

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00037120	2 Total pages filed: 21
3 COMMITTEE NAME Sabine Pilots			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/09/2026 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2605 Jimmy Johnson Blvd  Port Arthur, TX 77640		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Virginia NICKNAME LAST SUFFIX Sonnier		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2605 Jimmy Johnson Blvd  Port Arthur, TX 77640		
7 CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 5148 W. Parkway St.  Groves, TX 77619-2940		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (409) 722-3126		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year 07/01/2025 THROUGH Month Day Year 12/31/2025		
11 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

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# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Sabine Pilots		<b>13 Filer ID</b> (Ethics Commission Filers) 00037120
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 12,450.00
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 16,500.00
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 17,314.85
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00
<b>16 AFFIDAVIT</b>  <div style="text-align: right; margin-top: 100px;">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.</div> <div style="text-align: right; margin-top: 20px;">Ms. Virginia Sonnier _____ Signature of Campaign Treasurer</div> <div style="margin-top: 50px;">AFFIX NOTARY STAMP / SEAL ABOVE</div> <div style="margin-top: 20px;">Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</div> <div style="margin-top: 50px;">_____ Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath</div>		

**SUBTOTALS - GPAC****FORM GPAC**  
**COVER SHEET PG 3**  
3 of 21

<b>17 COMMITTEE NAME</b> Sabine Pilots		<b>18 Filer ID</b> (Ethics Commission Filers) 00037120
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="checked" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 12,450.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="checked" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 16,500.00
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/17 Rpt: 4/21
<b>2</b> FILER NAME Sabine Pilots		<b>3</b> Filer ID (Ethics Commission Filers) 00037120
<b>4</b> Date 10/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Kindell (Capt.) <b>6</b> Contributor address; City; State; Zip Code  Port Neches, TX 77651	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Marine Pilot		<b>9</b> Employer (See Instructions) Sabine Pilots
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Kindell (Capt.) Contributor address; City; State; Zip Code  Port Neches, TX 77651	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnaud, Craig (Capt.) Contributor address; City; State; Zip Code  Nederland , TX 77627	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnaud, Craig (Capt.) Contributor address; City; State; Zip Code  Nederland , TX 77627	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bammert, Tommy (Capt.) Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/17 Rpt: 5/21
<b>2</b> FILER NAME Sabine Pilots		<b>3</b> Filer ID (Ethics Commission Filers) 00037120
<b>4</b> Date 11/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bammert, Tommy (Capt.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77705	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Marine Pilot		<b>9</b> Employer (See Instructions) Sabine Pilots
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bancroft, Charles (Capt.) <hr/> Contributor address; City; State; Zip Code  Universal City, TX 78148	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bancroft, Charles (Capt.) <hr/> Contributor address; City; State; Zip Code  Universal City, TX 78148	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Duane (Capt.) <hr/> Contributor address; City; State; Zip Code  Port Arthur, TX 77640	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) MARINE PILOT		Employer (See Instructions) SABINE PILOT
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Duane (Capt.) <hr/> Contributor address; City; State; Zip Code  Port Arthur, TX 77640	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) MARINE PILOT		Employer (See Instructions) SABINE PILOT

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/17 Rpt: 6/21
<b>2</b> FILER NAME Sabine Pilots		<b>3</b> Filer ID (Ethics Commission Filers) 00037120
<b>4</b> Date 10/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byrnes, David (Capt.) <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77706	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) marine pilot		<b>9</b> Employer (See Instructions) Sabine Pilots
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byrnes, David (Capt.) Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) marine pilot		Employer (See Instructions) Sabine Pilots
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROREY, HUNTER (Capt.) Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) marine pilot		Employer (See Instructions) Sabine Pilots
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROREY, HUNTER (Capt.) Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) marine pilot		Employer (See Instructions) Sabine Pilots
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Jason (Capt.) Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/17 Rpt: 7/21
<b>2</b> FILER NAME Sabine Pilots		<b>3</b> Filer ID (Ethics Commission Filers) 00037120
<b>4</b> Date 11/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Jason (Capt.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Nederland, TX 77627	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Marine Pilot		<b>9</b> Employer (See Instructions) Sabine Pilots
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford , Tyler (Capt.) <hr/> Contributor address; City; State; Zip Code  Orange, TX 77632	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilot Association
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford , Tyler (Capt.) <hr/> Contributor address; City; State; Zip Code  Orange, TX 77632	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilot Association
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel, William (Capt.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77713	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Branch Pilot		Employer (See Instructions) Sabine Pilots
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel, William (Capt.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77713	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Branch Pilot		Employer (See Instructions) Sabine Pilots

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/17 Rpt: 8/21
<b>2</b> FILER NAME Sabine Pilots		<b>3</b> Filer ID (Ethics Commission Filers) 00037120
<b>4</b> Date 10/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Egan, Michael (Capt.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77713	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Marine Pilot		<b>9</b> Employer (See Instructions) Sabine Pilots
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fiore, James (Capt.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Branch Pilot		Employer (See Instructions) Sabine Pilots
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fiore, James (Capt.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Branch Pilot		Employer (See Instructions) Sabine Pilots
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frisbie , Jacob (Capt.) <hr/> Contributor address; City; State; Zip Code  Bridge City , TX 77611	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilot Association
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frisbie , Jacob (Capt.) <hr/> Contributor address; City; State; Zip Code  Bridge City , TX 77611	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilot Association



