

**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) 00085680	2 Total pages filed: 70		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST The Honorable David O.	MI	<b>OFFICE USE ONLY</b>		
	NICKNAME	LAST Lowe	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; 9017 Cedar Breaks Drive			Date Hand-delivered or Date Postmarked		
	North Richland Hills, TX 76182			Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Mr.	MI			
	NICKNAME	LAST Lowe	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 9017 Cedar Breaks Drive		APT / SUITE #;	CITY;	STATE;	ZIP CODE
	North Richland Hills, TX 76182					
7 CAMPAIGN TREASURER PHONE	AREA CODE (817)	PHONE NUMBER 253-1214	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 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) State Representative District 91			12 OFFICE SOUGHT (if known) State Representative District 91		

**GO TO PAGE 2**

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

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

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13 C / OH NAME	Lowe, David O. (The Honorable)		14 Filer ID (Ethics Commission Filers) 00085680
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. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 120,852.19
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 2,370.13
	4. <b>TOTAL POLITICAL EXPENDITURES</b>		\$ 106,830.72
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 70,968.11
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00

**17 AFFIDAVIT**

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

The Honorable David O. Lowe

\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day  
of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering

\_\_\_\_\_  
Printed name of officer administering

\_\_\_\_\_  
Title of officer administering oath

## **SUBTOTALS - C/OH**

**FORM C/OH  
COVER SHEET PG 3**

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<b>18 FILER NAME</b> Lowe, David O. (The Honorable)		<b>19 Filer ID</b> (Ethics Commission Filers) 00085680
<b>20 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 120,852.19
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 E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 106,830.72
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 type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/35 Rpt: 4/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A Kirkendall, James	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76148	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alt, Sharon	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76180	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) ASIFlex
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alu, Kenya	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Fort Worth, TX 76244	
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions) 5 Star Real Estate
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Grayson	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Richland Hills, TX 76118	
Principal occupation / Job title (See Instructions) IT Business Analyst		Employer (See Instructions) Beazer Homes USA
Date 07/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andreasen, Lynn	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Watauga, TX 76148	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/35 Rpt: 5/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 11/03/2025	<b>5</b> Full name of contributor Andreasen, Lynn	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Watauga, TX 76148	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/15/2025	Full name of contributor Arenz, John	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  North Richmond Hills, TX 76182	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/15/2025	Full name of contributor Arenz, Kimberly	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  North Richmond Hills, TX 76182	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/09/2025	Full name of contributor Ashby, James	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code  Euless, TX 76039	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/07/2025	Full name of contributor Ayala, Derek	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76180	
Principal occupation / Job title (See Instructions) Campaign Manager		Employer (See Instructions) Duncan For Senate

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/35 Rpt: 6/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 11/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Steven	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Corsicana, TX 75109	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Tammy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Corsicana, TX 75109	
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#: _____) Bales, Eric	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76180	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bales, Eric	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76180	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barr, Alan	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Austin, TX 78731	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/35 Rpt: 7/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 12/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckmeyer, John	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>6</b> Contributor address; City; State; Zip Code  Lorraine, TX 79532	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 10/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beierschmitt, Pete	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Watauga, TX 76148	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Tracy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76180	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) HMA
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergh, Steve	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berry, Jeffrey	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/35 Rpt: 8/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 11/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blake, Laura	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Watauga, TX 76148	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blount, Jennifer	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  Ft Worth, TX 76109	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boone, Nathalie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	
Principal occupation / Job title (See Instructions) Manager, owner		Employer (See Instructions) Boone Services
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Robert	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Tyler, TX 75701	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burckle, Robert	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Southlake, TX 76092	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/35 Rpt: 9/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 09/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burkey, Rachel	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Norman, OK 73072	
<b>8</b> Principal occupation / Job title (See Instructions) Office manager		<b>9</b> Employer (See Instructions) Abolitionists Rising
<b>Date</b> 08/17/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, Ronald	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Las Vegas, NV 89128	
<b>Principal occupation / Job title (See Instructions)</b> None		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 11/18/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, Ronald	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Las Vegas, NV 89128	
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b> retired
<b>Date</b> 10/08/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Cain, Briscoe	<b>Amount of Contribution (\$)</b> \$1,001.00
	<b>Contributor address; City; State; Zip Code</b>  Deer Park, TX 77536	
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b> retired
<b>Date</b> 10/03/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Cameron, David	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Frisco, TX 75034	
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b> retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/35 Rpt: 10/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 09/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Matthew	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  North Richland Hills, TX 76180	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campon, Marcelo	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Grapevine, TX 76051	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cappelletti, Dana	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Mansfield, TX 76063	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carden, Darrell	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code  Haltom City, TX 76117	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castilla, Cindi	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Dallas, TX 75229	
Principal occupation / Job title (See Instructions) VOLUNTEER State Leader		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/35 Rpt: 11/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 08/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Elizabeth	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Ruth	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Bulverde, TX 78163	
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#: _____) Chauvin, Leah	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Watauga, TX 76148	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Tamara	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Granbury, TX 76049	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conservative Republicans of Texas PAC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Houston, TX 77234	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/35 Rpt: 12/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, David	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76148	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, David	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Watauga, TX 76148	
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#: _____) Coulson, Sylvia	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Waxahachie, TX 75165	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coulson, sylvia	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Waxahachie, TX 75165	
Principal occupation / Job title (See Instructions) Dietitian		Employer (See Instructions) Head Start
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crouch, Chandler	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Fort Worth, TX 76137	
Principal occupation / Job title (See Instructions) real estate broker		Employer (See Instructions) Chandler Crouch Realtors

