

**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) 00082584	2 Total pages filed: 23		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Chris	MI	OFFICE USE ONLY		
	NICKNAME	LAST Spencer	SUFFIX	Date Received ELECTRONICALLY FILED 01/15/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 1497 County Road 2985			Date Hand-delivered or Date Postmarked		
	Hughes Springs, TX 75656			Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Jason E.	MI			
	NICKNAME	LAST Spencer	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 275 Walnut Street		APT / SUITE #;	CITY;	STATE;	ZIP CODE
	Avinger, TX 75630-1530					
7 CAMPAIGN TREASURER PHONE	AREA CODE (903)	PHONE NUMBER 799-8869	EXTENSION			
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)					
9 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special			
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known) State Representative District 1		

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

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

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13 C / OH NAME	Spencer, Chris (Mr.)		14 Filer ID (Ethics Commission Filers) 00082584
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)		\$ 138,842.07
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 32,631.36
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 204,615.01
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 406,477.90

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. Chris Spencer

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 Spencer, Chris (Mr.)	19 Filer ID (Ethics Commission Filers) 00082584
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 102,847.07
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 35,995.00
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 28,850.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 23,376.71
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 9,254.65
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 12.18

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 1/10 Rpt: 4/23
2 FILER NAME Spencer, Chris (Mr.)			3 Filer ID (Ethics Commission Filers) 00082584
4 Date 12/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alston, Thomas	7 Amount of Contribution (\$) \$250.00	
	6 Contributor address; City; State; Zip Code Texarkana, TX 75503		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)	
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Diane	Amount of Contribution (\$) \$3.00	
	Contributor address; City; State; Zip Code Linden, TX		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrileaux, Michael C.	Amount of Contribution (\$) \$520.51	
	Contributor address; City; State; Zip Code Splendora, TX		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Archie's Food Basket	
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Monty	Amount of Contribution (\$) \$2,500.00	
	Contributor address; City; State; Zip Code Dallas, TX		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, Kay	Amount of Contribution (\$) \$104.10	
	Contributor address; City; State; Zip Code Atlanta, TX		
Principal occupation / Job title (See Instructions) Field Organizer		Employer (See Instructions) Americans for Prosperity	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/10 Rpt: 5/23
2 FILER NAME Spencer, Chris (Mr.)		3 Filer ID (Ethics Commission Filers) 00082584
4 Date 12/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conway, Susan	7 Amount of Contribution (\$) \$104.10
	6 Contributor address; City; State; Zip Code Bogata, TX	
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Crazy Horse
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coston, Weldon	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Reno, TX 75462	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coston, Weldon	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Reno, TX 75462	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Covel, Bill	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Gatesville, TX	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dowd, Mary	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Linden, TX	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/10 Rpt: 6/23
2 FILER NAME Spencer, Chris (Mr.)		3 Filer ID (Ethics Commission Filers) 00082584
4 Date 09/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drake, Richard	7 Amount of Contribution (\$) \$5,000.00
	6 Contributor address; City; State; Zip Code Powderly, TX 75473	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Drake Trucking Company
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drake, Richard	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Powderly, TX 75473	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Drake Trucking Company
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Handsford, Paul	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Linden, TX	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herron, James	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Garland, TX	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hozdic, Richard	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Atlanta, TX	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Collom & Carney

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/10 Rpt: 7/23
2 FILER NAME Spencer, Chris (Mr.)		3 Filer ID (Ethics Commission Filers) 00082584
4 Date 12/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Patricia	7 Amount of Contribution (\$) \$104.10
	6 Contributor address; City; State; Zip Code Atlanta, TX	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leflett, Nancy Hightower	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Omaha, TX	
Principal occupation / Job title (See Instructions) Bail Bonds		Employer (See Instructions) Self
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lile, Deborah	Amount of Contribution (\$) \$20,000.00
	Contributor address; City; State; Zip Code Cape Coral, FL	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKelvey, Dave	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Olathe , KS 66061	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Kelly (Mr.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Texarkana, TX 75503	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) TEXAR Federal Credit Union

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/10 Rpt: 8/23
2 FILER NAME Spencer, Chris (Mr.)		3 Filer ID (Ethics Commission Filers) 00082584
4 Date 12/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchum, Jeremy	7 Amount of Contribution (\$) \$2,500.00
	6 Contributor address; City; State; Zip Code Del Rio, TX	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mize, Cody	Amount of Contribution (\$) \$260.25
	Contributor address; City; State; Zip Code Mineola, TX	
Principal occupation / Job title (See Instructions) Superintendent of Schools		Employer (See Instructions) Mineola ISD
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Philip	Amount of Contribution (\$) \$520.51
	Contributor address; City; State; Zip Code Naples, TX 75568	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Kenny (Mr.)	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Linden, TX 75563	
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Powers Pharmacy
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Kenny (Mr.)	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Linden, TX 75563	
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Powers Pharmacy