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/17 Rpt: 9/21
<b>2</b> FILER NAME Sabine Pilots		<b>3</b> Filer ID (Ethics Commission Filers) 00037120
<b>4</b> Date 10/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodridge, Brent (Capt.) <b>6</b> Contributor address; City; State; Zip Code  Port Neches, TX 77651	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Marine Pilot		<b>9</b> Employer (See Instructions) Sabine Pilot Association
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodridge, Brent (Capt.) Contributor address; City; State; Zip Code  Port Neches, TX 77651	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilot Association
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guidry, Andrew (Capt.) Contributor address; City; State; Zip Code  BEAUMONT, TX 77706	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guidry, Andrew (Capt.) Contributor address; City; State; Zip Code  BEAUMONT, TX 77706	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haight, Michael (Capt.) Contributor address; City; State; Zip Code  Nederland , TX 77627	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Branch Pilot		Employer (See Instructions) Sabine Pilots

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/17 Rpt: 10/21
<b>2</b> FILER NAME Sabine Pilots		<b>3</b> Filer ID (Ethics Commission Filers) 00037120
<b>4</b> Date 11/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haight, Michael (Capt.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Nederland , TX 77627	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Branch Pilot		<b>9</b> Employer (See Instructions) Sabine Pilots
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hansley, Adam (Capt.) <hr/> Contributor address; City; State; Zip Code  Port Arthur , TX 77640	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilot Association
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hansley, Adam (Capt.) <hr/> Contributor address; City; State; Zip Code  Port Arthur , TX 77640	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilot Association
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilton, Timothy (Capt.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77707	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots Association
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilton, Timothy (Capt.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77707	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots Association

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/17 Rpt: 11/21
<b>2</b> FILER NAME Sabine Pilots		<b>3</b> Filer ID (Ethics Commission Filers) 00037120
<b>4</b> Date 10/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurd, Kenneth (Capt.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77705	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Marine Pilot		<b>9</b> Employer (See Instructions) Sabine Pilots
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurd, Kenneth (Capt.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kivela , James (Capt.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots Association
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kivela , James (Capt.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots Association
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kucharski, Stephen (Capt.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Branch Pilot		Employer (See Instructions) Sabine Pilot

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/17 Rpt: 12/21
<b>2</b> FILER NAME Sabine Pilots		<b>3</b> Filer ID (Ethics Commission Filers) 00037120
<b>4</b> Date 11/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kucharski, Stephen (Capt.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77706	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Branch Pilot		<b>9</b> Employer (See Instructions) Sabine Pilot
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lagrappe, Chad (Capt.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilot Association
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lagrappe, Chad (Capt.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilot Association
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lahaye Jr., Charles (Capt.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lahaye Jr., Charles (Capt.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/17 Rpt: 13/21
<b>2</b> FILER NAME Sabine Pilots		<b>3</b> Filer ID (Ethics Commission Filers) 00037120
<b>4</b> Date 10/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larimer, Ryan (Capt.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77713	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Marine Pilot		<b>9</b> Employer (See Instructions) Sabine Pilot Associatioin
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larimer, Ryan (Capt.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77713	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilot Associatioin
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKOIN , JOSHUA (Capt.) <hr/> Contributor address; City; State; Zip Code  PORT ARTHUR, TX 77640	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) MARINE PILOT		Employer (See Instructions) SABINE PILOTS
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKOIN , JOSHUA (Capt.) <hr/> Contributor address; City; State; Zip Code  PORT ARTHUR, TX 77640	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) MARINE PILOT		Employer (See Instructions) SABINE PILOTS
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malcolm , Landon (Capt.) <hr/> Contributor address; City; State; Zip Code  Port Neches, TX 77651	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilot Association

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/17 Rpt: 14/21
<b>2</b> FILER NAME Sabine Pilots		<b>3</b> Filer ID (Ethics Commission Filers) 00037120
<b>4</b> Date 11/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malcolm , Landon (Capt.) <b>6</b> Contributor address; City; State; Zip Code  Port Neches, TX 77651	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Marine Pilot		<b>9</b> Employer (See Instructions) Sabine Pilot Association
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnelly, Gregg (Capt.) Contributor address; City; State; Zip Code  Beaumont, TX 77713	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnelly, Gregg (Capt.) Contributor address; City; State; Zip Code  Beaumont, TX 77713	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Jody (Capt.) Contributor address; City; State; Zip Code  Groves, TX 77619	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Branch Pilot		Employer (See Instructions) Sabine Pilots
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Jody (Capt.) Contributor address; City; State; Zip Code  Groves, TX 77619	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Branch Pilot		Employer (See Instructions) Sabine Pilots