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1: Sch: 10/35 Rpt: 13/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)			<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 12/27/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Ruyter, Matt	<b>7</b> Amount of Contribution (\$) \$200.00	
	<b>6</b> Contributor address; City; State; Zip Code  Katy, TX 77493		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) SABIC	
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devine, Gaylyn	Amount of Contribution (\$) \$50.00	
	Contributor address; City; State; Zip Code  Pearland, TX 77581		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) DeVine Promotions	
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dhuru, Sarod	Amount of Contribution (\$) \$50.00	
	Contributor address; City; State; Zip Code  Fort Worth, TX 76108		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Bnsf railway	
Date 10/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorsey, Matt	Amount of Contribution (\$) \$100.00	
	Contributor address; City; State; Zip Code  Richardson, TX 75080		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 10/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Downing, Kay	Amount of Contribution (\$) \$50.00	
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76182-8624		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/35 Rpt: 14/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 08/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunbar, April	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76137	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) retired
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunbar, April	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer, Jim	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Fort Davis, TX 79734	
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) Self
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Featherston, Sonya	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Austin, TX 78733	
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feirtag, Beverly	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Fort Worth, TX 76137	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/35 Rpt: 15/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feirtag, Beverly	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76137	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feirtag, Beverly	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Fort Worth, TX 76137	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fite, Ralph	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Houston, TX 77042	
Principal occupation / Job title (See Instructions) SVP-Finance		Employer (See Instructions) Welcome Group, LLC
Date 12/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Joann	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Flint, TX 75762	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Michelle	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/35 Rpt: 16/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 11/06/2025	<b>5</b> Full name of contributor Fountain, Susan	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75238	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 11/05/2025	Full name of contributor Fox, James	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/03/2025	Full name of contributor Gajewski, Misty	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Rockwall, TX 75032	
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker
Date 07/07/2025	Full name of contributor Gardner, Linda	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code  Grapevine, TX 76051	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/15/2025	Full name of contributor Gonzales, Ismael	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76180	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/35 Rpt: 17/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 11/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Ismael	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  North Richland Hills, TX 76180	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Natalie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Fort Worth, TX 76137	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gould, Bernice	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code  Fort Worth, TX 76244	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haas, J.R.	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Tomball, TX 77375	
Principal occupation / Job title (See Instructions) Corporate I.T.		Employer (See Instructions) Self
Date 10/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haltom, Lynda	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Colleyville, TX 76034	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/35 Rpt: 18/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 12/13/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammond, Tom	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Seneca, SC 29678	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendricks, Stephen	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Keller, TX 76248	
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#: _____) Hestilow, Terry	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Fort Worth, TX 76137	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoyer, Catherine	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Waxahachie, TX 75165	
Principal occupation / Job title (See Instructions) Chief of Staff		Employer (See Instructions) Texas House of Representatives
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchison, Michael	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/35 Rpt: 19/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 11/22/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Mike	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Lufkin, TX 75904	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 11/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, Deana	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Dallas, TX 75254	
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#: _____) Jr, John	Amount of Contribution (\$) \$10.73
	Contributor address; City; State; Zip Code  Watauga, TX 76148	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Justice for Texas Victims PAC	Amount of Contribution (\$) \$25,000.00
	Contributor address; City; State; Zip Code  Dallas, TX 75201	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Chuck	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Haslet, TX 76052	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/35 Rpt: 20/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 08/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kihara, Steve	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Randy	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Euless, TX 76039	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirkpatrick, Steve	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Tucson, AZ 85717	
Principal occupation / Job title (See Instructions) Lender		Employer (See Instructions) Shamrock Financial LLC
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kittle, Kris	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  Fort Worth, TX 76244	
Principal occupation / Job title (See Instructions) Adjunct Professor		Employer (See Instructions) DBU
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kolean, Charles	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Dallas, TX 75201	
Principal occupation / Job title (See Instructions) Political Consultant		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/35 Rpt: 21/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 12/13/2025	<b>5</b> Full name of contributor Kovalcik, Michael	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Huntsville, TX 77320	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 11/17/2025	Full name of contributor Kubin, Earl	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Atlanta, TX 75551	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/03/2025	Full name of contributor Levitt, Charlie	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Haltom City, TX 76137	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/03/2025	Full name of contributor Liu, Chengdong	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Trophy, TX 76262	
Principal occupation / Job title (See Instructions) Business Exec		Employer (See Instructions) BNSF Railway
Date 11/15/2025	Full name of contributor Lopez, Ellen	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76180	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