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/10 Rpt: 9/23
2 FILER NAME Spencer, Chris (Mr.)		3 Filer ID (Ethics Commission Filers) 00082584
4 Date 12/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salmon, William J.	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code TX	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salmon, William J.	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code TX	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schexnyder, Jude	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Atlanta, TX	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sledge Law Group PLLC	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Austin, TX 78705	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Michael	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Paris, TX 75462	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/10 Rpt: 10/23
2 FILER NAME Spencer, Chris (Mr.)		3 Filer ID (Ethics Commission Filers) 00082584
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Michael	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Paris, TX 75462	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smoak, Alton	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Marietta, TX	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Hwy 59 Oil & Lube
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, Eric	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Augusta, GA	
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, Joseph	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Augusta, GA	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, Russ	Amount of Contribution (\$) \$280.00
	Contributor address; City; State; Zip Code Naples, TX 75568	
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/10 Rpt: 11/23
2 FILER NAME Spencer, Chris (Mr.)		3 Filer ID (Ethics Commission Filers) 00082584
4 Date 08/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, Russ 6 Contributor address; City; State; Zip Code Naples, TX 75568	7 Amount of Contribution (\$) \$280.00
8 Principal occupation / Job title (See Instructions) Disabled		9 Employer (See Instructions)
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spriggs, Donnie Contributor address; City; State; Zip Code Texarkana, TX	Amount of Contribution (\$) \$104.10
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Lost Pizza Company
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stabeno, Kristina Contributor address; City; State; Zip Code Linden, TX 75563	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens, Cody Contributor address; City; State; Zip Code Paris, TX 75460	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) Southwest Airlines
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens, Cody Contributor address; City; State; Zip Code Paris, TX 75460	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) Southwest Airlines

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/10 Rpt: 12/23
2 FILER NAME Spencer, Chris (Mr.)		3 Filer ID (Ethics Commission Filers) 00082584
4 Date 12/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Randy	7 Amount of Contribution (\$) \$3,000.00
	6 Contributor address; City; State; Zip Code Durant, OK 74701	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Green Spray Market
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Gregory	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code TX	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Gregory	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Wake Village, TX 75501	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Gregory	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Wake Village, TX 75501	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terrell, Patti	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Texarkana, TX 75602	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A1: Sch: 10/10 Rpt: 13/23</p>
<p>2 FILER NAME Spencer, Chris (Mr.)</p>		<p>3 Filer ID (Ethics Commission Filers) 00082584</p>
<p>4 Date 12/01/2025</p>	<p>5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Texans United for a Conservative Majority 6 Contributor address; City; State; Zip Code Victoria, TX 77901</p>	<p>7 Amount of Contribution (\$) \$25,000.00</p>
<p>8 Principal occupation / Job title (See Instructions) Retired</p>		<p>9 Employer (See Instructions)</p>
<p>Date 11/25/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Van Reenen, Dabney Contributor address; City; State; Zip Code Carlsbad, CA</p>	<p>Amount of Contribution (\$) \$7,500.00</p>
<p>Principal occupation / Job title (See Instructions) Retired</p>		<p>Employer (See Instructions)</p>
<p>Date 11/04/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Williams, Bobbie Contributor address; City; State; Zip Code Avery, TX</p>	<p>Amount of Contribution (\$) \$25.00</p>
<p>Principal occupation / Job title (See Instructions) Retired</p>		<p>Employer (See Instructions)</p>

