: 28/44
2 FILER NAME Forrester, Jeffrey N. (Mr.)		3 Filer ID (Ethics Commission Filers) 00089848
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Sandra (Miss) 6 Contributor address; City; State; Zip Code Wylie, TX 75098	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stufft, Daniel (Mr.) 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.) 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.) 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.) 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

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/29 Rpt: 30/44
2 FILER NAME Forrester, Jeffrey N. (Mr.)		3 Filer ID (Ethics Commission Filers) 00089848
4 Date 10/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaughan, Robert (Mr.) 6 Contributor address; City; State; Zip Code WYLIE, TX 75098	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Unknown		9 Employer (See Instructions) Unknown
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, RANDALL (Mr.) 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.) 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.) 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.) 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

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

PLEDGED CONTRIBUTIONS**SCHEDULE B**

The Instruction Guide explains how to complete this form.			
2 FILER NAME Forrester, Jeffrey N. (Mr.)			
4 TOTAL OF UNITEMIZED PLEDGES \$ 0.00			
5 Date 12/15/2025	6 Full name of pledgor Forrester, Gerald	<input type="checkbox"/> out-of-state PAC (ID#: _____)	8 Amount of pledge (\$) \$10,121.00
	7 Pledgor Address; Midlothian, TX 76065		9 In-kind description (If applicable) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (See Instructions) Retired		11 Employer (See Instructions) Retired	

LOANS

SCHEDULE E

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

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

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

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

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

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 4/7 Rpt: 41/44	2 FILER NAME Forrester, Jeffrey N. (Mr.)		3 Filer ID (Ethics Commission Filers) 00089848
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 0.00
6 PAYMENT	(a) Amount Charged \$151.08	(b) Date of Charge 11/30/2025	(c) Date(s) Credit Card Issuer Paid 12/09/2025
7 PAYEE	(a) Payee name Banners on the Cheap		(b) Payee address; City, State, Zip Code 11525a Stonehollow Drive Austin, TX 78758
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description 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
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 12/01/2025	(c) Date(s) Credit Card Issuer Paid 12/09/2025
PAYEE	(a) Payee name American Jewish Conservatives		(b) Payee address; City, State, Zip Code 16817 Coit Road Suite 1147 Dallas, TX 75248
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 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
PAYMENT	(a) Amount Charged \$313.58	(b) Date of Charge 12/02/2025	(c) Date(s) Credit Card Issuer Paid 12/09/2025
PAYEE	(a) Payee name Fast Signs DFW		(b) Payee address; City, State, Zip Code 4714 Greenville Ave Dallas, TX 75206
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 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

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

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

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

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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