## MONETARY POLITICAL CONTRIBUTIONS

## **SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/35 Rpt: 22/70
<b>2</b> FILER NAME  Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 07/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)  Lowe, Karen  <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75229	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)  Mgr		<b>9</b> Employer (See Instructions)  ORG
<b>Date</b> 12/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)  Lowe, Paul  <b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75229	<b>Amount of Contribution (\$)</b>  \$100.00
Principal occupation / Job title (See Instructions)  INSURANCE		Employer (See Instructions)  TriMark3 Ins.
<b>Date</b> 10/09/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)  Lowe, Paul  <b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75229	<b>Amount of Contribution (\$)</b>  \$250.00
Principal occupation / Job title (See Instructions)  INSURANCE		Employer (See Instructions)  TriMark3 Ins.
<b>Date</b> 12/29/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)  Lunski, Denise  <b>Contributor address; City; State; Zip Code</b>  Arlington, TX 76001	<b>Amount of Contribution (\$)</b>  \$25.00
Principal occupation / Job title (See Instructions)  retired		Employer (See Instructions)  retired
<b>Date</b> 11/05/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)  Maddux, Mary  <b>Contributor address; City; State; Zip Code</b>  Euless, TX 76040	<b>Amount of Contribution (\$)</b>  \$25.00
Principal occupation / Job title (See Instructions)  Educator		Employer (See Instructions)  HEB ISD

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/35 Rpt: 23/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 10/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marleah, Marleah ..... <b>6</b> Contributor address; City; State; Zip Code  North Richland Hills , TX 76180	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>8</b> Principal occupation / Job title (See Instructions) retired	<b>9</b> Employer (See Instructions) retired
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcguire, Kelly ..... Contributor address; City; State; Zip Code  Grapevine, TX 76051	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Director of Finance	Employer (See Instructions) Fidelity Investments
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meeker, Brittany ..... Contributor address; City; State; Zip Code  Westfield, IN 46074	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) homemaker	Employer (See Instructions) homemaker
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meisetschleager, Kathy ..... Contributor address; City; State; Zip Code  Corsicana, TX 75109	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 10/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendoza, Ami ..... Contributor address; City; State; Zip Code  Georgetown, TX 78628	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) homemaker	Employer (See Instructions) homemaker

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/35 Rpt: 24/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 07/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Diana	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Diana	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Julia	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	
Principal occupation / Job title (See Instructions) Design Consultant		Employer (See Instructions) Express Flooring
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, John	Amount of Contribution (\$) \$10.73
	Contributor address; City; State; Zip Code  Watauga, TX 76148	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, John	Amount of Contribution (\$) \$10.73
	Contributor address; City; State; Zip Code  Watauga, TX 76148	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

## MONETARY POLITICAL CONTRIBUTIONS

## **SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/35 Rpt: 25/70
<b>2</b> FILER NAME  Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 10/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)  Mitchell, John	<b>7</b> Amount of Contribution (\$)  \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Watauga, TX 76148	
<b>8</b> Principal occupation / Job title (See Instructions)  retired		<b>9</b> Employer (See Instructions)  retired
<b>Date</b> 12/20/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)  Moorhead, Jeanette	<b>Amount of Contribution (\$)</b>  \$10.00
	Contributor address; City; State; Zip Code  Haltom City, TX 76117	
Principal occupation / Job title (See Instructions)  Self		Employer (See Instructions)  Self
<b>Date</b> 10/14/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)  Mueller, Jeffrey	<b>Amount of Contribution (\$)</b>  \$100.00
	Contributor address; City; State; Zip Code  Keller, TX 76244	
Principal occupation / Job title (See Instructions)  retired		Employer (See Instructions)  retired
<b>Date</b> 10/30/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)  Nakamura, Tammy	<b>Amount of Contribution (\$)</b>  \$250.00
	Contributor address; City; State; Zip Code  Colleyville, TX 76034	
Principal occupation / Job title (See Instructions)  President		Employer (See Instructions)  Natico Management
<b>Date</b> 12/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)  Payne, John	<b>Amount of Contribution (\$)</b>  \$100.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76182-8428	
Principal occupation / Job title (See Instructions)  retired		Employer (See Instructions)  retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/35 Rpt: 26/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 08/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Bradley	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Liberty Hill, TX 78642	
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Pierce Law Firm
<b>Date</b> 10/23/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Popp, Jay	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Arlington, TX 76012	
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b> retired
<b>Date</b> 12/30/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Priefert, Bill	<b>Amount of Contribution (\$)</b> \$1,000.00
	<b>Contributor address; City; State; Zip Code</b>  Mount Pleasant, TX 75455	
<b>Principal occupation / Job title (See Instructions)</b> CEO		<b>Employer (See Instructions)</b> Priefert
<b>Date</b> 07/29/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Procter, Joseph	<b>Amount of Contribution (\$)</b> \$150.00
	<b>Contributor address; City; State; Zip Code</b>  North Richland Hills, TX 76182	
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b> retired
<b>Date</b> 10/30/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Procter, Joseph	<b>Amount of Contribution (\$)</b> \$150.00
	<b>Contributor address; City; State; Zip Code</b>  North Richland Hills, TX 76182	
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b> retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/35 Rpt: 27/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 11/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raine, Tim	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>6</b> Contributor address; City; State; Zip Code  Colleyville, TX 76034	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ralph, Eugene	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Dallas, TX 75217	
Principal occupation / Job title (See Instructions) Driver		Employer (See Instructions) The Haven TX
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richter, Jennifer	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  austin, TX 78738	
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Mike	Amount of Contribution (\$) \$74.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	
Principal occupation / Job title (See Instructions) Systems Engineer		Employer (See Instructions) VytIOne
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roehrs, Valerie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Argyle, TX 76226	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/35 Rpt: 28/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 12/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rydin, Michael	<b>7</b> Amount of Contribution (\$) \$25,000.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77061	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saulsbury, Charles	Amount of Contribution (\$) \$8,500.00
	Contributor address; City; State; Zip Code  Odessa, TX 79768	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Saulsbury Industries
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saulsbury, Charles	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code  Odessa, TX 79768	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Saulsbury Industries
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saulsbury, Jr, Charles	Amount of Contribution (\$) \$4,125.00
	Contributor address; City; State; Zip Code  Odessa, TX 79768	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Saulsbury Industries
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saulsbury, Mark	Amount of Contribution (\$) \$4,125.00
	Contributor address; City; State; Zip Code  Odessa, TX 79768	
Principal occupation / Job title (See Instructions) Dir of Public Affairs		Employer (See Instructions) Saulsbury Industries