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A2: Sch: 1/1 Rpt: 14/23</p>
<p>2 FILER NAME Spencer, Chris (Mr.)</p>		<p>3 Filer ID (Ethics Commission Filers) 00082584</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>		<p>\$</p>
<p>5 Date 12/08/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Orr, Keith</p> <p>7 Contributor address; City; State; Zip Code Texarkana, TX 75503</p>	<p>8 Amount of contribution (\$) \$35,995.00</p> <p>9 In-kind contribution description Billboards</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) CEO</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions) Cognizant Management Solutions</p>
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p>
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/2 Rpt: 15/23
2 FILER NAME Spencer, Chris (Mr.)		3 Filer ID (Ethics Commission Filers) 00082584
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 10/01/2025	7 Name of lender Spencer, Chris	9 out-of-state PAC (ID#: \$10,000.00)
6 Is lender a financial institution? No	8 Lender address; Hughes Springs, TX 75656	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions) Self
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; Hughes Springs, TX 75656	
20 Principal occupation		21 Employer (See Instructions)
Date of loan 12/30/2025	Name of lender Spencer, Chris	Loan Amount (\$) \$12,000.00
Is lender a financial institution? No	Lender address; Hughes Springs, TX 75656	Interest Rate
		Maturity Date 06/30/2026
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Self
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account <input type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; Hughes Springs, TX 75656	
Principal occupation		Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 2/2 Rpt: 16/23
2 FILER NAME Spencer, Chris (Mr.)	3 Filer ID (Ethics Commission Filers) 00082584	
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 12/01/2025	7 Name of lender Spencer, Chris	<input type="checkbox"/> out-of-state PAC (ID#: _____)
		9 Loan Amount (\$) \$6,850.00
6 Is lender a financial institution? No	8 Lender address; Hughes Springs, TX 75656	10 Interest Rate
		11 Maturity Date 05/31/2026
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions) Self
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: 1/5 Rpt: 17/23	2 FILER NAME Spencer, Chris (Mr.)	3 Filer ID (Ethics Commission Filers) 00082584
4 Date 07/28/2025	5 Payee name 1st Street Media	
6 Amount (\$) \$1,800.00	7 Payee address; City; 14 1st Street SE Paris, TX 75460	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Radio Podcast
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/05/2025	Payee name 1st Street Media	
Amount (\$) \$1,800.00	Payee address; City; 14 1st Street SE Paris, TX 75460	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Radio Podcast
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/10/2025	Payee name 1st Street Media	
Amount (\$) \$1,800.00	Payee address; City; 14 1st Street SE Paris, TX 75460	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Radio Podcast
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: 2/5 Rpt: 18/23	2 FILER NAME Spencer, Chris (Mr.)	3 Filer ID (Ethics Commission Filers) 00082584
4 Date 11/14/2025	5 Payee name 1st Street Media	
6 Amount (\$) \$1,800.00	7 Payee address; City; 14 1st Street SE Paris, TX 75460	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Radio Podcast
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/31/2025	Payee name Anedot	
Amount (\$) \$101.81	Payee address; City; 1340 Poydras Street New Orleans, LA 70112	
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 Total credit card fees for donations.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/04/2025	Payee name Axiom Strategies	
Amount (\$) \$3,000.00	Payee address; City; 800 West 47th Street Kansas City, MO 64112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Retainer
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/5 Rpt: 19/23	2 FILER NAME Spencer, Chris (Mr.)	3 Filer ID (Ethics Commission Filers) 00082584
4 Date 09/09/2025	5 Payee name Axiom Strategies	
6 Amount (\$) \$3,000.00	7 Payee address; City; 800 West 47th Street Kansas City, MO 64112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Retainer
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/15/2025	Payee name Axiom Strategies	
Amount (\$) \$3,000.00	Payee address; City; 800 West 47th Street Kansas City, MO 64112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Retainer
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/19/2025	Payee name Axiom Strategies	
Amount (\$) \$3,000.00	Payee address; City; 800 West 47th Street Kansas City, MO 64112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Retainer
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/5 Rpt: 20/23	2 FILER NAME Spencer, Chris (Mr.)	3 Filer ID (Ethics Commission Filers) 00082584
4 Date 12/18/2025	5 Payee name Axiom Strategies	
6 Amount (\$) \$3,000.00	7 Payee address; City; 800 West 47th Street Kansas City, MO 64112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Retainer
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/03/2025	Payee name City of Bogata	
Amount (\$) \$65.00	Payee address; City; Bogata, TX	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Venue rental
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name Daingerfield Athletic Boosters	
Amount (\$) \$200.00	Payee address; City; Daingerfield, TX 75638	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Football Program Ad
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/5 Rpt: 21/23	2 FILER NAME Spencer, Chris (Mr.)	3 Filer ID (Ethics Commission Filers) 00082584
4 Date 07/09/2025	5 Payee name Meta	
6 Amount (\$) \$680.00	7 Payee address; City; State; Zip Code 1 Meta Way Menlo Park, CA 94025-1444	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Facebook ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/15/2025	Payee name O'Bier, Cebron	
Amount (\$) \$79.90	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Bogata, TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for food tray for speaking event.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/22/2025	Payee name Red River Valley Fair Association	
Amount (\$) \$50.00	Payee address; City; State; Zip Code Paris, TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Space rental for Red River Valley Fair
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 22/23	2 FILER NAME Spencer, Chris (Mr.)	3 Filer ID (Ethics Commission Filers) 00082584	
4 Date 12/31/2025	5 Payee name Meta		
6 Amount (\$) \$9,254.65	7 Payee address; City; State; Zip Code 1 Meta Way Menlo Park, CA 94025-1444		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Facebook advertising cumulative totals	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/1 Rpt: 23/23
2 FILER NAME Spencer, Chris (Mr.)		3 Filer ID (Ethics Commission Filers) 00082584
4 Date 12/31/2025	5 Name of person from whom amount is received Texar Federal Credit Union	8 Amount (\$) \$12.18
	6 Address of person from whom amount is received; City; State; Zip Code TEXARKANA, TX	
	7 Purpose for which amount is received Interest on account	<input type="checkbox"/> Check if political contribution returned to filer