

# 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<br>(Ethics Commission Filers)<br>00080325   |                     | 2 Total pages filed:<br>47   |        |
| 3 CANDIDATE /<br>OFFICEHOLDER<br>NAME   | MS / MRS / MR<br>The Honorable |  | FIRST<br>Valoree H. | MI   |        |
|   | NICKNAME                       |  | LAST<br>Swanson     | SUFFIX   |        |
| 4 CANDIDATE /<br>OFFICEHOLDER<br>MAILING<br>ADDRESS<br><br><input type="checkbox"/> Change of Address |                                | ADDRESS / PO BOX; APT / SUITE #; CITY;<br>23020 Ammick Ct.<br><br>Spring, TX 77389   |                     | ZIP CODE   |        |
|   |                                | OFFICE USE ONLY  |                     |  |        |
|   |                                | Date Received<br>ELECTRONICALLY FILED<br>01/15/2026  |                     |  |        |
|   |                                | Date Hand-delivered or Date Postmarked   |                     |  |        |
| 5 CAMPAIGN<br>TREASURER<br>NAME   |                                | MS / MRS / MR<br>Mrs.  |                     | FIRST<br>Norma B.  | MI     |
|   |                                | NICKNAME   |                     | LAST<br>Jeter  | SUFFIX |
| 6 CAMPAIGN<br>TREASURER<br>ADDRESS<br><br>(Residence or Business)                                     |                                | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>23618 Willow Switch Rd.<br><br>Spring, TX 77389   |                     |  |        |
| 7 CAMPAIGN<br>TREASURER<br>PHONE  |                                | AREA CODE PHONE NUMBER EXTENSION<br>(281) 414-4243   |                     |  |        |
| 8 REPORT<br>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)<br><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<br>COVERED   |                                | Month Day Year    THROUGH    Month Day Year<br>07/01/2025    12/31/2025  |                     |  |        |
| 10 ELECTION   |                                | ELECTION DATE<br>Month Day Year<br>03/03/2026  |                     | ELECTION TYPE<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special |        |
| 11 OFFICE   |                                | OFFICE HELD (if any)<br>State Representative District 150 Harris   |                     | 12 OFFICE SOUGHT (if known)<br>State Representative District 150   |        |

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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|   |   |
|---|---|
| <b>13 C / OH NAME</b> Swanson, Valoree H. (The Honorable) | <b>14 Filer ID</b> (Ethics Commission Filers)<br>00080325 |
|---|---|

|   |  |   |
|---|--|---|
| <b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b><br><br><input type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. |   |
|   | <b>COMMITTEE TYPE</b>  | <b>COMMITTEE NAME</b>   |
|   | <input checked="" type="checkbox"/> GENERAL  | Texas Alliance for Life PAC   |
|   | <input type="checkbox"/> SPECIFIC  | <b>COMMITTEE ADDRESS</b><br>8000 Centre Park Drive<br>Suite 380<br>Austin, TX 78754 |
|   |  | <b>COMMITTEE CAMPAIGN TREASURER NAME</b><br>Shaw, James                             |
|   | <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b><br>4505 Corazon Cv<br><br>Round Rock, TX 78681   |   |

|                         |   |              |
|-------------------------|---|--------------|
| 16 CONTRIBUTION TOTALS  | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ 0.00      |
|                         | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  | \$ 19,487.87 |
| EXPENDITURE TOTALS      | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES  | \$ 0.00      |
|                         | 4. TOTAL POLITICAL EXPENDITURES   | \$ 22,508.90 |
| CONTRIBUTION BALANCE    | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD  | \$ 76,987.00 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD   | \$ 34,040.00 |

**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 Valoree H. Swanson

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**

3 of 47

|   |   |                                |                            |
|---|---|--------------------------------|----------------------------|
| <b>18 FILER NAME</b><br>Swanson, Valoree H. (The Honorable) |   | <b>19 Filer ID</b><br>00080325 | (Ethics Commission Filers) |
| <b>20 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE            |   |                                | SUBTOTAL AMOUNT            |
| 1.  | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                           | \$                             | 19,487.87                  |
| 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        | \$                             | 22,508.90                  |
| 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:<br>Sch: 1/4 Rpt: 4/47  |
| <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)         |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325 |
| <b>4</b> Date<br>11/04/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Centerpoint Energy, Inc. PAC<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77210-4567 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,000.00   |
| <b>8</b> Principal occupation / Job title (See Instructions)       |   | <b>9</b> Employer (See Instructions)                     |
| Date<br>11/13/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Cox, Thomas and Donna<br><hr/> Contributor address; City; State; Zip Code<br><br>Spring, TX 77379                                | Amount of Contribution (\$)<br><br>\$300.00              |
| Principal occupation / Job title (See Instructions)                |   | Employer (See Instructions)                              |
| Date<br>10/31/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Elkins, Gary<br><hr/> Contributor address; City; State; Zip Code<br><br>Christiansted, VI 00824                                  | Amount of Contribution (\$)<br><br>\$5,872.00            |
| Principal occupation / Job title (See Instructions)<br>retired     |   | Employer (See Instructions)<br>retired                   |
| Date<br>11/18/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Fuller, Robert E.<br><hr/> Contributor address; City; State; Zip Code<br><br>Spring, TX 77373-3105                               | Amount of Contribution (\$)<br><br>\$150.00              |
| Principal occupation / Job title (See Instructions)<br>Electrician |   | Employer (See Instructions)<br>self                      |
| Date<br>11/10/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Greenberg Traurig, P.A. PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701                          | Amount of Contribution (\$)<br><br>\$750.00              |