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/35 Rpt: 29/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 12/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saulsbury, Matthew	<b>7</b> Amount of Contribution (\$) \$4,125.00
	<b>6</b> Contributor address; City; State; Zip Code  Odessa, TX 79768	
<b>8</b> Principal occupation / Job title (See Instructions) VP		<b>9</b> Employer (See Instructions) Saulsbury Industries
<b>Date</b> 08/16/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Scruggs, Christine	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Pearland, TX 77581	
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b> retired
<b>Date</b> 12/02/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Seaton, Ali	<b>Amount of Contribution (\$)</b> \$5,000.00
	<b>Contributor address; City; State; Zip Code</b>  College Station, TX 77845	
<b>Principal occupation / Job title (See Instructions)</b> homemaker		<b>Employer (See Instructions)</b> homemaker
<b>Date</b> 10/30/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sedlemeyer, Andrea	<b>Amount of Contribution (\$)</b> \$40.00
	<b>Contributor address; City; State; Zip Code</b>  Keller, TX 76248	
<b>Principal occupation / Job title (See Instructions)</b> Attorney		<b>Employer (See Instructions)</b> M Law Firm
<b>Date</b> 12/30/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Severin, Victor	<b>Amount of Contribution (\$)</b> \$500.00
	<b>Contributor address; City; State; Zip Code</b>  Ramona, OK 74061	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/35 Rpt: 30/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 10/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sgea, Cindy	<b>7</b> Amount of Contribution (\$) \$200.00
	<b>6</b> Contributor address; City; State; Zip Code  Coppell, TX 75019	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 12/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silk, Jonny	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Fort Worth, TX 76244	
Principal occupation / Job title (See Instructions) Maintenance Manager		Employer (See Instructions) Jonny Silk
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sims, Dj	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Fort Worth, TX 76131	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sims, Dj	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Fort Worth, TX 76131	
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#: _____) Smith, N	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/35 Rpt: 31/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 12/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snider, Marilyn	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Point Blank, TX 77364	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solis, Andres	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	
Principal occupation / Job title (See Instructions) Auto body tech		Employer (See Instructions) Jeffreys Automotive
Date 10/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solis, Louise	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Kim	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Granbury, TX 76048	
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Kim	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Granbury, TX 76048	
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/35 Rpt: 32/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Kim	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Granbury, TX 76048	
<b>8</b> Principal occupation / Job title (See Instructions) homemaker		<b>9</b> Employer (See Instructions) homemaker
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Kim	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Granbury, TX 76048	
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Kim	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Granbury, TX 76048	
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Kim	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Granbury, TX 76048	
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steinle, Gaylon	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Fort Worth, TX 76137	
Principal occupation / Job title (See Instructions) Woodworking		Employer (See Instructions) Paramount Millwork

