

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00068491		2 Total pages filed: 77	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.		FIRST Tom	MI	
	NICKNAME		LAST Glass	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; PO Box 720 McDade, TX 78650-0720		ZIP CODE	
		OFFICE USE ONLY			
		Date Received ELECTRONICALLY FILED 01/15/2026			
		Date Hand-delivered or Date Postmarked			
5 CAMPAIGN TREASURER NAME		MS / MRS / MR Paul		FIRST MI	
		NICKNAME		LAST Johnson	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 130 Marcus Rd. McDade, TX 78650			
7 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (512) 698-6827			
8 REPORT TYPE		<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED		Month Day Year THROUGH Month Day Year 07/01/2025 12/31/2025			
10 ELECTION		ELECTION DATE Month Day Year 03/03/2026		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE		OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) State Representative District 17	

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17 AFFIDAVIT		
<p>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.</p>		
<p>Mr. Tom Glass</p> <hr/>		
<p>Signature of Candidate or Officeholder</p>		
<p>AFFIX NOTARY STAMP / SEAL ABOVE</p>		
<p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p>		
<hr/>	<hr/>	<hr/>
<p>Signature of officer administering</p>	<p>Printed name of officer administering</p>	<p>Title of officer administering oath</p>

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

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18 FILER NAME Glass, Tom (Mr.)		19 Filer ID (Ethics Commission Filers) 00068491
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 33,144.87
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	\$ 23,981.34
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 171.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/61 Rpt: 4/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aiken, Mary Anne <hr/> 6 Contributor address; City; State; Zip Code Flint, TX 75762	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aiken, William <hr/> Contributor address; City; State; Zip Code Flint, TX 75762	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aiken, William <hr/> Contributor address; City; State; Zip Code Flint, TX 75762	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sam <hr/> Contributor address; City; State; Zip Code Teague, TX 75860	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) Self
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Steven <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Research assistant		Employer (See Instructions) Liberty Staffing Services

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/61 Rpt: 5/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Attaway Jr., Tommy <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75205	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Investor		9 Employer (See Instructions) N/A
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaty, Ben <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78613	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Rcs
Date 07/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Susan <hr/> Contributor address; City; State; Zip Code Kerrville, TX 78028	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) educator		Employer (See Instructions) retired
Date 07/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Susan <hr/> Contributor address; City; State; Zip Code Kerrville, TX 78028	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) educator		Employer (See Instructions) retired
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benavides, Joseph <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) GM		Employer (See Instructions) Hager Motors

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/61 Rpt: 6/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Marsha <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77025	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Security Assessor		9 Employer (See Instructions) Chevron
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernhard, Brad <hr/> Contributor address; City; State; Zip Code Elgin, TX 78621	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) N/A
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bishop, Bruce <hr/> Contributor address; City; State; Zip Code Garland, TX 75043	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blake, Richard <hr/> Contributor address; City; State; Zip Code Tyler, TX 75704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) Retired
Date 12/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boone, Allen <hr/> Contributor address; City; State; Zip Code Luling, TX 78648	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Centene

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/61 Rpt: 7/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boone, Allen <hr/> 6 Contributor address; City; State; Zip Code Luling, TX 78648	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) Centene
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boone, Allen <hr/> Contributor address; City; State; Zip Code Luling, TX 78648	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Centene
Date 10/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boone, Allen <hr/> Contributor address; City; State; Zip Code Luling, TX 78648	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Centene
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boone, Allen <hr/> Contributor address; City; State; Zip Code Luling, TX 78648	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Centene
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boone, Allen <hr/> Contributor address; City; State; Zip Code Luling, TX 78648	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Centene

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/61 Rpt: 8/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boone, Allen <hr/> 6 Contributor address; City; State; Zip Code Luling, TX 78648	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) Centene
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouche, Jon <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Bouche Realty Group- Self Employed
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouche, Jon <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Bouche Realty Group- Self Employed
Date 12/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burt, Paul <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burt, Veronica <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/61 Rpt: 9/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 07/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carson, Paulette <hr/> 6 Contributor address; City; State; Zip Code Apple Springs, TX 75926	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carson, Paulette <hr/> Contributor address; City; State; Zip Code Apple Springs, TX 75926	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, David C <hr/> Contributor address; City; State; Zip Code Temple, TX 76504	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) USAF (retired)
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Donna <hr/> Contributor address; City; State; Zip Code Streetman, TX 75859	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charlton, Bill <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Centene

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/61 Rpt: 10/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 11/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charlton, Bill <hr/> 6 Contributor address; City; State; Zip Code Cedar Creek, TX 78612	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Centene
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charlton, Bill <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Centene
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charlton, Bill <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Centene
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charlton, Bill <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Centene
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charlton, Bill <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Centene