| Principal occupation / Job title (See Instructions)                |   | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |   |
|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>    |   | <b>1</b> Total pages Schedule A1:<br>Sch: 2/4 Rpt: 5/47     |
| <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)          |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325    |
| <b>4</b> Date<br>12/15/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hertz, Sherrie<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Spring, TX 77379         | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00         |
| <b>8</b> Principal occupation / Job title (See Instructions)        |   | <b>9</b> Employer (See Instructions)                        |
| Date<br>07/31/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Houk, Diane<br><hr/> Contributor address; City; State; Zip Code<br><br>Bellaire, TX 77401                            | Amount of Contribution (\$)<br><br>\$40.00                  |
| Principal occupation / Job title (See Instructions)                 |   | Employer (See Instructions)                                 |
| Date<br>12/04/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Houston Police Officers' Union PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77007-7730 | Amount of Contribution (\$)<br><br>\$1,500.00               |
| Principal occupation / Job title (See Instructions)                 |   | Employer (See Instructions)                                 |
| Date<br>11/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Independent Insurance Agents<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78768             | Amount of Contribution (\$)<br><br>\$250.00                 |
| Principal occupation / Job title (See Instructions)                 |   | Employer (See Instructions)                                 |
| Date<br>12/25/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Johnson, Gregory<br><hr/> Contributor address; City; State; Zip Code<br><br>Tomball, TX 77375                        | Amount of Contribution (\$)<br><br>\$500.00                 |
| Principal occupation / Job title (See Instructions)<br>Chiropractor |   | Employer (See Instructions)<br>Advanced Chiropractic Relief |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b> |  | <b>1</b> Total pages Schedule A1:<br>Sch: 3/4 Rpt: 6/47  |
| <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)       |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325 |
| <b>4</b> Date<br>07/12/2025                                      | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kunetka, Vicki D.<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Katy, TX 77449 | <b>7</b> Amount of Contribution (\$)<br><br>\$52.05      |
| <b>8</b> Principal occupation / Job title (See Instructions)     |  | <b>9</b> Employer (See Instructions)                     |
| Date<br>11/16/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Lutton, Glenn<br><hr/> Contributor address; City; State; Zip Code<br><br>Spring, TX 77388                     | Amount of Contribution (\$)<br><br>\$15.62               |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                              |
| Date<br>11/11/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>NRG Energy PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77002-4567              | Amount of Contribution (\$)<br><br>\$2,000.00            |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                              |
| Date<br>11/20/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rankin, Patti<br><hr/> Contributor address; City; State; Zip Code<br><br>Bixby, OK 74008                      | Amount of Contribution (\$)<br><br>\$100.00              |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                              |
| Date<br>11/07/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Reeves, Cynthia<br><hr/> Contributor address; City; State; Zip Code<br><br>Spring, TX 77373                   | Amount of Contribution (\$)<br><br>\$100.00              |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>            |   | <b>1</b> Total pages Schedule A1:<br>Sch: 4/4 Rpt: 7/47  |
| <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)                  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325 |
| <b>4</b> Date<br>11/15/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Renteria, Martin<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Spring, TX 77389 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00     |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired     |   | <b>9</b> Employer (See Instructions)                     |
| Date<br>12/16/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Schoonover, Kristy<br><hr/> Contributor address; City; State; Zip Code<br><br>Magnolia, TX 77354               | Amount of Contribution (\$)<br><br>\$104.10              |
| Principal occupation / Job title (See Instructions)                         |   | Employer (See Instructions)                              |
| Date<br>12/05/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Shannon, Fred<br><hr/> Contributor address; City; State; Zip Code<br><br>Round Mountain, TX 78663              | Amount of Contribution (\$)<br><br>\$1,500.00            |
| Principal occupation / Job title (See Instructions)<br>Governmental Affairs |   | Employer (See Instructions)<br>Self                      |
| Date<br>11/18/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sundquist, Gudrun<br><hr/> Contributor address; City; State; Zip Code<br><br>Spring, TX 77388                  | Amount of Contribution (\$)<br><br>\$104.10              |
| Principal occupation / Job title (See Instructions)<br>retired              |   | Employer (See Instructions)                              |
| Date<br>12/17/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Texans for Lawsuit Reform<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701          | Amount of Contribution (\$)<br><br>\$5,000.00            |
| Principal occupation / Job title (See Instructions)                         |   | Employer (See Instructions)                              |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 1/40 Rpt: 8/47            | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325   |
| <b>4</b> Date<br>12/30/2025   | <b>5</b> Payee name<br>Apple.com  |  |
| <b>6</b> Amount (\$)<br>\$17.31                                     | <b>7</b> Payee address; City; State; Zip Code<br>2000 Willowbrook Mall<br><br>Houston, TX 77070           |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Technology |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>12/24/2025  | Payee name<br>Apple.com   |  |