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/35 Rpt: 33/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Story, Jennifer	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>6</b> Contributor address; City; State; Zip Code  Southlake, TX 76092	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Syslo, Joseph	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76182-7045	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taliaferro, Aaron	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Vienna, VA 22180	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tamul, Mark	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Grapevine, TX 76051	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans United for a Conservative Majority PAC	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code  Victoria, TX 77901	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/35 Rpt: 34/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 12/20/2025	<b>5</b> Full name of contributor Thomas, Ben	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 12/30/2025	Full name of contributor Thomas, Richard	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Milton, GA 30004	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/20/2025	Full name of contributor Thomasch, Nancy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76182-7826	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/30/2025	Full name of contributor Thompson, Susan	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/26/2025	Full name of contributor Thompson, Susan	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/35 Rpt: 35/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 08/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tiner, Claire	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76137	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tomlin, Jesse	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  North Richland Hills, TX 76180	
Principal occupation / Job title (See Instructions) Cyber Risk Analyst		Employer (See Instructions) Citi
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tousignant, Marleah	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  N Richlnd Hls, TX 76180	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Danielle	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Watauga, TX 76148	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) DOASECO
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tuter, Patrick	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Princeton, TX 75407	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/35 Rpt: 36/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyler, Janice	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Arlington, TX 76017	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ventura, Lisa	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Arlington, TX 76012	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wakin, Jackie	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Frisco, TX 75036-8842	
Principal occupation / Job title (See Instructions) Professional Organizer		Employer (See Instructions) Self
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wakin, Jackie	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Frisco, TX 75036	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Joseph	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Grapevine, TX 76099	
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/35 Rpt: 37/70
<b>2</b> FILER NAME Lowe, David O. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00085680
<b>4</b> Date 10/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wenske, John ..... <b>6</b> Contributor address; City; State; Zip Code  Moulton, TX 77975	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>8</b> Principal occupation / Job title (See Instructions) retired	<b>9</b> Employer (See Instructions) retired
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Widmann, Carole ..... Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	Amount of Contribution (\$) \$25.00
	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#: _____) Wilde, John ..... Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 12/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilde, John ..... Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilde, John ..... Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>		<p><b>1</b> Total pages Schedule A1: Sch: 35/35 Rpt: 38/70</p>
<p><b>2</b> FILER NAME Lowe, David O. (The Honorable)</p>		<p><b>3</b> Filer ID (Ethics Commission Filers) 00085680</p>
<p><b>4</b> Date 08/07/2025</p>	<p><b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiseman, Karen</p> <p><b>6</b> Contributor address; City; State; Zip Code ..... Fort Worth, TX 76109</p>	<p><b>7</b> Amount of Contribution (\$) \$100.00</p>
<p><b>8</b> Principal occupation / Job title (See Instructions) retired</p>		<p><b>9</b> Employer (See Instructions) retired</p>
<p>Date 10/24/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wylie, Dave</p> <p>Contributor address; City; State; Zip Code ..... Argyle, TX 76226-5802</p>	<p>Amount of Contribution (\$) \$100.00</p>
<p>Principal occupation / Job title (See Instructions) retired</p>		<p>Employer (See Instructions) retired</p>
<p>Date 12/09/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zugg, Amelia</p> <p>Contributor address; City; State; Zip Code ..... Odessa, TX 79768</p>	<p>Amount of Contribution (\$) \$4,125.00</p>
<p>Principal occupation / Job title (See Instructions) Community Relations Mgr</p>		<p>Employer (See Instructions) Saulsbury Industries</p>

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/32 Rpt: 39/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 07/22/2025	5 Payee name AT&T	
6 Amount (\$) \$144.21	7 Payee address; City; State; Zip Code PO Box 5014  Carol Stream, IL 60197	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telephone
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/22/2025	Payee name AT&T	
Amount (\$) \$144.21	Payee address; City; State; Zip Code PO Box 5014  Carol Stream, IL 60197	
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 Telephones
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/22/2025	Payee name AT&T	
Amount (\$) \$144.21	Payee address; City; State; Zip Code PO Box 5014  Carol Stream, IL 60197	
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 Telephones
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  
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.**