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/61 Rpt: 11/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 07/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charlton, Bill <hr/> 6 Contributor address; City; State; Zip Code Cedar Creek, TX 78612	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Centene
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charlton, Bill <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Centene
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clay IV, George <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76302	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conn, Keith <hr/> Contributor address; City; State; Zip Code Magnolia, TX 77355	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Consulting		Employer (See Instructions) Conn Group Consulting, Inc.
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper Jr., Mel <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/61 Rpt: 12/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coppock, Mark 6 Contributor address; City; State; Zip Code Bryan, TX 77807	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coppock, Mark Contributor address; City; State; Zip Code Bryan, TX 77807	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coppock, Mark Contributor address; City; State; Zip Code Bryan, TX 77807	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coppock, Mark Contributor address; City; State; Zip Code Bryan, TX 77807	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coppock, Mark Contributor address; City; State; Zip Code Bryan, TX 77807	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/61 Rpt: 13/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 07/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coppock, Mark <hr/> 6 Contributor address; City; State; Zip Code Bryan, TX 77807	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coppock, Mark <hr/> Contributor address; City; State; Zip Code Bryan, TX 77807	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coppock, Mark <hr/> Contributor address; City; State; Zip Code Bryan, TX 77807	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney, Curtis <hr/> Contributor address; City; State; Zip Code Elgin, TX 78621	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Covel, Bill <hr/> Contributor address; City; State; Zip Code Gatesville, TX 76528	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/61 Rpt: 14/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Robert 6 Contributor address; City; State; Zip Code Cedar Creek, TX 78612	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Robert Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Robert Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Robert Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Robert Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/61 Rpt: 15/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 10/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Robert <hr/> 6 Contributor address; City; State; Zip Code Cedar Creek, TX 78612	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Robert <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Robert <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Robert <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Robert <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/61 Rpt: 16/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 08/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Robert <hr/> 6 Contributor address; City; State; Zip Code Cedar Creek, TX 78612	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Robert <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Robert <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Robert <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Robert <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/61 Rpt: 17/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 08/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Robert <hr/> 6 Contributor address; City; State; Zip Code Cedar Creek, TX 78612	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Robert <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Robert <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dace Jr., Harry <hr/> Contributor address; City; State; Zip Code Alvin, TX 77511	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, J Richard <hr/> Contributor address; City; State; Zip Code Rosanky, TX 78953	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/61 Rpt: 18/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeRusseau, Louise <hr/> 6 Contributor address; City; State; Zip Code Cedar Creek, TX 78612	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 12/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dixon, Billy <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Expand Energy
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drake, Rex <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) HMG
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drake, Rex <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) HMG
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dupuy Jr., Trevor <hr/> Contributor address; City; State; Zip Code Bedford, TX 76021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) na

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/61 Rpt: 19/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ekstrom, Christopher <hr/> 6 Contributor address; City; State; Zip Code Coral Springs, FL 33071	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) Ekstrom Properties LLC
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Espinoza Lyng, Maria <hr/> Contributor address; City; State; Zip Code Pompano Beach, TX 33062	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Dan <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fite Jr., Ralph <hr/> Contributor address; City; State; Zip Code Houston, TX 77042	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Welcome Group, L L C
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fite Jr., Ralph <hr/> Contributor address; City; State; Zip Code Houston, TX 77042	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Welcome Group, L L C