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/17 Rpt: 15/21
<b>2</b> FILER NAME Sabine Pilots		<b>3</b> Filer ID (Ethics Commission Filers) 00037120
<b>4</b> Date 10/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McHaney, Ryan (Capt.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77706	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Branch Pilot		<b>9</b> Employer (See Instructions) Sabine Pilots
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McHaney, Ryan (Capt.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Branch Pilot		Employer (See Instructions) Sabine Pilots
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Keith (Capt.) <hr/> Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Branch Pilot		Employer (See Instructions) Sabine Pilots
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Keith (Capt.) <hr/> Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Branch Pilot		Employer (See Instructions) Sabine Pilots
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Michael (Capt.) <hr/> Contributor address; City; State; Zip Code  Orange, TX 77630	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/17 Rpt: 16/21
<b>2</b> FILER NAME Sabine Pilots		<b>3</b> Filer ID (Ethics Commission Filers) 00037120
<b>4</b> Date 11/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Michael (Capt.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Orange, TX 77630	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Marine Pilot		<b>9</b> Employer (See Instructions) Sabine Pilots
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Wesley (Capt.) <hr/> Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Wesley (Capt.) <hr/> Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prescod, Joel (Capt.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilot Association
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prescod, Joel (Capt.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilot Association



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/17 Rpt: 17/21
<b>2</b> FILER NAME Sabine Pilots		<b>3</b> Filer ID (Ethics Commission Filers) 00037120
<b>4</b> Date 10/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeder, Todd (Capt.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Port Neches, TX 77651	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Marine Pilot		<b>9</b> Employer (See Instructions) Sabine Pilot Association
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeder, Todd (Capt.) <hr/> Contributor address; City; State; Zip Code  Port Neches, TX 77651	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilot Association
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders , Robert (Capt.) <hr/> Contributor address; City; State; Zip Code  Port Neches , TX 77651	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilot Association
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders , Robert (Capt.) <hr/> Contributor address; City; State; Zip Code  Port Neches , TX 77651	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilot Association
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jason (Capt.) <hr/> Contributor address; City; State; Zip Code  Bridge City , TX 77611	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilot Association

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/17 Rpt: 18/21
<b>2</b> FILER NAME Sabine Pilots		<b>3</b> Filer ID (Ethics Commission Filers) 00037120
<b>4</b> Date 11/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jason (Capt.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Bridge City , TX 77611	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Marine Pilot		<b>9</b> Employer (See Instructions) Sabine Pilot Association
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swan, Joseph (Capt.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swan, Joseph (Capt.) <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thibodeaux, Brian (Capt.) <hr/> Contributor address; City; State; Zip Code  Bridge City , TX 77611	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thibodeaux, Brian (Capt.) <hr/> Contributor address; City; State; Zip Code  Bridge City , TX 77611	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/17 Rpt: 19/21
<b>2</b> FILER NAME Sabine Pilots		<b>3</b> Filer ID (Ethics Commission Filers) 00037120
<b>4</b> Date 10/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Edward (Capt.) <b>6</b> Contributor address; City; State; Zip Code  Groves, TX 77619	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Branch Pilot		<b>9</b> Employer (See Instructions) Sabine Pilots
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Edward (Capt.) Contributor address; City; State; Zip Code  Groves, TX 77619	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Branch Pilot		Employer (See Instructions) Sabine Pilots
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tweedel, Charles (Capt.) Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tweedel, Charles (Capt.) Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitley, Gina (Capt.) Contributor address; City; State; Zip Code  Beaumont , TX 77706	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Marine Pilot		Employer (See Instructions) Sabine Pilots

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/17 Rpt: 20/21
<b>2</b> FILER NAME Sabine Pilots		<b>3</b> Filer ID (Ethics Commission Filers) 00037120
<b>4</b> Date 11/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitley, Gina (Capt.) <b>6</b> Contributor address; City; State; Zip Code  Beaumont , TX 77706	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Marine Pilot		<b>9</b> Employer (See Instructions) Sabine Pilots
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Stephen (Capt.) Contributor address; City; State; Zip Code  Orange, TX 77630	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Branch Pilot		Employer (See Instructions) Sabine Pilot Assoication
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Stephen (Capt.) Contributor address; City; State; Zip Code  Orange, TX 77630	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Branch Pilot		Employer (See Instructions) Sabine Pilot Assoication

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/1 Rpt: 21/21	<b>2</b> FILER NAME Sabine Pilots	<b>3</b> Filer ID (Ethics Commission Filers) 00037120
<b>4</b> Date 10/21/2025	<b>5</b> Payee name Abbott, Greg	
<b>6</b> Amount (\$) \$10,000.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code P O Box 308  Austin, TX 78767	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2025	Payee name Ashby, Trent (Rep.)	
Amount (\$) \$5,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 412  Lufkin, TX 75902	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/23/2025	Payee name Callas, Ray (Dr.)	
Amount (\$) \$1,500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P O Box 20032  Beaumont, TX 77720	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Callas, Ray (Dr.)	Office sought Office held State Representative District 21