1 Total pages Schedule F1: Sch: 2/32 Rpt: 40/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 12/22/2025	5 Payee name AT&T	
6 Amount (\$) \$144.38	7 Payee address; City; State; Zip Code PO Box 5014  Carol Stream, IL 60197	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telephones
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
Date 12/10/2025	Payee name AT&T	
Amount (\$) \$449.21	Payee address; City; State; Zip Code PO Box 5014  Carol Stream, IL 60197	
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 Telephones
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
Date 11/24/2025	Payee name AT&T	
Amount (\$) \$146.44	Payee address; City; State; Zip Code PO Box 5014  Carol Stream, IL 60197	
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 Telephones
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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: 3/32 Rpt: 41/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 11/03/2025	5 Payee name Abolish Abortion Texas PAC	
6 Amount (\$) \$260.25	7 Payee address; City; PO Box 402  Liberty Hill, TX 78642	
8 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
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/10/2025	Payee name Amazon	
Amount (\$) \$28.13	Payee address; City; 410 Terry Ave N  Seattle, WA 98109	
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 Office Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name Amazon	
Amount (\$) \$75.76	Payee address; City; 410 Terry Ave N  Seattle, WA 98109	
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 Office Supplies
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: 4/32 Rpt: 42/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 10/14/2025	5 Payee name Amazon	
6 Amount (\$) \$13.62	7 Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/15/2025	Payee name Amazon	
Amount (\$) \$272.78	Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109	
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 Office Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/15/2025	Payee name Amazon	
Amount (\$) \$627.84	Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109	
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 Office Supplies
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: 5/32 Rpt: 43/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 10/27/2025	5 Payee name Amazon	
6 Amount (\$) \$239.06	7 Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
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 (\$) \$785.99	Payee address; City; State; Zip Code 1340 Poydras St Ste 1770 New Orleans, LA 70112	
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 CC Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/10/2025	Payee name Ashby, James	
Amount (\$) \$700.00	Payee address; City; State; Zip Code  REDACTED PER 254.0401, ELEC. CODE  Euless, TX 76039	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event A/V
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/32 Rpt: 44/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 07/17/2025	5 Payee name Blueground US Inc.	
6 Amount (\$) \$3,436.66	7 Payee address; City; 101 5th Ave Fl 7  New York, NY 10003	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Rent	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 07/21/2025	Payee name Blueground US Inc.	
Amount (\$) \$37.16	Payee address; City; 101 5th Ave Fl 7  New York, NY 10003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Parking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 07/07/2025	Payee name Bluestone Creative	
Amount (\$) \$1,275.00	Payee address; City; 101 5th Ave Fl 7  New York, NY 10003	
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 Graphic Design and Digital Communication Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/32 Rpt: 45/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 08/07/2025	5 Payee name Bluestone Creative	
6 Amount (\$) \$1,775.00	7 Payee address; City; 101 5th Ave Fl 7  New York, NY 10003	
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 Graphic Design and Digital Communication Consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/07/2025	Payee name Bluestone Creative	
Amount (\$) \$1,275.00	Payee address; City; 101 5th Ave Fl 7  New York, NY 10003	
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 Graphic Design and Digital Communication Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/17/2025	Payee name Bluestone Creative	
Amount (\$) \$875.00	Payee address; City; 101 5th Ave Fl 7  New York, NY 10003	
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 Graphic Design and Digital Communication Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/32 Rpt: 46/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680	
4 Date 12/11/2025	5 Payee name Bluestone Creative		
6 Amount (\$) \$875.00	7 Payee address; City; 101 5th Ave Fl 7  New York, NY 10003		
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 Graphic Design and Digital Communication Consulting	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 09/25/2025	Payee name Brisco Cain for Congress		
Amount (\$) \$1,000.00	Payee address; City; PO Box 7  Deer Park, TX 77536		
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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 08/22/2025	Payee name CWS Research LLC		
Amount (\$) \$9,000.00	Payee address; City; 8313 Mimi Ln  Austin, TX 78724		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/32 Rpt: 47/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680	
4 Date 12/12/2025	5 Payee name CWS Research LLC		
6 Amount (\$) \$6,025.00	7 Payee address; City; 8313 Mimi Ln  Austin, TX 78724	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/12/2025	Payee name CWS Research LLC		
Amount (\$) \$3,000.00	Payee address; City; 8313 Mimi Ln  Austin, TX 78724	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 Voter Contact Software	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/12/2025	Payee name CWS Research LLC		
Amount (\$) \$15,968.00	Payee address; City; 8313 Mimi Ln  Austin, TX 78724	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 Direct Mail	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/32 Rpt: 48/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680	
4 Date 12/12/2025	5 Payee name CWS Research LLC		
6 Amount (\$) \$551.76	7 Payee address; City; 8313 Mimi Ln  Austin, TX 78724	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SMS Voter Contact	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/21/2025	Payee name Canva		
Amount (\$) \$15.00	Payee address; City; 3212 E. Cesar Chavez Street Building 1, Suite 1300 Austin, TX 78702	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 Subscription	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/21/2025	Payee name Canva		
Amount (\$) \$15.00	Payee address; City; 3212 E. Cesar Chavez Street Building 1, Suite 1300 Austin, TX 78702	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 Subscription	
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: 11/32 Rpt: 49/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 07/11/2025	5 Payee name Chandler, Cook, Fitzgerald PLLC	
6 Amount (\$) \$1,350.00	7 Payee address; City; 1203 Trinity St  Liberty St, TX 77575	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Legal Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name City of Watauga	
Amount (\$) \$625.00	Payee address; City; P.O. Box 850  Watauga, TX 76148	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Venue Fee	(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 Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/07/2025	Payee name Constant Contact	
Amount (\$) \$234.52	Payee address; City; 890 Winter St Ste 300  Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Email Sending 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 Email Sending 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: 12/32 Rpt: 50/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 08/07/2025	5 Payee name Constant Contact	
6 Amount (\$) \$234.52	7 Payee address; City; 890 Winter St Ste 300  Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Sending Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/08/2025	Payee name Constant Contact	
