

# 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) 00090338	2 Total pages filed: 16		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Zachary	MI	OFFICE USE ONLY		
	NICKNAME Zack	LAST Dunn	SUFFIX	Date Received ELECTRONICALLY FILED 01/14/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; P.O. Box 592058  San Antonio, TX 78259			Date Hand-delivered or Date Postmarked		
				Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Patrick	MI			
	NICKNAME Pat	LAST Dunn	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 2492 Stanley Rd  JCSA Ft Sam Houston, TX 78234		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION (210) 526-1983					
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 11/17/2025	Day	Year	Month 12/31/2025	Day	Year
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 121		

GO TO PAGE 2

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

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

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13 C / OH NAME	Dunn, Zachary (Mr.)		14 Filer ID (Ethics Commission Filers) 00090338
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 3.82
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 9,121.44
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>		\$ 3,370.06
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 13,990.19
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 10,000.00

**17 AFFIDAVIT**

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

Mr. Zachary Dunn

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

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

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

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

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

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<b>18</b> FILER NAME	<b>19</b> Filer ID	(Ethics Commission Filers)
Dunn, Zachary (Mr.)	00090338	
<b>20</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 4,121.44
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 5,000.00
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS		\$ 10,000.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$ 197.04
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		\$ 3,173.02
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/7 Rpt: 4/16
<b>2</b> FILER NAME Dunn, Zachary (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090338
<b>4</b> Date 12/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Asfour, Mired	<b>7</b> Amount of Contribution (\$) \$121.00
	<b>6</b> Contributor address; City; State; Zip Code  Alexandria, VA 22314	
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Smithsonian Institution
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Tracy	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Clinton, NY 13323	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cabello, Miriam	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  San Antonio, TX 78240	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Latham & Watkins LLP
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chin, Michelle	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Bryan, TX 77808	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Texas A&M University
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Hardin	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Leawood, KS 66206	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Polsinelli

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/7 Rpt: 5/16
<b>2</b> FILER NAME Dunn, Zachary (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090338
<b>4</b> Date 12/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daly, John ..... <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>8</b> Principal occupation / Job title (See Instructions) Professor	<b>9</b> Employer (See Instructions) UT
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Alyssa ..... Contributor address; City; State; Zip Code  Berkeley, CA 94705	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions) Government	Employer (See Instructions) USG
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) El-Sahn, Adam ..... Contributor address; City; State; Zip Code  Washington, DC 20002	Amount of Contribution (\$) \$121.00
	Principal occupation / Job title (See Instructions) Senior Counsel	Employer (See Instructions) United States Senate
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Sarah ..... Contributor address; City; State; Zip Code  Dallas, TX 75228	Amount of Contribution (\$) \$121.00
	Principal occupation / Job title (See Instructions) Consultant	Employer (See Instructions) TNTP
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fialkow, Gail ..... Contributor address; City; State; Zip Code  Clayton, NC 27520	Amount of Contribution (\$) \$121.00
	Principal occupation / Job title (See Instructions) Tax Professional	Employer (See Instructions) Self-Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/7 Rpt: 6/16
<b>2</b> FILER NAME Dunn, Zachary (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090338
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Francisco ..... <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78232	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>8</b> Principal occupation / Job title (See Instructions) Not Employed	<b>9</b> Employer (See Instructions) N/A
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gottzman, Laura ..... Contributor address; City; State; Zip Code  San Carlos, CA 94070	Amount of Contribution (\$) \$23.81
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) N/A
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gottzman, Laura ..... Contributor address; City; State; Zip Code  San Carlos, CA 94070	Amount of Contribution (\$) \$24.81
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) N/A
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Heather ..... Contributor address; City; State; Zip Code  Helotes, TX 78023	Amount of Contribution (\$) \$121.00
	Principal occupation / Job title (See Instructions) Fundraiser	Employer (See Instructions) UT San Antonio
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gyasi, Ebenezer ..... Contributor address; City; State; Zip Code  Newark, NJ 07103	Amount of Contribution (\$) \$121.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) N/A

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/7 Rpt: 7/16
<b>2</b> FILER NAME Dunn, Zachary (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090338
<b>4</b> Date 12/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hasbrouck, Clare ..... <b>6</b> Contributor address; City; State; Zip Code  Athens, GA 30605	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Customer Service Associate		<b>9</b> Employer (See Instructions) Vacation Inc
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kauflus, John ..... Contributor address; City; State; Zip Code  Boerne, TX 78006	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Ut Health San Antonio
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelliher, Neil ..... Contributor address; City; State; Zip Code  Charlottesville, VA 22903	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Skadden Arps
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koko, Robin ..... Contributor address; City; State; Zip Code  Houston, TX 77077	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Insurance Analyst		Employer (See Instructions) Surest
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Evan ..... Contributor address; City; State; Zip Code  Houston, TX 77007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Winston & Strawn LLP

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1: Sch: 5/7 Rpt: 8/16
<b>2</b> FILER NAME Dunn, Zachary (Mr.)			<b>3</b> Filer ID (Ethics Commission Filers) 00090338
<b>4</b> Date 12/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynch, Stacie	<b>7</b> Amount of Contribution (\$) \$50.00	
	<b>6</b> Contributor address; City; State; Zip Code  Glen Mills, PA 19342		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) N/A	
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mandraccia, Thomas	Amount of Contribution (\$) \$50.00	
	Contributor address; City; State; Zip Code  Philadelphia, PA 19145		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ross Aronstam & Moritz	
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mercer, Wanda	Amount of Contribution (\$) \$121.00	
	Contributor address; City; State; Zip Code  Austin, TX 78737		
Principal occupation / Job title (See Instructions) Higher Ed Administrator		Employer (See Instructions) Retired	
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obrien, Christopher	Amount of Contribution (\$) \$100.00	
	Contributor address; City; State; Zip Code  Natick, MA 01760		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A	
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearlman, Rachel	Amount of Contribution (\$) \$50.00	
	Contributor address; City; State; Zip Code  Boston, MA 02125		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Lpl Financial	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/7 Rpt: 9/16
<b>2</b> FILER NAME Dunn, Zachary (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090338
<b>4</b> Date 12/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Amanda	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Arlington, TX 76016	
<b>8</b> Principal occupation / Job title (See Instructions) Higher Education		<b>9</b> Employer (See Instructions) Ut Arlington
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandoval, Gina	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  San Antonio, TX 78249	
Principal occupation / Job title (See Instructions) Scrum Master		Employer (See Instructions) USAA
Date 12/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandoval, Gina	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  San Antonio, TX 78249	
Principal occupation / Job title (See Instructions) Scrum Naster		Employer (See Instructions) USAA
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sirjani, Arrizu	Amount of Contribution (\$) \$121.00
	Contributor address; City; State; Zip Code  New York, NY 10028	
Principal occupation / Job title (See Instructions) Senior Policy Advisor		Employer (See Instructions) City Of New York
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Mikaila	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Cambridge, MA 02138	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Kirkland And Ellis LLP

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1: Sch: 7/7 Rpt: 10/16
<b>2</b> FILER NAME Dunn, Zachary (Mr.)			<b>3</b> Filer ID (Ethics Commission Filers) 00090338
<b>4</b> Date 12/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stout, Colby ..... <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78255	<b>7</b> Amount of Contribution (\$)  \$50.00	
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Texas Dept. Of Insurance	
Date 12/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) True-Courage, Zada ..... Contributor address; City; State; Zip Code  San Antonio, TX 78232	Amount of Contribution (\$)  \$250.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vizcarra, Andrea ..... Contributor address; City; State; Zip Code  San Antonio, TX 78258	Amount of Contribution (\$)  \$121.00	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bexar Da	
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Joash ..... Contributor address; City; State; Zip Code  Poughkeepsie, NY 12601	Amount of Contribution (\$)  \$150.00	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-Employed	

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 1/1 Rpt: 11/16
<b>2</b> FILER NAME Dunn, Zachary (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090338
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$
<b>5</b> Date 12/02/2025	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Kenney, Christian ..... <b>7</b> Contributor address; City; State; Zip Code  Schertz, TX 12756	<b>8</b> Amount of contribution (\$) <b>9</b> In-kind contribution description \$5,000.00 Website Design  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Self Employed		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions) Self Employed
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

## LOANS

**SCHEDULE E**

<p><b>The Instruction Guide explains how to complete this form.</b></p>		<p><b>1</b> Total pages Schedule E: Sch: 1/1 Rpt: 12/16</p>
<p><b>2</b> FILER NAME Dunn, Zachary (Mr.)</p>		<p><b>3</b> Filer ID (Ethics Commission Filers) 00090338</p>
<p><b>4</b> TOTAL OF UNITEMIZED LOANS</p>		<p>\$</p>
<p><b>5</b> Date of loan 12/11/2025</p>	<p><b>7</b> Name of lender Dunn , Zack</p>	<p><input type="checkbox"/> out-of-state PAC (ID#:_)</p>
		<p><b>9</b> Loan Amount (\$) \$10,000.00</p>
<p><b>6</b> Is lender a financial institution? No</p>	<p><b>8</b> Lender address; City; State; Zip Code San Antonio, TX 78259</p>	<p><b>10</b> Interest Rate</p>
		<p><b>11</b> Maturity Date 02/28/2026</p>
<p><b>12</b> Principal occupation / Job title (See Instructions) Assistant District Attorney</p>		<p><b>13</b> Employer (See Instructions) Bexar County</p>
<p><b>14</b> Description of Collateral <input checked="" type="checkbox"/> None</p>		<p><b>15</b> Check if personal funds were deposited into political account <input checked="" type="checkbox"/></p>
<p><b>16</b> GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable</p>	<p><b>17</b> Name of guarantor .....</p>	<p><b>19</b> Amount Guaranteed (\$)</p>
	<p><b>18</b> Guarantor address; City; State; Zip Code</p>	
<p><b>20</b> Principal occupation</p>		<p><b>21</b> Employer (See Instructions)</p>

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/1 Rpt: 13/16	2 FILER NAME Dunn, Zachary (Mr.)	3 Filer ID (Ethics Commission Filers) 00090338
4 Date 12/31/2025	5 Payee name Act Blue Technical Services	
6 Amount (\$) \$162.74	7 Payee address; City; 366 Summer Street Sommerville MA, TX 02144	
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 Act Blue Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Harland Clarke	Office sought Office held
Date 12/17/2025	Payee name Harland Clarke	
Amount (\$) \$34.30	Payee address; City; 15955 La Cantera Parkway  San Antonio, TX 78256	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Check Stock
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Harland Clarke	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: 1/3 Rpt: 14/16	2 FILER NAME Dunn, Zachary (Mr.)	3 Filer ID (Ethics Commission Filers) 00090338	
4 Date 11/25/2025	5 Payee name Bexar County Democratic Party		
6 Amount (\$) \$750.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1844 Fredericksburg Rd,  San Antonio , TX 78201		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Candidate Filing Fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/31/2025	Payee name Bitly		
Amount (\$) \$207.23  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 601 W 26th St  New York , NY 10001		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense QR Code and Hyperlinks	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/05/2025	Payee name Frost Bank		
Amount (\$) \$60.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 111 W. Houston Street  San Antonio, TX 78205		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Opening Deposit Charge	
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: 2/3 Rpt: 15/16	2 FILER NAME Dunn, Zachary (Mr.)	3 Filer ID (Ethics Commission Filers) 00090338
4 Date 11/19/2025	5 Payee name GoDaddy	
6 Amount (\$) \$1,200.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 2155 Godaddy Way  Tempe, AZ 85284	
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 Domain Purchase
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 12/02/2025	Payee name GoDaddy	
Amount (\$) \$99.99  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 2155 Godaddy Way  Tempe, AZ 85284	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Domain Broker Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 11/17/2025	Payee name United State Postal Service	
Amount (\$) \$226.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 592058  San Antonio, TX 78259	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense P.O Box Rental
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 3/3 Rpt: 16/16	2 FILER NAME Dunn, Zachary (Mr.)	3 Filer ID (Ethics Commission Filers) 00090338	
4 Date 11/19/2025	5 Payee name Wordpress		
6 Amount (\$) \$105.12	7 Payee address; City; State; Zip Code 60 29th St #343  San Francisco , CA 94110		
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 Domain and website hosting	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/17/2025	Payee name Wordpress		
Amount (\$) \$524.68	Payee address; City; State; Zip Code 60 29th St #343  San Francisco , CA 94110		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Domain and Website Building	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held