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/61 Rpt: 20/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Kevin <hr/> 6 Contributor address; City; State; Zip Code Keller, TX 76248	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Investments		9 Employer (See Instructions) Freeman Global
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Kevin <hr/> Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Freeman Global
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Kevin <hr/> Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Freeman Global
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funk, Lynn <hr/> Contributor address; City; State; Zip Code Hunt, TX 78024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funk, Lynn <hr/> Contributor address; City; State; Zip Code Hunt, TX 78024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/61 Rpt: 21/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 10/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funk, Lynn 6 Contributor address; City; State; Zip Code Hunt, TX 78024	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funk, Lynn Contributor address; City; State; Zip Code Hunt, TX 78024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funk, Lynn Contributor address; City; State; Zip Code Hunt, TX 78024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funk, Lynn Contributor address; City; State; Zip Code Hunt, TX 78024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funk, Lynn Contributor address; City; State; Zip Code Hunt, TX 78024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/61 Rpt: 22/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 07/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funk, Lynn <hr/> 6 Contributor address; City; State; Zip Code Hunt, TX 78024	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Furlow Jr., John <hr/> Contributor address; City; State; Zip Code Somerville, TX 77879	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Programming		Employer (See Instructions) Winn Consulting & Services
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gastineau, Paul <hr/> Contributor address; City; State; Zip Code Magnolia, TX 77355	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 07/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerstenschlager, MerryLynn <hr/> Contributor address; City; State; Zip Code Weatherfor, TX 76086	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerstenschlager, MerryLynn <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76086	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/61 Rpt: 23/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, Martin <hr/> 6 Contributor address; City; State; Zip Code Bastrop, TX 78602	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gill, Gurshaminder <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilliam Jr., Frosty <hr/> Contributor address; City; State; Zip Code Odessa, TX 79768	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) AGHORN OPERATING, INC.
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glass, David <hr/> Contributor address; City; State; Zip Code Elgin, TX 78622	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self Employed
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glass, Tom <hr/> Contributor address; City; State; Zip Code McDade, TX 78650	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/61 Rpt: 24/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 10/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glass, Tom <hr/> 6 Contributor address; City; State; Zip Code McDade, TX 78650	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gober, Billy <hr/> Contributor address; City; State; Zip Code Smithville, TX 78957	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) US Army/ Retired Real estate		Employer (See Instructions) Retired
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gober, Billy <hr/> Contributor address; City; State; Zip Code Smithville, TX 78957	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) US Army/ Retired Real estate		Employer (See Instructions) Retired
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gober, Billy <hr/> Contributor address; City; State; Zip Code Smithville, TX 78957	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) US Army		Employer (See Instructions) retired
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golemon, Brent <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Businessman		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/61 Rpt: 25/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Suezette <hr/> 6 Contributor address; City; State; Zip Code Pearland, TX 77581	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Office Manager		9 Employer (See Instructions) C&E Resources.com
Date 12/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guidry, Paul <hr/> Contributor address; City; State; Zip Code Cuero, TX 77954	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guidry, Paul <hr/> Contributor address; City; State; Zip Code Cuero, TX 77954	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guidry, Paul <hr/> Contributor address; City; State; Zip Code Cuero, TX 77954	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guidry, Paul <hr/> Contributor address; City; State; Zip Code Cuero, TX 77954	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/61 Rpt: 26/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 08/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guidry, Paul <hr/> 6 Contributor address; City; State; Zip Code Cuero, TX 77954	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guidry, Paul <hr/> Contributor address; City; State; Zip Code Cuero, TX 77954	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guidry, Paul <hr/> Contributor address; City; State; Zip Code Cuero, TX 77954	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guidry, Paul <hr/> Contributor address; City; State; Zip Code Cuero, TX 77954	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gunnels, Patrick <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Threadfest LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/61 Rpt: 27/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 11/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gunnels, Patrick <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77069	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Threadfest LLC
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gunnels, Patrick <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Threadfest LLC
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gunnels, Patrick <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Threadfest LLC
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gunnels, Patrick <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Threadfest LLC
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gunnels, Patrick <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Threadfest LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/61 Rpt: 28/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 08/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gunnels, Patrick <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77069	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Threadfest LLC
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gunnels, Patrick <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Threadfest LLC
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Terry <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) contractor		Employer (See Instructions) self employed
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrod, Steve <hr/> Contributor address; City; State; Zip Code Elgin, TX 78621	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haskett, Steven <hr/> Contributor address; City; State; Zip Code Austin, TX 78726	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROGRAMMER		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/61 Rpt: 29/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 07/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herd, Helen <hr/> 6 Contributor address; City; State; Zip Code TX - Kerrville, TX 78028	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 07/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herd, Helen <hr/> Contributor address; City; State; Zip Code Kerrville, TX 78028	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holt, Kelly <hr/> Contributor address; City; State; Zip Code Smithville, TX 78957	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) varied business interests		Employer (See Instructions) Self
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoover, Brandon <hr/> Contributor address; City; State; Zip Code Bellville, TX 77418	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Controller		Employer (See Instructions) Blue Bell Creameries
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howell, Steven <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/61 Rpt: 30/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunter, Linda <hr/> 6 Contributor address; City; State; Zip Code Celina, TX 75009	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) None- disabled
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurt, Myers <hr/> Contributor address; City; State; Zip Code Dallas, TX 75223	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutzelman, David <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) N/a		Employer (See Instructions) Retired
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutzelman, David <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) Retired
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Mary Ann <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/61 Rpt: 31/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 09/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Mike <hr/> 6 Contributor address; City; State; Zip Code Lufkin, TX 75904	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) n/a
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Mike <hr/> Contributor address; City; State; Zip Code Lufkin, TX 75904	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Pat <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired Analyst		Employer (See Instructions) Retired
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacoby, Robert <hr/> Contributor address; City; State; Zip Code Addison, TX 75001	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) private equity		Employer (See Instructions) Self employed
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacoby, Robert <hr/> Contributor address; City; State; Zip Code Addison, TX 75001	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) private equity		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/61 Rpt: 32/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 11/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Brent 6 Contributor address; City; State; Zip Code Elgin, TX 78621	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Ranching		9 Employer (See Instructions) Self
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Brent Contributor address; City; State; Zip Code Elgin, TX 78622	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Ranching		Employer (See Instructions) Self
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Brent Contributor address; City; State; Zip Code Elgin, TX 78621	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Ranching		Employer (See Instructions) Self
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Brent Contributor address; City; State; Zip Code Elgin, TX 78622	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Manufacturing/ ranching		Employer (See Instructions) Self
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Brent Contributor address; City; State; Zip Code Elgin, TX 78621	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Manufacturing/ ranching		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/61 Rpt: 33/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Paul <hr/> 6 Contributor address; City; State; Zip Code McDade, TX 78650	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Vicki <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Tom Glass Campaign Manager		Employer (See Instructions) Self
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Sakki <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Sr application sys analyst		Employer (See Instructions) Md Anderson
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalbas, Kathleen <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Adm. asst.		Employer (See Instructions) B&N Oilfield Equipment
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kastner, Marina <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/61 Rpt: 34/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaufman, Kathy <hr/> 6 Contributor address; City; State; Zip Code Rockdale, TX 76567	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) NA
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keenan, Grady <hr/> Contributor address; City; State; Zip Code Lockhart, TX 78644	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keene, Jason <hr/> Contributor address; City; State; Zip Code Elgin, TX 78621	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Keene Tactical
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsay, Douglas <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Gunsmith		Employer (See Instructions) Retired
Date 07/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsay, Douglas <hr/> Contributor address; City; State; Zip Code bastrop, TX 78602	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Gunsmith		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/61 Rpt: 35/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 07/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsay, Douglas <hr/> 6 Contributor address; City; State; Zip Code Bastrop, TX 78602	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) gunsmith		9 Employer (See Instructions) retired
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keys, Peter <hr/> Contributor address; City; State; Zip Code Rosanky, TX 78953	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klekar, Clarence <hr/> Contributor address; City; State; Zip Code Luling, TX 78648	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Law Enforcement Officer		Employer (See Instructions) Retired
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kocian, Kristin <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Corvel
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kocian, Kristin <hr/> Contributor address; City; State; Zip Code Cedar Creek, TX 78612	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Corvel