Amount (\$) \$234.52	Payee address; City; 890 Winter St Ste 300  Waltham, MA 02451	
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 Subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/07/2025	Payee name Constant Contact	
Amount (\$) \$234.52	Payee address; City; 890 Winter St Ste 300  Waltham, MA 02451	
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 Subscription
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: 13/32 Rpt: 51/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 12/08/2025	5 Payee name Constant Contact	
6 Amount (\$) \$234.52	7 Payee address; City; 890 Winter St Ste 300  Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Subscription
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/07/2025	Payee name Constant Contact	
Amount (\$) \$234.52	Payee address; City; 890 Winter St Ste 300  Waltham, MA 02451	
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 Subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/07/2025	Payee name Facebook	
Amount (\$) \$9.00	Payee address; City; 5 Hacker Way  Menlo Park, CA 74029	
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 Digital Advertising
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: 14/32 Rpt: 52/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 07/18/2025	5 Payee name Facebook	
6 Amount (\$) \$50.00	7 Payee address; City; 5 Hacker Way  Menlo Park, CA 74029	
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 Digital Advertising
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/21/2025	Payee name Facebook	
Amount (\$) \$115.46	Payee address; City; 5 Hacker Way  Menlo Park, CA 74029	
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 Digital Advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/20/2025	Payee name Facebook	
Amount (\$) \$39.46	Payee address; City; 5 Hacker Way  Menlo Park, CA 74029	
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 Digital Advertising
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: 15/32 Rpt: 53/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 10/20/2025	5 Payee name Facebook	
6 Amount (\$) \$228.27	7 Payee address; City; 5 Hacker Way  Menlo Park, CA 74029	
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 Digital Advertising
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	Office sought Office held
Date 10/21/2025	Payee name Facebook	
Amount (\$) \$192.11	Payee address; City; 5 Hacker Way  Menlo Park, CA 74029	
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 Digital Advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	Office sought Office held
Date 10/22/2025	Payee name Facebook	
Amount (\$) \$526.68	Payee address; City; 5 Hacker Way  Menlo Park, CA 74029	
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 Digital Advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	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: 16/32 Rpt: 54/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 12/04/2025	5 Payee name Facebook	
6 Amount (\$) \$12.39	7 Payee address; City; 5 Hacker Way  Menlo Park, CA 74029	
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 Digital Advertising
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/24/2025	Payee name Facebook	
Amount (\$) \$97.00	Payee address; City; 5 Hacker Way  Menlo Park, CA 74029	
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 Digital Advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/21/2025	Payee name Facebook	
Amount (\$) \$97.00	Payee address; City; 5 Hacker Way  Menlo Park, CA 74029	
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 Digital Advertising
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: 17/32 Rpt: 55/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 11/20/2025	5 Payee name Facebook	
6 Amount (\$) \$32.66	7 Payee address; City; 5 Hacker Way  Menlo Park, CA 74029	
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 Digital Advertising
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	Office sought Office held
Date 11/17/2025	Payee name Facebook	
Amount (\$) \$246.00	Payee address; City; 5 Hacker Way  Menlo Park, CA 74029	
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 Digital Advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	Office sought Office held
Date 11/19/2025	Payee name Facebook	
Amount (\$) \$105.00	Payee address; City; 5 Hacker Way  Menlo Park, CA 74029	
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 Digital Advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Facebook	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: 18/32 Rpt: 56/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 11/20/2025	5 Payee name Facebook	
6 Amount (\$) \$61.00	7 Payee address; City; 5 Hacker Way  Menlo Park, CA 74029	
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 Digital Advertising
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/23/2025	Payee name Fort Worth Chamber of Commerce	
Amount (\$) \$105.00	Payee address; City; 500 W. 7th Street, Suite 100  Fort Worth, TX 76102	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/31/2025	Payee name Gilmore, Robert	
Amount (\$) \$260.00	Payee address; City; State; Zip Code  REDACTED PER 254.0401, ELEC. CODE  Hurt, TX 76054	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Security
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: 19/32 Rpt: 57/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680	
4 Date 11/05/2025	5 Payee name GoDaddy		
6 Amount (\$) \$1,390.19	7 Payee address; City; State; Zip Code 100 S. Mill Ave, Suite 1600  Tempe, AZ 85281		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Domain Services	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 12/15/2025	Payee name Hill, Morgan		
Amount (\$) \$250.00	Payee address; City; State; Zip Code  REDACTED PER 254.0401, ELEC. CODE  La Quinta, CA 92253		
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 Campaign contract labor	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 07/28/2025	Payee name Legislative Solutions		
Amount (\$) \$680.00	Payee address; City; State; Zip Code 807 Brazos St #714  Austin, TX 78701		
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 Political Consulting	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held 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: 20/32 Rpt: 58/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 10/03/2025	5 Payee name Liz Curtis & Associates	
6 Amount (\$) \$700.00	7 Payee address; City; 5 Halifax Ct  Marlton, NJ 08053	
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 Compliance Consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/20/2025	Payee name Lowes	
Amount (\$) \$906.05	Payee address; City; 6301 Jefferson St NE  Albuquerque, NM 87109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Sign Materials	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Materials
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/03/2025	Payee name Maddskillz Med	
Amount (\$) \$350.00	Payee address; City; 8376 Davis Blvd  Suite 267  North Richland Hills, TX 76182	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Office Rent
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: 21/32 Rpt: 59/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 07/15/2025	5 Payee name Northeast Tarrant	
6 Amount (\$) \$35.00	7 Payee address; City; 5001 Denton Highway  Haltom City, TX 76117	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Ticket
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Northeast Tarrant	Office sought Office held
Date 07/29/2025	Payee name Northeast Tarrant	
Amount (\$) \$22.50	Payee address; City; 5001 Denton Highway  Haltom City, TX 76117	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Northeast Tarrant	Office sought Office held
Date 08/04/2025	Payee name Northeast Tarrant	
Amount (\$) \$500.00	Payee address; City; 5001 Denton Highway  Haltom City, TX 76117	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Dues	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dues
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Northeast Tarrant	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: 22/32 Rpt: 60/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 08/19/2025	5 Payee name Northeast Tarrant	