| Amount (\$)<br>\$9.99   | Payee address; City; State; Zip Code<br>2000 Willowbrook Mall<br><br>Houston, TX 77070                    |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Technology |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>12/08/2025  | Payee name<br>Apple.com   |  |
| Amount (\$)<br>\$17.31  | Payee address; City; State; Zip Code<br>2000 Willowbrook Mall<br><br>Houston, TX 77070                    |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>technology |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 2/40 Rpt: 9/47            | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325   |
| <b>4</b> Date<br>11/05/2025   | <b>5</b> Payee name<br>Apple.com  |  |
| <b>6</b> Amount (\$)<br>\$17.31                                     | <b>7</b> Payee address; City; State; Zip Code<br>2000 Willowbrook Mall<br><br>Houston, TX 77070           |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>technology       |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/27/2025  | Payee name<br>Apple.com   |  |
| Amount (\$)<br>\$9.99   | Payee address; City; State; Zip Code<br>2000 Willowbrook Mall<br><br>Houston, TX 77070                    |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Internet expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/14/2025  | Payee name<br>Apple.com   |  |
| Amount (\$)<br>\$43.29  | Payee address; City; State; Zip Code<br>2000 Willowbrook Mall<br><br>Houston, TX 77070                    |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>technology       |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 3/40 Rpt: 10/47           | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325   |
| <b>4</b> Date<br>09/24/2025   | <b>5</b> Payee name<br>Briscoe Cain Campaign   |  |
| <b>6</b> Amount (\$)<br>\$1,000.00                                  | <b>7</b> Payee address; City; State; Zip Code<br>P. O. Box 7<br><br>Deer Park, TX 77356  |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Donation |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>12/15/2025  | Payee name<br>Bucees #28   |  |
| Amount (\$)<br>\$51.80  | Payee address; City; State; Zip Code<br>2051 I-45<br><br>Madisonville, TX 77864  |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Fuel     |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>12/31/2025  | Payee name<br>Cannon, Dan  |  |
| Amount (\$)<br>\$600.00   | Payee address; City; State; Zip Code<br>1312 Juneberry Park<br><br>Temple, TX 76502  |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Labor    |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 4/40 Rpt: 11/47           | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325   |
| <b>4</b> Date<br>12/17/2025   | <b>5</b> Payee name<br>Cherry Tree Republicans PAC  |  |
| <b>6</b> Amount (\$)<br>\$35.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>11007 Wortham Blvd<br><br>Houston, TX 77065      |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Membership       |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |   |  |
| Date<br>07/16/2025  | Candidate/Officeholder name<br>Office sought<br>Office held                                       |  |
| Payee name<br>Cherry Tree Republicans PAC                           |   |  |
| Amount (\$)<br>\$25.00  | Payee address; City; State; Zip Code<br>11007 Wortham Blvd<br><br>Houston, TX 77065               |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meeting and meal |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |  |
| Date<br>11/14/2025  | Candidate/Officeholder name<br>Office sought<br>Office held                                       |  |
| Payee name<br>Chevron gas station                                   |   |  |
| Amount (\$)<br>\$16.97  | Payee address; City; State; Zip Code<br>1525 Inwood Road<br><br>Manor, TX 75247                   |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Fuel             |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 5/40 Rpt: 12/47           | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325   |
| <b>4</b> Date<br>08/06/2025   | <b>5</b> Payee name<br>Chick-fil-A  |  |
| <b>6</b> Amount (\$)<br>\$50.42                                     | <b>7</b> Payee address; City; State; Zip Code<br>10901 Research Blvd<br><br>Austin, TX 78759              |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense          | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meal     |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>12/29/2025  | Payee name<br>Constant Contact  |  |
| Amount (\$)<br>\$330.46   | Payee address; City; State; Zip Code<br>1601 Trapelo Road<br><br>Waltham, MA 02451                        |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>emailing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>12/01/2025  | Payee name<br>Constant Contact  |  |
| Amount (\$)<br>\$330.46   | Payee address; City; State; Zip Code<br>1601 Trapelo Road<br><br>Waltham, MA 02451                        |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>emailing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 6/40 Rpt: 13/47           | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325   |
| <b>4</b> Date<br>10/29/2025   | <b>5</b> Payee name<br>Constant Contact   |  |
| <b>6</b> Amount (\$)<br>\$330.46                                    | <b>7</b> Payee address; City; State; Zip Code<br>1601 Trapelo Road<br><br>Waltham, MA 02451               |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>emailing |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>09/29/2025  | Payee name<br>Constant Contact  |  |
| Amount (\$)<br>\$330.46   | Payee address; City; State; Zip Code<br>1601 Trapelo Road<br><br>Waltham, MA 02451                        |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>emailing        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>07/29/2025  | Payee name<br>Constant Contact  |  |
| Amount (\$)<br>\$330.46   | Payee address; City; State; Zip Code<br>1601 Trapelo Road<br><br>Waltham, MA 02451                        |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Emailing        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |  |   |
|---|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 7/40 Rpt: 14/47           | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>08/29/2025   | <b>5</b> Payee name<br>Constant Contact  |   |
| <b>6</b> Amount (\$)<br>\$330.46                                    | <b>7</b> Payee address; City; State; Zip Code<br>1601 Trapelo Road<br><br>Waltham, MA 02451  |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Emailing                    |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>11/20/2025  | Payee name<br>Cypress Republicans  |   |