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/61 Rpt: 36/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubin, Earl <hr/> 6 Contributor address; City; State; Zip Code Atlanta, TX 75551	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) None
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubinski, Erik <hr/> Contributor address; City; State; Zip Code Blanco, TX 78606	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Undisclosed
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubinski, Erik <hr/> Contributor address; City; State; Zip Code Blanco, TX 78606	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Undisclosed
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubinski, Erik <hr/> Contributor address; City; State; Zip Code Blanco, TX 78606	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Undisclosed
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubinski, Erik <hr/> Contributor address; City; State; Zip Code Blanco, TX 78606	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Undisclosed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/61 Rpt: 37/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 08/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubinski, Erik <hr/> 6 Contributor address; City; State; Zip Code Blanco, TX 78606	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Undisclosed

Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubinski, Erik <hr/> Contributor address; City; State; Zip Code Blanco, TX 78606	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Undisclosed

Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubinski, Erik <hr/> Contributor address; City; State; Zip Code Blanco, TX 78606	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Undisclosed

Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubinski, Erik <hr/> Contributor address; City; State; Zip Code Blanco, TX 78606	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Undisclosed

Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larson, Bruce <hr/> Contributor address; City; State; Zip Code Bastrop, TX 97034	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/61 Rpt: 38/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 11/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larson, Bruce <hr/> 6 Contributor address; City; State; Zip Code Bastrop, TX 97034	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larson, Bruce <hr/> Contributor address; City; State; Zip Code Bastrop, TX 97034	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larson, Bruce <hr/> Contributor address; City; State; Zip Code Bastrop, TX 97034	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larson, Bruce <hr/> Contributor address; City; State; Zip Code Bastrop, TX 97034	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larson, Bruce <hr/> Contributor address; City; State; Zip Code Bastrop, TX 97034	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/61 Rpt: 39/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 08/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larson, Bruce <hr/> 6 Contributor address; City; State; Zip Code Bastrop, TX 97034	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larson, Bruce <hr/> Contributor address; City; State; Zip Code Bastrop, TX 97034	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larson, Donalyn <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Ward <hr/> Contributor address; City; State; Zip Code Garrison, TX 75946	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Brent <hr/> Contributor address; City; State; Zip Code Van Alstyne, TX 75495	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/61 Rpt: 40/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 11/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leidy, Kaye <hr/> 6 Contributor address; City; State; Zip Code Cedar Creek, TX 78612	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long, Wayne <hr/> Contributor address; City; State; Zip Code Rockdale, TX 76567	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loucks, Donald A <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$303.03
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucas, Susan <hr/> Contributor address; City; State; Zip Code Bryan, TX 77808	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lunday, Clay <hr/> Contributor address; City; State; Zip Code Thorndale, TX 76577	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/61 Rpt: 41/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macias, Karen Y <hr/> 6 Contributor address; City; State; Zip Code Cibolo, TX 78108	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malin, Matt <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Jennifer <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Animal Technician		Employer (See Instructions) UT MD Anderson
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McElmurry, Donna <hr/> Contributor address; City; State; Zip Code Katy, TX 77493	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Vice president		Employer (See Instructions) Strategic Automation Services
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McElraft, Harold <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/61 Rpt: 42/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 10/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLendon, Guy <hr/> 6 Contributor address; City; State; Zip Code Sulphur, LA 70663	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) CITGO
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Me, Me <hr/> Contributor address; City; State; Zip Code Fulshear, TX 77441	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Na
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Me, Me <hr/> Contributor address; City; State; Zip Code Fulshear, TX 77441	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Na
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metzger, Adrian <hr/> Contributor address; City; State; Zip Code Luling, TX 78648	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) none
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metzger, Adrian <hr/> Contributor address; City; State; Zip Code Luling, TX 78648	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/61 Rpt: 43/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 11/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milazzo, Cindy <hr/> 6 Contributor address; City; State; Zip Code El Paso, TX 79930	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Paige <hr/> Contributor address; City; State; Zip Code Houston, TX 77042	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrow, Michael <hr/> Contributor address; City; State; Zip Code Thorndale, TX 76577	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Sam Bass Fire Department
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, James <hr/> Contributor address; City; State; Zip Code Smithville, TX 78957	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Offield, Don <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Na		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/61 Rpt: 44/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oquin, Karla 6 Contributor address; City; State; Zip Code San Angelo, TX 76904	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Legal Assistant		9 Employer (See Instructions) John W. Caldwell, Jr., Attorney
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orebaugh, Tina Contributor address; City; State; Zip Code Montgomery, TX 77316	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired Math Teacher		Employer (See Instructions) Retired
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orebaugh, Tina Contributor address; City; State; Zip Code Montgomery, TX 77316	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired Math Teacher		Employer (See Instructions) Retired