6 Amount (\$) \$41.00	7 Payee address; City; 5001 Denton Highway  Haltom City, TX 76117	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/27/2025	Payee name Office Depot	
Amount (\$) \$424.55	Payee address; City; 9131 Boulevard 26  North Richland Hills, TX 76180	
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 Office Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/08/2025	Payee name Office Depot	
Amount (\$) \$629.16	Payee address; City; 9131 Boulevard 26  North Richland Hills, TX 76180	
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 Office Supplies
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: 23/32 Rpt: 61/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 10/28/2025	5 Payee name Office Depot	
6 Amount (\$) \$61.37	7 Payee address; City; State; Zip Code 9131 Boulevard 26  North Richland Hills, TX 76180	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/30/2025	Payee name Office Depot	
Amount (\$) \$21.96	Payee address; City; State; Zip Code 9131 Boulevard 26  North Richland Hills, TX 76180	
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 Office Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/23/2025	Payee name Planer, Lauren	
Amount (\$) \$2,250.00	Payee address; City; State; Zip Code 1929 Shady Oaks Circle  Glen Rose, TX 76043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting
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: 24/32 Rpt: 62/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 11/21/2025	5 Payee name Red Brand Media	
6 Amount (\$) \$5,260.00	7 Payee address; City; 3816 Bay Ct  Fort Worth, TX 76179	
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 Signs
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/24/2025	Payee name Rosa's Cafe	
Amount (\$) \$2,465.94	Payee address; City; 5000 Overton Ridge Blvd  Fort Worth, TX 76132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Food & Beverage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/11/2025	Payee name Scheef & Stone	
Amount (\$) \$5,000.00	Payee address; City; 500 N Akard St #2700  Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Legal Services
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: 25/32 Rpt: 63/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 12/12/2025	5 Payee name Scheef & Stone	
6 Amount (\$) \$7,946.23	7 Payee address; City; 500 N Akard St #2700  Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Legal Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/19/2025	Payee name SignsOnTheCheap	
Amount (\$) \$1,718.58	Payee address; City; 11525-B Stonehollow Dr # 220  Austin, TX 78758	
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 Signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/15/2025	Payee name Smith, Wyatt	
Amount (\$) \$250.00	Payee address; City; Helotes, TX 78023  <b>REDACTED PER 254.0401, ELEC. CODE</b>	
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 Campaign Contract labor
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: 26/32 Rpt: 64/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 11/10/2025	5 Payee name Tarrant County GOP	
6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 201 N Rupert St Suite 117  Fort Worth, TX 76107	
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 Ballot Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/10/2025	Payee name Trimm, James	
Amount (\$) \$12,000.00	Payee address; City; State; Zip Code  REDACTED PER 254.0401, ELEC. CODE  North Richmond Hills, TX 76182	
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 Office sought	Office held
Date 07/02/2025	Payee name USPS	
Amount (\$) \$262.80	Payee address; City; State; Zip Code 823 Congress Ave Ste 150  Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Postage	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage
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: 27/32 Rpt: 65/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 09/24/2025	5 Payee name Urban Fire House	
6 Amount (\$) \$1,590.05	7 Payee address; City; 8300 Starnes Rd  North Richland Hills, TX 76182	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Venue Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/01/2025	Payee name Vista Print	
Amount (\$) \$79.13	Payee address; City; 275 Wyman St  Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/18/2025	Payee name Vista Print	
Amount (\$) \$405.92	Payee address; City; 275 Wyman St  Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Printing
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: 28/32 Rpt: 66/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 09/22/2025	5 Payee name Vista Print	
6 Amount (\$) \$375.40	7 Payee address; City; 275 Wyman St  Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/10/2025	Payee name Vista Print	
Amount (\$) \$653.80	Payee address; City; 275 Wyman St  Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name Vista Print	
Amount (\$) \$346.37	Payee address; City; 275 Wyman St  Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Printing
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: 29/32 Rpt: 67/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 10/02/2025	5 Payee name Vista Print	
6 Amount (\$) \$571.52	7 Payee address; City; 275 Wyman St  Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/27/2025	Payee name Walmart	
Amount (\$) \$215.48	Payee address; City; 608 SW 8th St  Bentonville, AR 72712	
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 Office Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/10/2025	Payee name Wells Fargo	
Amount (\$) \$10.00	Payee address; City; 6964 BOULEVARD 26  North Richland Hills, TX 76180	
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 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: 30/32 Rpt: 68/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680	
4 Date 11/10/2025	5 Payee name Wells Fargo		
6 Amount (\$) \$10.00	7 Payee address; City; State; Zip Code 6964 BOULEVARD 26  North Richland Hills, TX 76180		
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 Bank fees	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 11/10/2025	Payee name Wells Fargo		
Amount (\$) \$10.00	Payee address; City; State; Zip Code 6964 BOULEVARD 26  North Richland Hills, TX 76180		
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 Bank Fees	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 07/03/2025	Payee name Wix.com		
Amount (\$) \$217.31	Payee address; City; State; Zip Code 500 Terry A Francois Boulevard Sixth Floor San Francisco, CA 94158		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Website Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Services	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held 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: 31/32 Rpt: 69/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 09/15/2025	5 Payee name Wix.com	
6 Amount (\$) \$545.58	7 Payee address; City; State; Zip Code 500 Terry A Francois Boulevard Sixth Floor San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/16/2025	Payee name Wix.com	
Amount (\$) \$246.81	Payee address; City; State; Zip Code 500 Terry A Francois Boulevard Sixth Floor San Francisco, CA 94158	
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 Website Services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/08/2025	Payee name Wix.com	
Amount (\$) \$154.45	Payee address; City; State; Zip Code 500 Terry A Francois Boulevard Sixth Floor San Francisco, CA 94158	
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 Website Services
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: 32/32 Rpt: 70/70	2 FILER NAME Lowe, David O. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085680
4 Date 07/11/2025	5 Payee name X Corp	
6 Amount (\$) \$84.00	7 Payee address; City; 865 FM 1209 Building 2 Bastrop, TX 78602	
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 Digital Advertising
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/17/2025	Payee name Zoom	
Amount (\$) \$170.62	Payee address; City; 55 Almaden Blvd #600  San Jose, CA 95113	
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 Subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held