| Amount (\$)<br>\$48.00  | Payee address; City; State; Zip Code<br>8190 Barker Cypress Road<br>Suite 51<br>Houston, TX 77433  |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tickets to December meeting |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>11/19/2025  | Payee name<br>Cypress Republicans  |   |
| Amount (\$)<br>\$250.00   | Payee address; City; State; Zip Code<br>8190 Barker Cypress Road<br>Suite 51<br>Houston, TX 77433  |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Donation                    |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |  |   |
|---|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 8/40 Rpt: 15/47           | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>10/10/2025   | <b>5</b> Payee name<br>Cypress Republicans   |   |
| <b>6</b> Amount (\$)<br>\$54.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>8190 Barker Cypress Road<br>Suite 51<br>Houston, TX 77433 |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                            | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meeting fees            |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>07/31/2025  | Payee name<br>Cypress Republicans  |   |
| Amount (\$)<br>\$27.00  | Payee address; City; State; Zip Code<br>8190 Barker Cypress Road<br>Suite 51<br>Houston, TX 77433          |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                            | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meeting and meal        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>07/31/2025  | Payee name<br>Cypress Republicans  |   |
| Amount (\$)<br>\$27.00  | Payee address; City; State; Zip Code<br>8190 Barker Cypress Road<br>Suite 51<br>Houston, TX 77433          |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                            | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meeting and meal, staff |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 9/40 Rpt: 16/47           | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325   |
| <b>4</b> Date<br>07/10/2025   | <b>5</b> Payee name<br>Cypress Republicans   |  |
| <b>6</b> Amount (\$)<br>\$50.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>8190 Barker Cypress Road<br>Suite 51<br>Houston, TX 77433 |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                            | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Memberships      |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>09/09/2025  | Payee name<br>Cypress Republicans  |  |
| Amount (\$)<br>\$27.00  | Payee address; City; State; Zip Code<br>8190 Barker Cypress Road<br>Suite 51<br>Houston, TX 77433          |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                            | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meeting and meal |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>12/29/2025  | Payee name<br>Darkspire Media LLC  |  |
| Amount (\$)<br>\$20.00  | Payee address; City; State; Zip Code<br>1601 Trapelo Road<br><br>Waltham, MA 02451                         |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Internet website |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 10/40 Rpt: 17/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325   |
| <b>4</b> Date<br>11/28/2025   | <b>5</b> Payee name<br>Darkspire Media LLC  |  |
| <b>6</b> Amount (\$)<br>\$20.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>1601 Trapelo Road<br><br>Waltham, MA 02451               |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Internet website |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |   |  |
| Date<br>10/28/2025  | Candidate/Officeholder name Office sought Office held   |  |
| Payee name<br>Darkspire Media LLC                                   |   |  |
| Amount (\$)<br>\$20.00  | Payee address; City; State; Zip Code<br>1601 Trapelo Road<br><br>Waltham, MA 02451                        |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Internet website        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |  |
| Date<br>10/06/2025  | Candidate/Officeholder name Office sought Office held   |  |
| Payee name<br>Darkspire Media LLC                                   |   |  |
| Amount (\$)<br>\$20.00  | Payee address; City; State; Zip Code<br>1601 Trapelo Road<br><br>Waltham, MA 02451                        |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Internet website        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 11/40 Rpt: 18/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>09/04/2025   | <b>5</b> Payee name<br>Darkspire Media LLC  |   |
| <b>6</b> Amount (\$)<br>\$20.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>1601 Trapelo Road<br><br>Waltham, MA 02451               |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Website, internet |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/16/2025  | Payee name<br>Dave's Express Stop   |   |
| Amount (\$)<br>\$49.27  | Payee address; City; State; Zip Code<br>22944 Kuykendahl Rd<br><br>Spring, TX 77389                       |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District             | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Fuel              |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/21/2025  | Payee name<br>Denny's   |   |
| Amount (\$)<br>\$38.70  | Payee address; City; State; Zip Code<br>6504 FM 2920<br><br>Spring, TX 77379                              |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense          | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>meal              |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 12/40 Rpt: 19/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325   |
| <b>4</b> Date<br>09/05/2025   | <b>5</b> Payee name<br>Doubletree Suites Austin   |  |
| <b>6</b> Amount (\$)<br>\$492.22                                    | <b>7</b> Payee address; City; State; Zip Code<br>65605 N IH 35<br><br>Austin, TX 78752                    |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Hotel lodging |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>07/25/2025  | Payee name<br>Doubletree Suites Austin  |  |
| Amount (\$)<br>\$155.93   | Payee address; City; State; Zip Code<br>65605 N IH 35<br><br>Austin, TX 78752                             |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Lodging       |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>07/31/2025  | Payee name<br>Doubletree Suites Austin  |  |
| Amount (\$)<br>\$170.43   | Payee address; City; State; Zip Code<br>65605 N IH 35<br><br>Austin, TX 78752                             |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Hotel lodgig  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 13/40 Rpt: 20/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325   |
