

**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) 00090051	2 Total pages filed: 12		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mrs.	FIRST Amelia E.	MI	OFFICE USE ONLY		
	NICKNAME	LAST Rabroker	SUFFIX	Date Received ELECTRONICALLY FILED 01/15/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; P.O. Box 2346			Date Hand-delivered or Date Postmarked		
	Harker Heights , TX 76548			Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST James	MI			
	NICKNAME	LAST Riley	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); P.O. Box 5172		APT / SUITE #;	CITY;	STATE;	ZIP CODE
	Fort Hood , TX 76544					
7 CAMPAIGN TREASURER PHONE	AREA CODE (717)	PHONE NUMBER 869-7919	EXTENSION			
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)					
9 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
10 ELECTION	ELECTION DATE Month 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) State Representative District 55 Bell			12 OFFICE SOUGHT (if known) State Representative District 55		

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

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

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13 C / OH NAME	Rabroker, Amelia E. (Mrs.)		14 Filer ID (Ethics Commission Filers) 00090051
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 5,351.69
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 3,149.49
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 2,907.93
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00

17 AFFIDAVIT

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

Mrs. Amelia E. Rabroker

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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18 FILER NAME Rabroker , Amelia E. (Mrs.)	19 Filer ID (Ethics Commission Filers) 00090051
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,951.69
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 2,400.00
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	\$ 903.54
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	\$ 2,245.95
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: 1/4 Rpt: 4/12
2 FILER NAME Rabroker , Amelia E. (Mrs.)			3 Filer ID (Ethics Commission Filers) 00090051
4 Date 11/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Irene 6 Contributor address; City; State; Zip Code Nolanville, TX 76550	7 Amount of Contribution (\$) \$50.00	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)	
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boston, ANDREA Contributor address; City; State; Zip Code Kempner, TX 76539	Amount of Contribution (\$) \$52.63	
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) KISD	
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conway, Kazia Contributor address; City; State; Zip Code Harker Heights, TX 76548	Amount of Contribution (\$) \$26.44	
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Law Firm	
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darkis, Linwood Contributor address; City; State; Zip Code Harker Heights, TX 76548	Amount of Contribution (\$) \$250.00	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Killeen ISD	
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Sarah Contributor address; City; State; Zip Code Killeen, TX 76542	Amount of Contribution (\$) \$105.00	
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) KISD	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 2/4 Rpt: 5/12	
2 FILER NAME Rabroker , Amelia E. (Mrs.)				3 Filer ID (Ethics Commission Filers) 00090051	
4 Date 11/15/2025	5 Full name of contributor Eneli, Ayayi	<input type="checkbox"/> out-of-state PAC (ID#:)	7 Amount of Contribution (\$) \$100.00		
	6 Contributor address; City; State; Zip Code Belton, TX 76513				
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Ma'at Heritage Law Group			
Date 11/20/2025	Full name of contributor Frye, Jess	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of Contribution (\$) \$10.73		
	Contributor address; City; State; Zip Code Belton, TX 76513				
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) ML&R			
Date 12/20/2025	Full name of contributor Frye, Jess	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of Contribution (\$) \$10.73		
	Contributor address; City; State; Zip Code Belton, TX 76513				
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) ML&R			
Date 12/17/2025	Full name of contributor Greely, Walter	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of Contribution (\$) \$250.00		
	Contributor address; City; State; Zip Code Taylor, TX 76574				
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired			
Date 10/17/2025	Full name of contributor Jagodzinski, Elizabeth	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of Contribution (\$) \$52.63		
	Contributor address; City; State; Zip Code Killeen, TX 76542				
Principal occupation / Job title (See Instructions) Radiologic Technologist		Employer (See Instructions) Seton Medical Center Harker Heights			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 3/4 Rpt: 6/12
2 FILER NAME Rabroker , Amelia E. (Mrs.)			3 Filer ID (Ethics Commission Filers) 00090051
4 Date 11/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Legg, Amanda 6 Contributor address; City; State; Zip Code Harker Heights, TX 76548	7 Amount of Contribution (\$) \$10.73	
8 Principal occupation / Job title (See Instructions) Office		9 Employer (See Instructions) PPCA	
Date 11/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linnemann, Priscilla Contributor address; City; State; Zip Code Belton, TX 76513	Amount of Contribution (\$) \$1,571.50	
Principal occupation / Job title (See Instructions) Real estate		Employer (See Instructions) Self	
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockwood, Laura Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$105.00	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Nbisd	
Date 12/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Jessica Contributor address; City; State; Zip Code Dallas, TX 75208	Amount of Contribution (\$) \$105.00	
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Pacific Northern	
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pittman, Becky Contributor address; City; State; Zip Code Little Rock, AR 72227	Amount of Contribution (\$) \$1.30	
Principal occupation / Job title (See Instructions) GC		Employer (See Instructions) GC	