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Kenny Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Kenny Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/61 Rpt: 45/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Kenny <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77057	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Kenny <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Kenny <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 07/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Kenny <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 07/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Kenny <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/61 Rpt: 46/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 08/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Kenny <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77057	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Partee, Sean <hr/> Contributor address; City; State; Zip Code Terrell, TX 75160	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Nirav <hr/> Contributor address; City; State; Zip Code Jefferson, TX 75657	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Hendrikus Group
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pruitt, Jay <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions) Pruitt Production Services, Inc.
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pruitt, Jay <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions) Pruitt Production Services, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/61 Rpt: 47/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 10/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pruitt, Jay 6 Contributor address; City; State; Zip Code Giddings, TX 78942	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Operations Manager		9 Employer (See Instructions) Pruitt Production Services, Inc.
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pruitt, Jay Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions) Pruitt Production Services, Inc.
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pruitt, Jay Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions) Pruitt Production Services, Inc.
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pruitt, Jay Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions) Pruitt Production Services, Inc.
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pruitt, Jay Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions) Pruitt Production Services, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/61 Rpt: 48/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 07/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pruitt, Jay <hr/> 6 Contributor address; City; State; Zip Code Giddings, TX 78942	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Operations Manager		9 Employer (See Instructions) Pruitt Production Services, Inc.
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purham, Randy <hr/> Contributor address; City; State; Zip Code Austin, TX 78741	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Putnam, Terry <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes II, William <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard, James <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nurse (Ret.)		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/61 Rpt: 49/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 08/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard, James <hr/> 6 Contributor address; City; State; Zip Code Bastrop, TX 78602	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Nurse (Ret.)		9 Employer (See Instructions) Retired
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard, James <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nurse (Ret.)		Employer (See Instructions) Retired
Date 08/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard, James <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nurse (Ret.)		Employer (See Instructions) Retired
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard, James <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nurse (Ret.)		Employer (See Instructions) Retired
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Ken <hr/> Contributor address; City; State; Zip Code Caldwell, TX 77836	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/61 Rpt: 50/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 11/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Ken <hr/> 6 Contributor address; City; State; Zip Code Caldwell, TX 77836	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Ken <hr/> Contributor address; City; State; Zip Code Caldwell, TX 77836	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Ken <hr/> Contributor address; City; State; Zip Code Caldwell, TX 77836	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Ken <hr/> Contributor address; City; State; Zip Code Caldwell, TX 77836	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Ken <hr/> Contributor address; City; State; Zip Code Caldwell, TX 77836	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/61 Rpt: 51/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 07/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Ken <hr/> 6 Contributor address; City; State; Zip Code Caldwell, TX 77836	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Ken <hr/> Contributor address; City; State; Zip Code Caldwell, TX 77836	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Lesha <hr/> Contributor address; City; State; Zip Code Hockley, TX 77447	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roland, Dave <hr/> Contributor address; City; State; Zip Code Lockhart, TX 78644	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) Retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Vicky <hr/> Contributor address; City; State; Zip Code Elgin, TX 78621	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/61 Rpt: 52/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Lisa <hr/> 6 Contributor address; City; State; Zip Code Bastrop, TX 78602	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Monarch RV Storage LLC
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saenz, Gail <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saenz, Gail <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saenz, Gail <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saenz, Gail <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/61 Rpt: 53/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 08/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saenz, Gail <hr/> 6 Contributor address; City; State; Zip Code Giddings, TX 78942	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saenz, Gail <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saenz, Gail <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saenz, Gail <hr/> Contributor address; City; State; Zip Code Giddings, TX 78942	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuh, Martha <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/61 Rpt: 54/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 10/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuh, Martha <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78230	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheffield, Ashley <hr/> Contributor address; City; State; Zip Code Ledbetter, TX 78946	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Cattle		Employer (See Instructions) Self employed
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sinani, Clyde <hr/> Contributor address; City; State; Zip Code Elgin, TX 78621	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slover, Carol <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Doug <hr/> Contributor address; City; State; Zip Code Paige, TX 78659	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Computer Engineer		Employer (See Instructions) Siemens