| <b>4</b> Date<br>08/04/2025   | <b>5</b> Payee name<br>Doubletree Suites Austin   |  |
| <b>6</b> Amount (\$)<br>\$602.43                                    | <b>7</b> Payee address; City; State; Zip Code<br>65605 N IH 35<br><br>Austin, TX 78752                    |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Hotel lodging |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>08/06/2025  | Payee name<br>Doubletree Suites Austin  |  |
| Amount (\$)<br>\$368.92   | Payee address; City; State; Zip Code<br>65605 N IH 35<br><br>Austin, TX 78752                             |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Hotel lodging |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>08/11/2025  | Payee name<br>Doubletree Suites Austin  |  |
| Amount (\$)<br>\$169.20   | Payee address; City; State; Zip Code<br>65605 N IH 35<br><br>Austin, TX 78752                             |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Hotel lodging |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 14/40 Rpt: 21/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325   |
| <b>4</b> Date<br>08/13/2025   | <b>5</b> Payee name<br>Doubletree Suites Austin   |  |
| <b>6</b> Amount (\$)<br>\$387.34                                    | <b>7</b> Payee address; City; State; Zip Code<br>65605 N IH 35<br><br>Austin, TX 78752                    |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Hotel lodging |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>08/18/2025  | Payee name<br>Doubletree Suites Austin  |  |
| Amount (\$)<br>\$168.26   | Payee address; City; State; Zip Code<br>65605 N IH 35<br><br>Austin, TX 78752                             |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Hotel         |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>09/02/2025  | Payee name<br>Doubletree Suites Austin  |  |
| Amount (\$)<br>\$834.23   | Payee address; City; State; Zip Code<br>65605 N IH 35<br><br>Austin, TX 78752                             |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Hotel         |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 15/40 Rpt: 22/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>11/04/2025   | <b>5</b> Payee name<br>Frazier Mart   |   |
| <b>6</b> Amount (\$)<br>\$54.74                                     | <b>7</b> Payee address; City; State; Zip Code<br>227 South Frazier St<br><br>Conroe, TX 77301     |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>fuel  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |   |   |
| Date<br>12/03/2025  | Candidate/Officeholder name   | Office sought   |
|   |   | Office held   |
| Date<br>12/03/2025  | Payee name<br>Fuel Maxx 94  |   |
| Amount (\$)<br>\$54.99  | Payee address; City; State; Zip Code<br>1003 FM 2920<br><br>Tomball, TX 77375                     |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District            | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Fuel         |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |
| Date<br>07/18/2025  | Candidate/Officeholder name   | Office sought   |
|   |   | Office held   |
| Date<br>07/18/2025  | Payee name<br>Greater Houston Council of Federated Women  |   |
| Amount (\$)<br>\$170.00   | Payee address; City; State; Zip Code<br>7941 Katy Freeway<br>#272<br>Houston, TX 77024            |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense                 | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Garden Party |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |
|   |   |   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 16/40 Rpt: 23/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325   |
| <b>4</b> Date<br>11/26/2025   | <b>5</b> Payee name<br>HCRP  |  |
| <b>6</b> Amount (\$)<br>\$750.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>8588 Katy Freeway<br>Suite 445<br>Houston, TX 77024 |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                      | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Primary election fee |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>12/29/2025  | Payee name<br>HCTRA EZ TAG   |  |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373               |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District        | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls                |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>12/22/2025  | Payee name<br>HCTRA EZ TAG   |  |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373               |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District        | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls                |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 17/40 Rpt: 24/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)                                      | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>12/18/2025   | <b>5</b> Payee name<br>HCTRA EZ TAG   |   |
| <b>6</b> Amount (\$)<br>\$10.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373 |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |   |   |
| Date<br>12/12/2025  | Candidate/Officeholder name<br>Office sought<br>Office held                                     |   |
| Payee name<br>HCTRA EZ TAG  |   |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>TOLLS        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |
| Date<br>12/10/2025  | Candidate/Officeholder name<br>Office sought<br>Office held                                     |   |
| Payee name<br>HCTRA EZ TAG  |   |   |
| Amount (\$)<br>\$15.26  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 18/40 Rpt: 25/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)                                      | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>12/09/2025   | <b>5</b> Payee name<br>HCTRA EZ TAG   |   |
| <b>6</b> Amount (\$)<br>\$10.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373 |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>12/08/2025  | Payee name<br>HCTRA EZ TAG  |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>12/03/2025  | Payee name<br>HCTRA EZ TAG  |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 19/40 Rpt: 26/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)                                      | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>11/28/2025   | <b>5</b> Payee name<br>HCTRA EZ TAG   |   |
| <b>6</b> Amount (\$)<br>\$10.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373 |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |   |   |
| Date<br>11/24/2025  | Candidate/Officeholder name<br>Office sought<br>Office held                                     |   |