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/4 Rpt: 7/12
2 FILER NAME Rabroker , Amelia E. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00090051
4 Date 12/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Jerry 6 Contributor address; City; State; Zip Code Copperas Cove, TX 76522	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) retired firefighter		9 Employer (See Instructions) Killeen Fire Dept

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>				<p>1 Total pages Schedule A2: Sch: 1/1 Rpt: 8/12</p>
<p>2 FILER NAME Rabroker , Amelia E. (Mrs.)</p>				<p>3 Filer ID (Ethics Commission Filers) 00090051</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				\$
<p>5 Date 10/10/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linnemann, Priscilla</p>		<p>8 Amount of contribution (\$) \$1,100.00</p>	<p>9 In-kind contribution description Photography -head shots for campaign</p>
	<p>7 Contributor address; City; State; Zip Code Belton, TX 76513</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Real estate</p>			<p>11 Employer (FOR NON-JUDICIAL) (See instructions) Self</p>	
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>			<p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p>	
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>			<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>	
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 10/10/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linnemann, Priscilla</p>		<p>Amount of contribution (\$) \$1,100.00</p>	<p>In-kind contribution description Photography -head shots for campaign</p>
	<p>Contributor address; City; State; Zip Code Belton, TX 76513</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Real estate</p>			<p>Employer (FOR NON-JUDICIAL) (See instructions) Self</p>	
<p>Contributor's principal occupation (FOR JUDICIAL)</p>			<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>	
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>			<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>	
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 11/15/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Precise Cleaning</p>		<p>Amount of contribution (\$) \$200.00</p>	<p>In-kind contribution description Donated food for kickoff</p>
	<p>Contributor address; City; State; Zip Code Killeen, TX 76541</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>			<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>	
<p>Contributor's principal occupation (FOR JUDICIAL)</p>			<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>	
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>			<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>	
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</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: 1/3 Rpt: 9/12	2 FILER NAME Rabroker , Amelia E. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00090051
4 Date 12/08/2025	5 Payee name Act Blue	
6 Amount (\$) \$30.00	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144	
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 Training
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/10/2025	Payee name Lily's Cakes	
Amount (\$) \$15.60	Payee address; City; State; Zip Code 360 W Central Texas Expy, # 204 Harker Heights, TX 76548	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Refreshment for volunteer meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/22/2025	Payee name Mailchimp	
Amount (\$) \$122.32	Payee address; City; State; Zip Code 405 N Angier Ave NE 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 Emailing service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/3 Rpt: 10/12	2 FILER NAME Rabroker , Amelia E. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00090051
4 Date 12/12/2025	5 Payee name Office Max/Depot	
6 Amount (\$) \$184.00	7 Payee address; City; 1800 Lowes Blvd Killeen, TX 76542	
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 Banners
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/02/2025	Payee name Printed Union	
Amount (\$) \$48.72	Payee address; City; 8800 Chancellor Row Dallas, TX 75247	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Name Tags
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/05/2025	Payee name Printed Union	
Amount (\$) \$48.72	Payee address; City; 8800 Chancellor Row Dallas, TX 75247	
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 Name tags
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/3 Rpt: 11/12	2 FILER NAME Rabroker , Amelia E. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00090051
4 Date 12/18/2025	5 Payee name Southwest Airlines	
6 Amount (\$) \$254.18	7 Payee address; City; 2702 Love Field Dr Dallas, TX 75235	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel for training
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/15/2025	Payee name Texas AFL-CIO	
Amount (\$) \$200.00	Payee address; City; 1106 Lavaca St, Ste 200 Austin, TX 78701	
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 Tickets to labor labor conference
Complete ONLY 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: 1/1 Rpt: 12/12	2 FILER NAME Rabroker , Amelia E. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00090051	
4 Date 10/17/2025	5 Payee name Printed Union		
6 Amount (\$) \$930.95	7 Payee address; City; 8800 Chancellor Row Dallas, TX 75247		
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 Flyers	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/29/2025	Payee name Rabroker, Amelia		
Amount (\$) \$560.00	Payee address; City; PO Box 2346 Harker Heights, TX 76548		
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 To set up bank account	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/20/2025	Payee name Rabroker, Amelia		
Amount (\$) \$755.00	Payee address; City; PO Box 2346 Harker Heights, TX 76548		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	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	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held