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/61 Rpt: 55/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Mark <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77091	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Manager - Admin		9 Employer (See Instructions) Ellington Geological
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Nathan <hr/> Contributor address; City; State; Zip Code Canyon Lake, TX 78133	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Self-employed		Employer (See Instructions) Self-employed
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snider, Marilyn <hr/> Contributor address; City; State; Zip Code Point Blank, TX 77364	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanfield, Joseph <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Solutions Architect		Employer (See Instructions) Dell
Date 11/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanfield, Joseph <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Solutions Architect		Employer (See Instructions) Dell

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/61 Rpt: 56/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 10/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanfield, Joseph 6 Contributor address; City; State; Zip Code Bastrop, TX 78602	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Solutions Architect		9 Employer (See Instructions) Dell
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanfield, Joseph Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Solutions Architect		Employer (See Instructions) Dell
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanfield, Joseph Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Solutions Architect		Employer (See Instructions) Dell
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanfield, Joseph Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Solutions Architect		Employer (See Instructions) Dell
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanfield, Joseph Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Solutions Architect		Employer (See Instructions) Dell

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/61 Rpt: 57/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 08/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanfield, Joseph <hr/> 6 Contributor address; City; State; Zip Code Bastrop, TX 78602	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Solutions Architect		9 Employer (See Instructions) Dell
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stearns, Julie <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) retired
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stearns, Julie <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) retired
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stearns, Julie <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) retired
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stearns, Julie <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/61 Rpt: 58/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stearns, Julie <hr/> 6 Contributor address; City; State; Zip Code Bastrop, TX 78602	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) retired
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stearns, Julie <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) retired
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stearns, Julie <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) retired
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stearns, Julie <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) retired
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swearngan, Chip <hr/> Contributor address; City; State; Zip Code Richmond, TX 77469	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Communications		Employer (See Instructions) Westlake Corporation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/61 Rpt: 59/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swinney, Brenda <hr/> 6 Contributor address; City; State; Zip Code Paige, TX 78659	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tillman, Calvin <hr/> Contributor address; City; State; Zip Code Valley View, TX 76272	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Deputy Director		Employer (See Instructions) FAA
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tillman, Calvin <hr/> Contributor address; City; State; Zip Code Valley View, TX 76272	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Deputy Director		Employer (See Instructions) FAA
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Michael <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Dell
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Michael <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Dell

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/61 Rpt: 60/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 10/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Shann <hr/> 6 Contributor address; City; State; Zip Code Lexington, TX 78947	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Dell
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vickers, Vicki <hr/> Contributor address; City; State; Zip Code Yoakum, TX 77995	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Von Ehr II, Jim <hr/> Contributor address; City; State; Zip Code Richardson, TX 75082	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vrshek, David <hr/> Contributor address; City; State; Zip Code Richmond, TX 77469	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vrshek, David <hr/> Contributor address; City; State; Zip Code Richmond, TX 77469	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/61 Rpt: 61/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 07/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Rhonda <hr/> 6 Contributor address; City; State; Zip Code Nacogdoches, TX 75961	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Real Estate Appraiser		9 Employer (See Instructions) East Texas Appraisal Services, Inc
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wareham, Andrew <hr/> Contributor address; City; State; Zip Code Smithville, TX 78957	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Massage Therapist		Employer (See Instructions) Retired self
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wareham, Andrew <hr/> Contributor address; City; State; Zip Code Smithville, TX 78957	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Massage Therapist		Employer (See Instructions) Retired self
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wareham, Andy & Terry <hr/> Contributor address; City; State; Zip Code Smithville, TX 78957	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Massage Therapist		Employer (See Instructions) Retired self
Date 11/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wareham, Andy & Terry <hr/> Contributor address; City; State; Zip Code Smithville, TX 78957	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Massage Therapist		Employer (See Instructions) Retired self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/61 Rpt: 62/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 10/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wareham, Andy & Terry <hr/> 6 Contributor address; City; State; Zip Code Smithville, TX 78957	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Massage Therapist		9 Employer (See Instructions) Retired self
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wareham, Andy & Terry <hr/> Contributor address; City; State; Zip Code Smithville, TX 78957	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Massage Therapist		Employer (See Instructions) Retired self
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wareham, Andy & Terry <hr/> Contributor address; City; State; Zip Code Smithville, TX 78957	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Massage Therapist		Employer (See Instructions) Retired self
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wareham, Andy & Terry <hr/> Contributor address; City; State; Zip Code Smithville, TX 78957	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Massage Therapist		Employer (See Instructions) Retired self
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Jo <hr/> Contributor address; City; State; Zip Code Smithville, TX 78957	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/61 Rpt: 63/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Roberta <hr/> 6 Contributor address; City; State; Zip Code Smithville, TX 78957	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) sales		9 Employer (See Instructions) Messer
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Jerry <hr/> Contributor address; City; State; Zip Code Dale, TX 78616	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Jim <hr/> Contributor address; City; State; Zip Code Red Rock, TX 78662	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, William <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76904	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) N/a		Employer (See Instructions) N/a
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodhouse, Marilyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77079	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/61 Rpt: 64/77
2 FILER NAME Glass, Tom (Mr.)		3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yamarick, Paul <hr/> 6 Contributor address; City; State; Zip Code Moulton, TX 77975	7 Amount of Contribution (\$) \$183.60
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) N/A
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yokubaitis, Ron <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Internet Service Provider		Employer (See Instructions) Self
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yokubaitis, Ron <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Internet Service Provider		Employer (See Instructions) Self

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/12 Rpt: 65/77	2 FILER NAME Glass, Tom (Mr.)	3 Filer ID (Ethics Commission Filers) 00068491
4 Date 10/02/2025	5 Payee name Adeas Printing	
6 Amount (\$) \$644.50	7 Payee address; City; State; Zip Code 321 S Washington Ave Wichita, KS 67202	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign literature
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2025	Payee name Adeas Printing	
Amount (\$) \$655.62	Payee address; City; State; Zip Code 321 S Washington Ave Wichita, KS 67202	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign literature
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/02/2025	Payee name Bastrop Copier	
Amount (\$) \$205.68	Payee address; City; State; Zip Code 1002 Main St Bastrop, TX 78602	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign flyers
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.

1 Total pages Schedule F1: Sch: 2/12 Rpt: 66/77	2 FILER NAME Glass, Tom (Mr.)	3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/11/2025	5 Payee name Bastrop Copier	
6 Amount (\$) \$286.86	7 Payee address; City; State; Zip Code 1002 Main St Bastrop, TX 78602	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign circulars
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/15/2025	Candidate/Officeholder name Bastrop County	
Amount (\$) \$8.00	Payee address; City; State; Zip Code 803 Pine St Bastrop, TX 78602	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voter history
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/07/2025	Candidate/Officeholder name Jones, Vicki	
Amount (\$) \$4,000.00	Payee address; City; State; Zip Code <div style="background-color: black; color: white; text-align: center; padding: 2px;">REDACTED PER 254.0401, ELEC. CODE</div> Lexington, TX 78947	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Management
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.

1 Total pages Schedule F1: Sch: 3/12 Rpt: 67/77	2 FILER NAME Glass, Tom (Mr.)	3 Filer ID (Ethics Commission Filers) 00068491
4 Date 11/06/2025	5 Payee name Jones, Vicki	
6 Amount (\$) \$3,000.00	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Lexington, TX 78947	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Management
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2025	Payee name Jones, Vicki	
Amount (\$) \$4,000.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Lexington, TX 78947	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign management
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2025	Payee name Jones, Vicki	
Amount (\$) \$181.32	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Lexington, TX 78947	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for refreshments for fundraiser
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.

1 Total pages Schedule F1: Sch: 4/12 Rpt: 68/77	2 FILER NAME Glass, Tom (Mr.)	3 Filer ID (Ethics Commission Filers) 00068491
4 Date 07/02/2025	5 Payee name Mailchimp	
6 Amount (\$) \$27.40	7 Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE Ste 5000 Atlanta, GA 30308	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/04/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$27.40	Payee name Mailchimp	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	
	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email service	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/02/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$27.40	Payee name Mailchimp	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	
	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email service	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/02/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$27.40	Payee name Mailchimp	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	
	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email service	
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.

1 Total pages Schedule F1: Sch: 5/12 Rpt: 69/77	2 FILER NAME Glass, Tom (Mr.)	3 Filer ID (Ethics Commission Filers) 00068491
4 Date 10/02/2025	5 Payee name Mailchimp	
6 Amount (\$) \$27.72	7 Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE Ste 5000 Atlanta, GA 30308	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/03/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$27.72	Payee name Mailchimp Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE Ste 5000 Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/02/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$27.72	Payee name Mailchimp Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE Ste 5000 Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email service
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.

1 Total pages Schedule F1: Sch: 6/12 Rpt: 70/77	2 FILER NAME Glass, Tom (Mr.)	3 Filer ID (Ethics Commission Filers) 00068491
4 Date 07/11/2025	5 Payee name Nationbuilder	
6 Amount (\$) \$69.00	7 Payee address; City; State; Zip Code 520 S. Grand Ave 2nd Floor Los Angeles, CA 90071	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/11/2025	Payee name Nationbuilder	
Amount (\$) \$69.00	Payee address; City; State; Zip Code 520 S. Grand Ave 2nd Floor Los Angeles, CA 90071	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/11/2025	Payee name Nationbuilder	
Amount (\$) \$139.00	Payee address; City; State; Zip Code 520 S. Grand Ave 2nd Floor Los Angeles, CA 90071	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web services
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.

1 Total pages Schedule F1: Sch: 7/12 Rpt: 71/77	2 FILER NAME Glass, Tom (Mr.)	3 Filer ID (Ethics Commission Filers) 00068491
4 Date 10/14/2025	5 Payee name Nationbuilder	
6 Amount (\$) \$139.00	7 Payee address; City; State; Zip Code 520 S. Grand Ave 2nd Floor Los Angeles, CA 90071	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/11/2025	Payee name Nationbuilder	
Amount (\$) \$171.00	Payee address; City; State; Zip Code 520 S. Grand Ave 2nd Floor Los Angeles, CA 90071	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2025	Payee name Neel and Partners	
Amount (\$) \$2,400.00	Payee address; City; State; Zip Code 1232 Cavender Dr 116 Hurst, TX 76053	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting service
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.

1 Total pages Schedule F1: Sch: 8/12 Rpt: 72/77	2 FILER NAME Glass, Tom (Mr.)	3 Filer ID (Ethics Commission Filers) 00068491
4 Date 12/03/2025	5 Payee name Neel and Partners	
6 Amount (\$) \$2,400.00	7 Payee address; City; State; Zip Code 1232 Cavender Dr 116 Hurst, TX 76053	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/09/2025	Payee name Red Fox Strategies LLC	
Amount (\$) \$35.00	Payee address; City; State; Zip Code 4106 Plaza Ln Fairfax, VA 22033	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/06/2025	Payee name Red Fox Strategies LLC	
Amount (\$) \$99.34	Payee address; City; State; Zip Code 4106 Plaza Ln Fairfax, VA 22033	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising fees
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.

1 Total pages Schedule F1: Sch: 9/12 Rpt: 73/77	2 FILER NAME Glass, Tom (Mr.)	3 Filer ID (Ethics Commission Filers) 00068491
4 Date 11/14/2025	5 Payee name Republican Party of Texas	
6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 807 Brazos St Ste 701 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee to run for office
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/21/2025	Payee name Rogers, Brett	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 4514 Edinburgh Tyler, TX 75703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2025	Payee name Stripe	
Amount (\$) \$673.29	Payee address; City; State; Zip Code 3180 18th St San Francisco, CA 94110	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Card processing fees
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.

1 Total pages Schedule F1: Sch: 10/12 Rpt: 74/77	2 FILER NAME Glass, Tom (Mr.)	3 Filer ID (Ethics Commission Filers) 00068491
4 Date 09/17/2025	5 Payee name buildasign.com	
6 Amount (\$) \$249.86	7 Payee address; City; State; Zip Code 11525A Stonehollow Dr Austin, TX 78958	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/25/2025	Payee name buildasign.com	
Amount (\$) \$30.27	Payee address; City; State; Zip Code 11525A Stonehollow Dr Austin, TX 78758	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/28/2025	Payee name freeconferencecall.com	
Amount (\$) \$8.21	Payee address; City; State; Zip Code 4300 E Pacific Coast Hwy Long Beach, CA 90804	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Volunteer Coordination	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense teleconference service
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.

1 Total pages Schedule F1: Sch: 11/12 Rpt: 75/77	2 FILER NAME Glass, Tom (Mr.)	3 Filer ID (Ethics Commission Filers) 00068491
4 Date 08/26/2025	5 Payee name freeconferencecall.com	
6 Amount (\$) \$8.21	7 Payee address; City; State; Zip Code 4300 E Pacific Coast Hwy Long Beach, CA 90804	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Volunteer Coordination	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Teleconference service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/26/2025	Payee name freeconferencecall.com	
Amount (\$) \$8.21	Payee address; City; State; Zip Code 4300 E Pacific Coast Hwy Long Beach, CA 90804	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Volunteer Coordination	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Teleconference service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2025	Payee name freeconferencecall.com	
Amount (\$) \$8.21	Payee address; City; State; Zip Code 4300 E Pacific Coast Hwy Long Beach, CA 90804	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Volunteer Coordination	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Teleconference service
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.

1 Total pages Schedule F1: Sch: 12/12 Rpt: 76/77	2 FILER NAME Glass, Tom (Mr.)	3 Filer ID (Ethics Commission Filers) 00068491
4 Date 11/26/2025	5 Payee name freeconferencecall.com	
6 Amount (\$) \$8.21	7 Payee address; City; State; Zip Code 4300 E Pacific Coast Hwy Long Beach, CA 90804	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Volunteer Coordination	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Teleconference service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/26/2025	Payee name freeconferencecall.com	
Amount (\$) \$8.21	Payee address; City; State; Zip Code 4300 E Pacific Coast Hwy Long Beach, CA 90804	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Volunteer Coordination	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Teleconference service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/09/2025	Payee name i360	
Amount (\$) \$2,558.40	Payee address; City; State; Zip Code 2300 Clarendon Blvd Ste 800 Arlington, VA 22201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Block walking software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Block walking software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 77/77	2 FILER NAME Glass, Tom (Mr.)	3 Filer ID (Ethics Commission Filers) 00068491
4 Date 11/11/2025	5 Payee name Nationbuilder	
6 Amount (\$) \$171.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 520 S. Grand Ave 2nd Floor Los Angeles, CA 90071	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held