| Payee name<br>HCTRA EZ TAG  |   |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |
| Date<br>11/17/2025  | Candidate/Officeholder name<br>Office sought<br>Office held                                     |   |
| Payee name<br>HCTRA EZ TAG  |   |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 20/40 Rpt: 27/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)                                      | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>11/07/2025   | <b>5</b> Payee name<br>HCTRA EZ TAG   |   |
| <b>6</b> Amount (\$)<br>\$10.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373 |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |   |   |
| Date<br>10/27/2025  | Candidate/Officeholder name<br>Office sought<br>Office held                                     |   |
| Payee name<br>HCTRA EZ TAG  |   |   |
| Amount (\$)<br>\$20.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |
| Date<br>10/24/2025  | Candidate/Officeholder name<br>Office sought<br>Office held                                     |   |
| Payee name<br>HCTRA EZ TAG  |   |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 21/40 Rpt: 28/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)                                      | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>10/23/2025   | <b>5</b> Payee name<br>HCTRA EZ TAG   |   |
| <b>6</b> Amount (\$)<br>\$14.17                                     | <b>7</b> Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373 |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |   |   |
| Date<br>10/23/2025  | Candidate/Officeholder name   | Office sought   |
| Payee name<br>HCTRA EZ TAG  | Office held   |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |
| Date<br>10/22/2025  | Candidate/Officeholder name   | Office sought   |
| Payee name<br>HCTRA EZ TAG  | Office held   |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |
| Date<br>10/22/2025  | Candidate/Officeholder name   | Office sought   |
| Payee name<br>HCTRA EZ TAG  | Office held   |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 22/40 Rpt: 29/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)                                      | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>10/21/2025   | <b>5</b> Payee name<br>HCTRA EZ TAG   |   |
| <b>6</b> Amount (\$)<br>\$10.21                                     | <b>7</b> Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373 |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |   |   |
| Date<br>10/15/2025  | Candidate/Officeholder name<br>Office sought<br>Office held                                     |   |
| Payee name<br>HCTRA EZ TAG  |   |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |
| Date<br>10/14/2025  | Candidate/Officeholder name<br>Office sought<br>Office held                                     |   |
| Payee name<br>HCTRA EZ TAG  |   |   |
| Amount (\$)<br>\$13.56  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 23/40 Rpt: 30/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)                                      | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>10/14/2025   | <b>5</b> Payee name<br>HCTRA EZ TAG   |   |
| <b>6</b> Amount (\$)<br>\$10.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373 |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/09/2025  | Payee name<br>HCTRA EZ TAG  |   |
| Amount (\$)<br>\$10.45  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/08/2025  | Payee name<br>HCTRA EZ TAG  |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 24/40 Rpt: 31/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)                                      | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>10/03/2025   | <b>5</b> Payee name<br>HCTRA EZ TAG   |   |
| <b>6</b> Amount (\$)<br>\$10.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373 |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/01/2025  | Payee name<br>HCTRA EZ TAG  |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373          |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Fuels |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>09/30/2025  | Payee name<br>HCTRA EZ TAG  |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373          |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 25/40 Rpt: 32/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)                                      | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>10/29/2025   | <b>5</b> Payee name<br>HCTRA EZ TAG   |   |
| <b>6</b> Amount (\$)<br>\$10.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373 |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/25/2025  | Payee name<br>HCTRA EZ TAG  |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>09/17/2025  | Payee name<br>HCTRA EZ TAG  |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 26/40 Rpt: 33/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>12/15/2025   | <b>5</b> Payee name<br>HCTRA EZ TAG   |   |
| <b>6</b> Amount (\$)<br>\$10.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373                         |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Transportation Equipment And Related Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |   |   |
| Date<br>09/08/2025  | Candidate/Officeholder name<br>Office sought<br>Office held   |   |
| Payee name<br>HCTRA EZ TAG  |   |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373                                  |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District                           | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |
| Date<br>07/02/2025  | Candidate/Officeholder name<br>Office sought<br>Office held   |   |
| Payee name<br>HCTRA EZ TAG  |   |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373                                  |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District                           | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 27/40 Rpt: 34/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)                                      | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>07/03/2025   | <b>5</b> Payee name<br>HCTRA EZ TAG   |   |
| <b>6</b> Amount (\$)<br>\$10.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373 |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>07/07/2025  | Payee name<br>HCTRA EZ TAG  |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>07/14/2025  | Payee name<br>HCTRA EZ TAG  |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373          |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District      | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 28/40 Rpt: 35/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>07/21/2025   | <b>5</b> Payee name<br>HCTRA EZ TAG   |   |
| <b>6</b> Amount (\$)<br>\$10.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373   |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District     | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |   |   |
| Date<br>07/23/2025  | Candidate/Officeholder name<br>Office sought<br>Office held                                       |   |
| Payee name<br>HCTRA EZ TAG  |   |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373            |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |
| Date<br>07/25/2025  | Candidate/Officeholder name<br>Office sought<br>Office held                                       |   |
| Payee name<br>HCTRA EZ TAG  |   |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373            |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 29/40 Rpt: 36/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>07/29/2025   | <b>5</b> Payee name<br>HCTRA EZ TAG   |   |
| <b>6</b> Amount (\$)<br>\$10.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373   |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls     |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |   |   |
| Date<br>08/06/2025  | Candidate/Officeholder name<br>Office sought<br>Office held                                       |   |
| Payee name<br>HCTRA EZ TAG  |   |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373            |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tolls            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |
| Date<br>08/11/2025  | Candidate/Officeholder name<br>Office sought<br>Office held                                       |   |
| Payee name<br>HCTRA EZ TAG  |   |   |
| Amount (\$)<br>\$31.19  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373            |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 30/40 Rpt: 37/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>08/18/2025   | <b>5</b> Payee name<br>HCTRA EZ TAG   |   |
| <b>6</b> Amount (\$)<br>\$10.30                                     | <b>7</b> Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373   |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>08/19/2025  | Payee name<br>HCTRA EZ TAG  |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373            |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>08/25/2025  | Payee name<br>HCTRA EZ TAG  |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373            |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 31/40 Rpt: 38/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>08/27/2025   | <b>5</b> Payee name<br>HCTRA EZ TAG   |   |
| <b>6</b> Amount (\$)<br>\$10.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373   |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |   |   |
| Date<br>09/02/2025  | Candidate/Officeholder name Office sought Office held   |   |
| Payee name<br>HCTRA EZ TAG  |   |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373            |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |
| Date<br>09/15/2025  | Candidate/Officeholder name Office sought Office held   |   |
| Payee name<br>HCTRA EZ TAG  |   |   |
| Amount (\$)<br>\$10.00  | Payee address; City; State; Zip Code<br>1417 Spring Cypress Rd<br><br>Spring, TX 77373            |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tolls        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |  |   |
|---|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 32/40 Rpt: 39/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>08/25/2025   | <b>5</b> Payee name<br>Hampton Inn North Austin  |   |
| <b>6</b> Amount (\$)<br>\$462.50                                    | <b>7</b> Payee address; City; State; Zip Code<br>7619 N Interstate Hwy 35<br><br>Austin, TX 78752  |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Hotel :Lodging |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>11/12/2025  | Payee name<br>Harris County GOP  |   |
| Amount (\$)<br>\$225.00   | Payee address; City; State; Zip Code<br>8588 Katy Freeway<br>Suite 445<br>Houston, TX 77024  |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>XXX                       |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>12/31/2025  | Payee name<br>Hinds, David   |   |
| Amount (\$)<br>\$3,500.00   | Payee address; City; State; Zip Code<br><div style="background-color: black; color: white; text-align: center; padding: 2px;">REDACTED PER 254.0401, ELEC. CODE</div><br>Hutto, TX 78634 |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Labor through 12/31/2025  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 33/40 Rpt: 40/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325   |
| <b>4</b> Date<br>12/31/2025   | <b>5</b> Payee name<br>Jeter, Norma   |  |
| <b>6</b> Amount (\$)<br>\$1,305.00                                  | <b>7</b> Payee address; City; State; Zip Code<br><div style="background-color: black; color: white; text-align: center; padding: 2px;">REDACTED PER 254.0401, ELEC. CODE</div> Spring, TX 77389 |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>2025 Labor               |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/22/2025  | Payee name<br>Kingwood Tea Party  |  |
| Amount (\$)<br>\$250.00   | Payee address; City; State; Zip Code<br>2261 Northpark Drive<br>Suite 109<br>Kingwood, TX 77339   |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Donation                 |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>12/31/2025  | Payee name<br>Kobak, Victoria   |  |
| Amount (\$)<br>\$3,600.00   | Payee address; City; State; Zip Code<br>1123 Winchester Bend<br><br>Huffman, TX 77336   |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Labor through 11/31/2025 |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |  |   |
|---|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 34/40 Rpt: 41/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>10/16/2025   | <b>5</b> Payee name<br>Lincoln Goodwin Campaign  |   |
| <b>6</b> Amount (\$)<br>\$70.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>8765 Spring Cypress<br>Suite L #172<br>Spring, TX 77379   |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Donations |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/08/2025  | Payee name<br>Lincoln Goodwin Campaign   |   |
| Amount (\$)<br>\$35.00  | Payee address; City; State; Zip Code<br>8765 Spring Cypress<br>Suite L #172<br>Spring, TX 77379  |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Donation  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/22/2025  | Payee name<br>Los Cucos Mexican Cafe   |   |
| Amount (\$)<br>\$21.31  | Payee address; City; State; Zip Code<br>23730 Highway 59 North<br><br>Kingwood, TX 77339   |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>meal      |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |  |   |
|---|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 35/40 Rpt: 42/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)                                       | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>12/11/2025   | <b>5</b> Payee name<br>Los Reyes Mexican Restaurant  |   |
| <b>6</b> Amount (\$)<br>\$32.29                                     | <b>7</b> Payee address; City; State; Zip Code<br>5050 FM 1960<br><br>Houston, TX 77069           |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meal    |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>12/17/2025  | Payee name<br>Mamacitas 290  |   |
| Amount (\$)<br>\$23.07  | Payee address; City; State; Zip Code<br>19831 Northwest Fwy<br><br>Houston, TX 77065             |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meal    |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/29/2025  | Payee name<br>Omni Hotel   |   |
| Amount (\$)<br>\$25.00  | Payee address; City; State; Zip Code<br>4 Riverway<br><br>Houston , TX 77056                     |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District    | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Parking |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |  |   |
|---|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 36/40 Rpt: 43/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>12/22/2025   | <b>5</b> Payee name<br>Pacific Yard House  |   |
| <b>6</b> Amount (\$)<br>\$26.73                                     | <b>7</b> Payee address; City; State; Zip Code<br>101 Metcalf Street<br><br>Conroe, TX 77301  |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>meal            |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>11/13/2025  | Payee name<br>Recover America  |   |
| Amount (\$)<br>\$500.00   | Payee address; City; State; Zip Code<br>15311 Vantage Parkway West<br>Suite 315<br>Houston, TX 77032   |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Donation        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>08/13/2025  | Payee name<br>Roaring Fork Austin  |   |
| Amount (\$)<br>\$21.32  | Payee address; City; State; Zip Code<br>701 Congress Avenue<br><br>Austin, TX 78701  |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>meal |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 37/40 Rpt: 44/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325   |
| <b>4</b> Date<br>11/14/2025   | <b>5</b> Payee name<br>Shirley Acres   |  |
| <b>6</b> Amount (\$)<br>\$37.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>217 Woerner Rd<br><br>Houston, TX 77090   |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>NW Forest RW meeting |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>11/19/2025  | Payee name<br>Spring Creek Klein BBQ   |  |
| Amount (\$)<br>\$383.52   | Payee address; City; State; Zip Code<br>6068 FM 2920<br><br>Spring, TX 77379   |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign expense     |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>11/24/2025  | Payee name<br>Stan Stanart Campaign  |  |
| Amount (\$)<br>\$300.00   | Payee address; City; State; Zip Code<br>11811 Bourgeois Drive<br><br>Houston, TX 77066   |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Donation to campaign |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |  |   |
|---|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 38/40 Rpt: 45/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>07/22/2025   | <b>5</b> Payee name<br>Swanson, Vern and Valoree   |   |
| <b>6</b> Amount (\$)<br>\$600.00                                    | <b>7</b> Payee address; City; State; Zip Code<br><br><b>REDACTED PER 254.0401, ELEC. CODE</b><br>Spring, TX 77389  |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Reimbursement   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>reimbursement for personal internet expense |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>08/06/2025  | Payee name<br>Texas Chili Parlor   |   |
| Amount (\$)<br>\$26.15  | Payee address; City; State; Zip Code<br>1409 Lavaca Sstreet<br><br>Austin, TX 78701  |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meal  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/10/2025  | Payee name<br>Texas Right to Life Committee  |   |
| Amount (\$)<br>\$500.00   | Payee address; City; State; Zip Code<br>4500 Bissonnet Street<br>#305<br>Bellaire, TX 77401  |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>donation                                    |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |  |   |
|---|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 39/40 Rpt: 46/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325  |
| <b>4</b> Date<br>08/15/2025   | <b>5</b> Payee name<br>Texas Right to Life Committee   |   |
| <b>6</b> Amount (\$)<br>\$198.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>4500 Bissonnet Street<br>#305<br>Bellaire, TX 77401   |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Event???    |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  |   |
| Date<br>10/17/2025  | Candidate/Officeholder name<br>Office sought<br>Office held  |   |
| Payee name<br>Texas Tea Party Republican Women PAC                  |  |   |
| Amount (\$)<br>\$90.00  | Payee address; City; State; Zip Code<br>5100 Grand Lake Street<br>Bellaire, TX 77401   |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Memberships |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  |   |
| Date<br>12/10/2025  | Candidate/Officeholder name<br>Office sought<br>Office held  |   |
| Payee name<br>Theater District Garage                               |  |   |
| Amount (\$)<br>\$14.00  | Payee address; City; State; Zip Code<br>601 Capitol Street<br>Houston, TX 77002  |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Parking     |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  |   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 40/40 Rpt: 47/47          | <b>2</b> FILER NAME<br>Swanson, Valoree H. (The Honorable)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00080325   |
| <b>4</b> Date<br>11/03/2025   | <b>5</b> Payee name<br>Tiffany Nelson Campaign   |  |
| <b>6</b> Amount (\$)<br>\$500.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>26 Baylark Place<br><br>The Woodlands, TX 77382   |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Donation |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>12/31/2025  | Payee name<br>WinRed   |  |
| Amount (\$)<br>\$321.06   | Payee address; City; State; Zip Code<br>1776 Wilson Blvd<br><br>Arlington, VA 22209  |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Fee      |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |