

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) 00088079	2 Total pages filed: 58								
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width: 100%;"> <tr> <td style="width: 30%;">MS / MRS / MR The Honorable</td> <td style="width: 30%;">FIRST Caroline</td> <td style="width: 40%;">MI MI</td> </tr> </table>		MS / MRS / MR The Honorable	FIRST Caroline	MI MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2026					
	MS / MRS / MR The Honorable	FIRST Caroline	MI MI								
<table style="width: 100%;"> <tr> <td style="width: 30%;">NICKNAME</td> <td style="width: 30%;">LAST Fairly</td> <td style="width: 40%;">SUFFIX</td> </tr> </table>		NICKNAME	LAST Fairly	SUFFIX							
NICKNAME	LAST Fairly	SUFFIX									
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 1000 S. Tyler St. Apt. 10 Amarillo, TX 79101		Date Hand-delivered or Date Postmarked <table style="width: 100%;"> <tr> <td style="width: 50%;">Receipt #</td> <td style="width: 50%;">Amount</td> </tr> </table> Date Processed Date Imaged	Receipt #	Amount						
	Receipt #	Amount									
5 CAMPAIGN TREASURER NAME	<table style="width: 100%;"> <tr> <td style="width: 30%;">MS / MRS / MR Mr.</td> <td style="width: 30%;">FIRST Tom</td> <td style="width: 40%;">MI MI</td> </tr> </table>		MS / MRS / MR Mr.	FIRST Tom	MI MI						
	MS / MRS / MR Mr.	FIRST Tom	MI MI								
<table style="width: 100%;"> <tr> <td style="width: 30%;">NICKNAME</td> <td style="width: 30%;">LAST Roller</td> <td style="width: 40%;">SUFFIX</td> </tr> </table>		NICKNAME	LAST Roller	SUFFIX							
NICKNAME	LAST Roller	SUFFIX									
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 109 Chucker St. Amarillo, TX 79124										
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (806) 671-8174										
8 REPORT TYPE	<table style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded modified reporting limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH-FR)</td> </tr> </table>			<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)
	<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	<table style="width: 100%;"> <tr> <td style="width: 25%;">Month Day Year</td> <td style="width: 25%;"></td> <td style="width: 25%;">Month Day Year</td> <td style="width: 25%;"></td> </tr> <tr> <td>07/01/2025</td> <td>THROUGH</td> <td>12/31/2025</td> <td></td> </tr> </table>			Month Day Year		Month Day Year		07/01/2025	THROUGH	12/31/2025	
	Month Day Year		Month Day Year								
07/01/2025	THROUGH	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) State Representative District 87		12 OFFICE SOUGHT (if known) State Representative District 87								

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Fairly, Caroline (The Honorable)	14 Filer ID (Ethics Commission Filers) 00088079
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME Texas Alliance for Life PAC COMMITTEE ADDRESS 8000 Centre Park Drive Suite 380 Austin, TX 78754 COMMITTEE CAMPAIGN TREASURER NAME Shaw, James COMMITTEE CAMPAIGN TREASURER ADDRESS 4505 Corazon Cv Round Rock, TX 78681

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 100.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 246,734.40
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 2,953.73
	4. TOTAL POLITICAL EXPENDITURES	\$ 49,724.84
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 267,662.26
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFIDAVIT

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

The Honorable Caroline Fairly
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 Fairly, Caroline (The Honorable)		19 Filer ID (Ethics Commission Filers) 00088079
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 233,381.51
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 13,352.89
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	\$ 49,724.84
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 103.17

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/25 Rpt: 4/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 512 Strategies LLC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A&M PAC <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: 80729) AFSCME Texas Correctional Officers PAC <hr/> Contributor address; City; State; Zip Code Washington, DC 20036	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Aida <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79119	Amount of Contribution (\$) \$260.73
Principal occupation / Job title (See Instructions) Commercial Loan Officer		Employer (See Instructions) Amarillo National Bank
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ag Air PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78768-4570	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/25 Rpt: 5/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 11/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin, Jane 6 Contributor address; City; State; Zip Code Amarillo, TX 79109	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Dentist		9 Employer (See Instructions) Austin & Tatum Dental
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BNSF Railway Company RAILPAC Contributor address; City; State; Zip Code Fort Worth, TX 76131-2828	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batson, Howard Contributor address; City; State; Zip Code Amarillo, TX 79119	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions) FBC Amarillo
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beef PAC Contributor address; City; State; Zip Code Amarillo, TX 79106-4617	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell Textron Political Committee Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/25 Rpt: 6/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 10/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bickerstaff, Clifton <hr/> 6 Contributor address; City; State; Zip Code Amarillo, TX 79109	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Banker		9 Employer (See Instructions) Amarillo National Bank
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bivens, Cody <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79102	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Senior Vice President		Employer (See Instructions) Amarillo National Bank
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bivins, Mark <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79105	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Rancher/Investments		Employer (See Instructions) Bivins/Childers
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bivins, Mark <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79105	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Rancher/Investments		Employer (See Instructions) Bivins/Childers
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackridge <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/25 Rpt: 7/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brentwood Public Affairs <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Britten, Josh <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79106	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Britkare
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadhurst, Blair <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79106	Amount of Contribution (\$) \$260.73
Principal occupation / Job title (See Instructions) EVP, Sales Operations & Marketing		Employer (See Instructions) The OccuNet Company
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burkett Outdoor Advertising LP <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79159	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00384818) CVS Health PAC <hr/> Contributor address; City; State; Zip Code Washington, DC 20004	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/25 Rpt: 8/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 11/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cameron, Casey <hr/> 6 Contributor address; City; State; Zip Code Amarillo, TX 79101	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Producer Owned Beef
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cammack & Strong, PC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Nancy <hr/> Contributor address; City; State; Zip Code Lindale, TX 75771	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cash, Ashley <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) CCC Capital Solutions, Inc
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloninger III, Kriss <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79124	Amount of Contribution (\$) \$5,000.00
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: 6/25 Rpt: 9/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 07/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloninger III, Kriss <hr/> 6 Contributor address; City; State; Zip Code Amarillo, TX 79124	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cluck, Monte <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79101	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Dean Cluck Feedyard
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conklin, Britt <hr/> Contributor address; City; State; Zip Code Bushland, TX 79012	Amount of Contribution (\$) \$260.73
Principal occupation / Job title (See Instructions) Veterinarian		Employer (See Instructions) Panhandle Equine Vet
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowley, Amy <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79119	Amount of Contribution (\$) \$260.73
Principal occupation / Job title (See Instructions) Non-Profit Director		Employer (See Instructions) Heart Gallery of the Panhandle Plains
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crumpton, John <hr/> Contributor address; City; State; Zip Code Old Saybrook, CT 06475	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) OccuNet

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/25 Rpt: 10/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 07/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easley, Dan <hr/> 6 Contributor address; City; State; Zip Code Amarillo, TX 79110	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elizalde, David <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79118	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) David's Quality Electric, Inc.
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gee, Greyson <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Domestic Affairs Manager		Employer (See Instructions) Rainmaker Technology Corporation
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs, Candy <hr/> Contributor address; City; State; Zip Code Bushland, TX 79012	Amount of Contribution (\$) \$260.73
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Hope Choice
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillis, Dixon <hr/> Contributor address; City; State; Zip Code Berwyn, PA 19312	Amount of Contribution (\$) \$5,208.65
Principal occupation / Job title (See Instructions) Insurance Sales		Employer (See Instructions) A-G Administrators LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/25 Rpt: 11/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grabbe, Roxanne <hr/> 6 Contributor address; City; State; Zip Code Canyon, TX 79015	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Banker		9 Employer (See Instructions) Amarillo National Bank
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graff, Rhonda <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HCA Texas Good Government Fund <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOMEPAC of the Texas Assn. of Builders <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOMEPAC of the Texas Assn. of Builders <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/25 Rpt: 12/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 10/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Charlie <hr/> 6 Contributor address; City; State; Zip Code San Juan, TX 00907	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Entrepreneur		9 Employer (See Instructions) Self Employed-Charlie Hamilton
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hance, Kent <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79409	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) HTTRR, LLC
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haning, Michael <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79118	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) DISCO, Inc
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks Pate Strategies LLC <hr/> Contributor address; City; State; Zip Code Austin, TX 78767	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodge, Jerry <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79101	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Investments		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: 10/25 Rpt: 13/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 11/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Ronny <hr/> 6 Contributor address; City; State; Zip Code Amarillo, TX 79159	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Congressman		9 Employer (See Instructions) US House of Representatives
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffreys, Holly <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79119	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) APRN/Dean		Employer (See Instructions) Panhandle Family Care
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirkendall, Sam <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79124	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Surgeon		Employer (See Instructions) Sam Kirkendall, MD
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaRoe, Laphe <hr/> Contributor address; City; State; Zip Code Groom, TX 79039	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Cattle Rancher		Employer (See Instructions) Smith Cattle Company
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamar, Lucas <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79109	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Rancher		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: 11/25 Rpt: 14/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lapp, Steve <hr/> 6 Contributor address; City; State; Zip Code Canyon, TX 79015	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Senior Vice President		9 Employer (See Instructions) The Fairly Group
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lardie, Linda <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79118	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lardie, Linda <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79118	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liles, Elizabeth <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79119	Amount of Contribution (\$) \$1,041.98
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Lizzy Lizzy Liles, LLC
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockwood, Carol <hr/> Contributor address; City; State; Zip Code Land O Lakes, FL 34639	Amount of Contribution (\$) \$1,041.98
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) The OccuNet Company

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/25 Rpt: 15/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 10/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loneragan, Guy <hr/> 6 Contributor address; City; State; Zip Code Canyon, TX 79015	7 Amount of Contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Texas Tech University
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loneragan, Guy <hr/> Contributor address; City; State; Zip Code Canyon, TX 79015	Amount of Contribution (\$) \$1,041.98
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Texas Tech University
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Looby, Rick <hr/> Contributor address; City; State; Zip Code Amarillo, TX 78159	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Looby Investments
Date 11/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAlexander, Seth <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79110	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) McAlexander Construction
Date 10/17/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: _____) McGuireWoods <hr/> Contributor address; City; State; Zip Code Richmond, VA 23219	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/25 Rpt: 16/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 07/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mercer, Dorothy <hr/> 6 Contributor address; City; State; Zip Code Follett, TX 79034	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messer, Judd <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Advanced Power Alliance
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Lindsay <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Align Public Affairs
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Tedd <hr/> Contributor address; City; State; Zip Code Celeste, TX 75423	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) State employee		Employer (See Instructions) Texas Tech University System
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moran, Carla <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79416	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/25 Rpt: 17/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 07/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Edward <hr/> 6 Contributor address; City; State; Zip Code Amarillo, TX 79121	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Joe <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79105-5387	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Independent Landman		Employer (See Instructions) Self Employed
Date 11/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrow, Kristi <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79118	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) MVP Amarillo
Date 10/17/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00366559</u>) NRG Energy Inc. Political Action Committee <hr/> Contributor address; City; State; Zip Code Princeton, NJ 08540	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nunn, Jeff <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79121	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) President/CEO		Employer (See Instructions) Citizens Bank

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/25 Rpt: 18/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 11/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patel, Dipakkumar <hr/> 6 Contributor address; City; State; Zip Code Amarillo, TX 79124	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Staybridge Suites
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pattengale, Michael <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79124	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Vice President Sales		Employer (See Instructions) The OccuNet Company
Date 11/18/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: 68564) Phillips 66 PAC <hr/> Contributor address; City; State; Zip Code Washington D.C., DC 20004	Amount of Contribution (\$) \$2,000.66
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Political Action Committee Of The Independent Insurance Agents Of <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pope, Clay <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$4,000.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Clay Pope

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/25 Rpt: 19/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 10/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Donald 6 Contributor address; City; State; Zip Code Amarillo, TX 79105	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Jennifer Contributor address; City; State; Zip Code Driftwood, TX 78619	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed-Jennifer Rodriguez
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Marc Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Self employed
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Dyke Contributor address; City; State; Zip Code Dalhart, TX 79022	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Rogco Management
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roller, Tom Contributor address; City; State; Zip Code Amarillo, TX 79124	Amount of Contribution (\$) \$1,041.98
Principal occupation / Job title (See Instructions) Commercial Real Estate		Employer (See Instructions) Coldwell Banker

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/25 Rpt: 20/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 09/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roller, Tom <hr/> 6 Contributor address; City; State; Zip Code Amarillo, TX 79124	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Commercial Real Estate		9 Employer (See Instructions) Coldwell Banker
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ron Lewis & Associates <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rural Friends of Texas Electric Cooperatives <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaeffer, David <hr/> Contributor address; City; State; Zip Code Dimmitt, TX 79027	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) First United Bank
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaeffer, David <hr/> Contributor address; City; State; Zip Code Dimmitt, TX 79027	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) First United Bank

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/25 Rpt: 21/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 07/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaeffer, Stanley 6 Contributor address; City; State; Zip Code Amarillo, TX 79119	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaeffer, Stanley Contributor address; City; State; Zip Code Amarillo, TX 79119	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sisemore, Trent Contributor address; City; State; Zip Code Amarillo, TX 79109	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self Employed
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Southwestern Committee On Political Education Contributor address; City; State; Zip Code Amarillo, TX 79101	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stallings, Kyle Contributor address; City; State; Zip Code Midland, TX 79702	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Desert Royalty Company

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/25 Rpt: 22/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 10/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stallings, Kyle <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79702	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Founder		9 Employer (See Instructions) Desert Royalty Company
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanca, Bogdan <hr/> Contributor address; City; State; Zip Code Fort Collins, CO 80528	Amount of Contribution (\$) \$5,208.65
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) OccuNet
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanley, Cole <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79106	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Texas Lionshare LLC
Date 07/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stinnett, Jimmy <hr/> Contributor address; City; State; Zip Code Fair Oaks Ranch, TX 78015	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Occupation: Group Vice President, EPC Pro		Employer (See Instructions) The Zachry Group
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Street, Laura <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79119	Amount of Contribution (\$) \$1,000.00
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: 20/25 Rpt: 23/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 09/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Street, Laura 6 Contributor address; City; State; Zip Code Amarillo, TX 79119	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swan, Dale Contributor address; City; State; Zip Code Amarillo, TX 79124	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREPAC-Texas Realtors PAC Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code Houston, TX 77098-3007	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Dairymen PAC Contributor address; City; State; Zip Code Lubbock, TX 79410	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/25 Rpt: 24/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 09/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Farm Bureau AGFUND <hr/> 6 Contributor address; City; State; Zip Code Waco, TX 76710	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Health Care Assn. PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78765	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Medical Association Political Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-1665	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Medical Association Political Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-1665	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Chickasaw Nation <hr/> Contributor address; City; State; Zip Code Ada, OK 74820	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/25 Rpt: 25/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 11/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Posey Law Firm <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tirey, Chris <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$1,041.98
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Walkabout Operating LLC
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TxAna PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/13/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: _____) Tyson Food Inc PAC <hr/> Contributor address; City; State; Zip Code Springdale, AR 72762	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) USA Feedyard <hr/> Contributor address; City; State; Zip Code Gruver, TX 79040	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/25 Rpt: 26/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 11/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) USA Feedyard <hr/> 6 Contributor address; City; State; Zip Code Gruver, TX 79040	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valero Political Action Committee <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78249	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valk, Philip <hr/> Contributor address; City; State; Zip Code Minnetrista, MN 55331	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Vice President of Sales		Employer (See Instructions) The OccuNet Company
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veterinarian PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ware, Patrick <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79109	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Banking		Employer (See Instructions) Amarillo National Bank

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/25 Rpt: 27/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 10/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ware, Richard <hr/> 6 Contributor address; City; State; Zip Code Amarillo, TX 79105	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Banker		9 Employer (See Instructions) Amarillo National Bank
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ware, William <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79109	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) Amarillo National Bank
Date 12/31/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: _____) Waste Managment Employees Better Government Funds (Federal PAC) <hr/> Contributor address; City; State; Zip Code Washington, DC 20004	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weekley, Richard <hr/> Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self Employed
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weinheimer, Benjamin <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79118	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) President and CEO		Employer (See Instructions) Texas Cattle Feeders Association

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/25 Rpt: 28/58
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079
4 Date 11/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wendler, Mary 6 Contributor address; City; State; Zip Code Canyon, TX 79015	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) Homemaker
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jay Contributor address; City; State; Zip Code Amarillo, TX 79119	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Executive Vice President		Employer (See Instructions) Producer Owned Beef

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: Sch: 1/2 Rpt: 29/58	
2 FILER NAME Fairly, Caroline (The Honorable)				3 Filer ID (Ethics Commission Filers) 00088079	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date 09/10/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eichler, Shera		8 Amount of contribution (\$) \$380.00		9 In-kind contribution description Flyers for Event
7 Contributor address; City; State; Zip Code Austin, TX 78701			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Founding Parter			11 Employer (FOR NON-JUDICIAL) (See instructions) Second Floor Strategies		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL) (See instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Shawn		Amount of contribution (\$) \$271.68		In-kind contribution description Fundraiser Supplies
Contributor address; City; State; Zip Code Amarillo, TX 79104			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Business Owner			Employer (FOR NON-JUDICIAL) (See instructions) Budweiser Distributing Co.		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OccuNet LLC		Amount of contribution (\$) \$12,576.21		In-kind contribution description Fundraiser Costs
Contributor address; City; State; Zip Code Amarillo, TX 79102			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)			Employer (FOR NON-JUDICIAL) (See instructions)		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/2 Rpt: 30/58	
2 FILER NAME Fairly, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088079	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 09/23/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREPAC-Texas Realtors PAC 7 Contributor address; City; State; Zip Code Austin, TX 78701	8 Amount of contribution (\$) \$125.00	9 In-kind contribution description Advertising
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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: 1/27 Rpt: 31/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 08/27/2025	5 Payee name Amarillo Chamber Of Commerce	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 1000 South Polk Street Amarillo, TX 79101	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DONATIONS - Donation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/17/2025	Payee name Amazon	
Amount (\$) \$44.90	Payee address; City; State; Zip Code 440 Terry Avenue North Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OVERHEAD - Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/30/2025	Payee name Amazon	
Amount (\$) \$69.16	Payee address; City; State; Zip Code 440 Terry Avenue North Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OVERHEAD - Office Supplies
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: 2/27 Rpt: 32/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 07/30/2025	5 Payee name Amazon	
6 Amount (\$) \$32.99	7 Payee address; City; State; Zip Code 440 Terry Avenue North Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OVERHEAD - Office Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/04/2025	Payee name Amazon	
Amount (\$) \$10.81	Payee address; City; State; Zip Code 440 Terry Avenue North Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OVERHEAD - Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/04/2025	Payee name Amazon	
Amount (\$) \$18.39	Payee address; City; State; Zip Code 440 Terry Avenue North Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OVERHEAD - Office Supplies
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: 3/27 Rpt: 33/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 09/19/2025	5 Payee name Amazon	
6 Amount (\$) \$24.90	7 Payee address; City; State; Zip Code 440 Terry Avenue North Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OVERHEAD - Office Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/29/2025	Candidate/Officeholder name Office sought Office held	
Payee name Amazon		
Amount (\$) \$12.23	Payee address; City; State; Zip Code 440 Terry Avenue North Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OVERHEAD - Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/25/2025	Candidate/Officeholder name Office sought Office held	
Payee name Amazon		
Amount (\$) \$6.81	Payee address; City; State; Zip Code 440 Terry Avenue North Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OVERHEAD - Office Supplies
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: 4/27 Rpt: 34/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 12/02/2025	5 Payee name Amazon	
6 Amount (\$) \$71.68	7 Payee address; City; State; Zip Code 440 Terry Avenue North Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OVERHEAD - Office Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/03/2025	Payee name Amazon	
Amount (\$) \$49.45	Payee address; City; State; Zip Code 440 Terry Avenue North Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OVERHEAD - Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/07/2025	Payee name Anedot	
Amount (\$) \$40.30	Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 FUNDRAISE - Credit 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: 5/27 Rpt: 35/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 07/14/2025	5 Payee name Anedot	
6 Amount (\$) \$120.60	7 Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 FUNDRAISE - Credit Card Processing Fees
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 Anedot	
Amount (\$) \$240.60	Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 FUNDRAISE - Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/06/2025	Payee name Anedot	
Amount (\$) \$200.30	Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 FUNDRAISE - Credit 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: 6/27 Rpt: 36/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 10/20/2025	5 Payee name Anedot	
6 Amount (\$) \$210.90	7 Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 FUNDRAISE - Credit Card Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2025	Payee name Anedot	
Amount (\$) \$704.94	Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 FUNDRAISE - Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2025	Payee name Anedot	
Amount (\$) \$250.63	Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 FUNDRAISE - Credit 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: 7/27 Rpt: 37/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 11/10/2025	5 Payee name Anedot	
6 Amount (\$) \$383.91	7 Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 FUNDRAISE - Credit Card Processing Fees
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 Anedot	
Amount (\$) \$535.59	Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 FUNDRAISE - Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2025	Payee name Anedot	
Amount (\$) \$269.98	Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 FUNDRAISE - Credit 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: 8/27 Rpt: 38/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 12/08/2025	5 Payee name Anedot	
6 Amount (\$) \$200.30	7 Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 FUNDRAISE - Credit Card Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/01/2025	Payee name Brown, Connie	
Amount (\$) \$1,300.00	Payee address; City; State; Zip Code 5040 South Coulter Drive #1901 Bryan, TX 77803	
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 CONSULT - Campaign Manager
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/01/2025	Payee name Brown, Connie	
Amount (\$) \$1,300.00	Payee address; City; State; Zip Code 5040 South Coulter Drive #1901 Bryan, TX 77803	
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 CONSULT - Campaign Manager
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: 9/27 Rpt: 39/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 09/01/2025	5 Payee name Brown, Connie	
6 Amount (\$) \$1,300.00	7 Payee address; City; State; Zip Code 5040 South Coulter Drive #1901 Bryan, TX 77803	
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 CONSULT - Campaign Manager
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/30/2025	Candidate/Officeholder name Brown, Connie	
Amount (\$) \$1,300.00	Payee address; City; State; Zip Code 5040 South Coulter Drive #1901 Bryan, TX 77803	
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 CONSULT - Campaign Manager
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/29/2025	Candidate/Officeholder name Brown, Connie	
Amount (\$) \$1,300.00	Payee address; City; State; Zip Code 5040 South Coulter Drive #1901 Bryan, TX 77803	
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 CONSULT - Campaign Manager
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/29/2025	Candidate/Officeholder name Brown, Connie	
Amount (\$) \$1,300.00	Payee address; City; State; Zip Code 5040 South Coulter Drive #1901 Bryan, TX 77803	
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 CONSULT - Campaign Manager
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: 10/27 Rpt: 40/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 12/01/2025	5 Payee name Brown, Connie	
6 Amount (\$) \$1,300.00	7 Payee address; City; State; Zip Code 5040 South Coulter Drive #1901 Bryan, TX 77803	
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 CONSULT - Campaign Manager
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/30/2025	Payee name Brown, Connie	
Amount (\$) \$1,300.00	Payee address; City; State; Zip Code 5040 South Coulter Drive #1901 Bryan, TX 77803	
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 CONSULT - Campaign Manager
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2025	Payee name Brown, Connie	
Amount (\$) \$1,025.30	Payee address; City; State; Zip Code 5040 South Coulter Drive #1901 Bryan, TX 77803	
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 TRAVELIN - Mileage
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: 11/27 Rpt: 41/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 11/21/2025	5 Payee name Capitol Gift Shop	
6 Amount (\$) \$776.15	7 Payee address; City; State; Zip Code 1400 South Congress Avenue Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 GIFTS - Thank you Gifts
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/05/2025	Payee name Capitol Gift Shop	
Amount (\$) \$234.86	Payee address; City; State; Zip Code 1400 South Congress Avenue Austin, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 GIFTS - Thank you Gifts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/07/2025	Payee name Community Foundation	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 9501 North Interstate Highway 35 Austin, TX 78753	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DONATIONS - Charitable
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: 12/27 Rpt: 42/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 11/12/2025	5 Payee name Cotton Court Hotel	
6 Amount (\$) \$812.20	7 Payee address; City; State; Zip Code 1610 Broadway Street Lubbock, TX 79401	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 TRAVELOUT - Lodging
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/02/2025	Payee name Google	
Amount (\$) \$46.05	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
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 OVERHEAD - Email Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/04/2025	Payee name Google	
Amount (\$) \$53.63	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
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 OVERHEAD - Email Subscription
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: 13/27 Rpt: 43/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 09/02/2025	5 Payee name Google	
6 Amount (\$) \$56.28	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
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 OVERHEAD - Email Subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/02/2025	Candidate/Officeholder name Office sought Office held	
Payee name Google		
Amount (\$) \$56.28	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
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 OVERHEAD - Email Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/03/2025	Candidate/Officeholder name Office sought Office held	
Payee name Google		
Amount (\$) \$56.28	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
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 OVERHEAD - Email Subscription
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: 14/27 Rpt: 44/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 12/02/2025	5 Payee name Google	
6 Amount (\$) \$56.28	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
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 OVERHEAD - Email Subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/11/2025	Candidate/Officeholder name Hooper, Reagan Elizabeth	
Amount (\$) \$263.92	Office sought 5725 Abilene Trail Austin, TX 78749	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Car Rental	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OTHER - Car Rental
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/03/2025	Candidate/Officeholder name Hooper, Reagan Elizabeth	
Amount (\$) \$383.62	Office sought 5725 Abilene Trail Austin, TX 78749	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Car Rental	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OTHER - Car Rental
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: 15/27 Rpt: 45/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 12/01/2025	5 Payee name Hyatt	
6 Amount (\$) \$238.33	7 Payee address; City; State; Zip Code 211 East 3rd Street Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 TRAVELOUT - Member Travel
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2025	Payee name Lincoln Reagan Dinner	
Amount (\$) \$10,000.00	Payee address; City; State; Zip Code 109 Chucker Street Amarillo, TX 79124	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DONATIONS - Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/21/2025	Payee name Mail Chimp	
Amount (\$) \$55.43	Payee address; City; State; Zip Code 405 North Angier Avenue Northeast Atlanta, GA 30308	
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 OVERHEAD - Email 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: 16/27 Rpt: 46/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 08/20/2025	5 Payee name Mail Chimp	
6 Amount (\$) \$55.43	7 Payee address; City; State; Zip Code 405 North Angier Avenue Northeast Atlanta, GA 30308	
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 OVERHEAD - Email Service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/19/2025	Candidate/Officeholder name Office sought Office held	
Payee name Mail Chimp		
Amount (\$) \$55.43	Payee address; City; State; Zip Code 405 North Angier Avenue Northeast Atlanta, GA 30308	
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 OVERHEAD - Email Service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/20/2025	Candidate/Officeholder name Office sought Office held	
Payee name Mail Chimp		
Amount (\$) \$55.43	Payee address; City; State; Zip Code 405 North Angier Avenue Northeast Atlanta, GA 30308	
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 OVERHEAD - 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: 17/27 Rpt: 47/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 11/19/2025	5 Payee name Mail Chimp	
6 Amount (\$) \$55.43	7 Payee address; City; State; Zip Code 405 North Angier Avenue Northeast Atlanta, GA 30308	
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 OVERHEAD - Email Service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/19/2025	Payee name Mail Chimp	
Amount (\$) \$55.43	Payee address; City; State; Zip Code 405 North Angier Avenue Northeast Atlanta, GA 30308	
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 OVERHEAD - Email Service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2025	Payee name Office Depot	
Amount (\$) \$194.94	Payee address; City; State; Zip Code 2622 Wolflin Avenue Amarillo, TX 79109	
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 OVERHEAD - Office Supplies
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: 18/27 Rpt: 48/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 11/18/2025	5 Payee name Office Depot	
6 Amount (\$) \$125.02	7 Payee address; City; State; Zip Code 2622 Wolflin Avenue Amarillo, TX 79109	
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 OVERHEAD - Office Supplies
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 Office Depot	
Amount (\$) \$25.95	Payee address; City; State; Zip Code 2622 Wolflin Avenue Amarillo, TX 79109	
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 OVERHEAD - Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/10/2025	Payee name Office Depot	
Amount (\$) \$50.74	Payee address; City; State; Zip Code 2622 Wolflin Avenue Amarillo, TX 79109	
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 OVERHEAD - Office Supplies
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: 19/27 Rpt: 49/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 09/17/2025	5 Payee name Panhandle Presort/Zip Print	
6 Amount (\$) \$1,008.92	7 Payee address; City; State; Zip Code 920 Southwest 9th Avenue Amarillo, TX 79101	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PRINTING - Printing and mailing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/12/2025	Payee name Republican Party of Texas	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 211 E 7th Street Ste 915 Austin, TX 78701	
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 FEES - Filing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2025	Payee name Ryan Data & Research	
Amount (\$) \$300.00	Payee address; City; State; Zip Code PO Box 202675 Austin, TX 78720-2675	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Early Voting Data	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OTHER - Early Voting Data
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: 20/27 Rpt: 50/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 09/29/2025	5 Payee name Southwest	
6 Amount (\$) \$164.89	7 Payee address; City; State; Zip Code 2702 Love Field Drive Dallas, TX 75235	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 TRAVELOUT - Airtravel to Austin
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/01/2025	Payee name Southwest	
Amount (\$) \$374.77	Payee address; City; State; Zip Code 2702 Love Field Drive Dallas, TX 75235	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 TRAVELOUT - Member Airtravel
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2025	Payee name Southwest	
Amount (\$) \$84.03	Payee address; City; State; Zip Code 2702 Love Field Drive Dallas, TX 75235	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 TRAVELOUT - Member Airtravel
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: 21/27 Rpt: 51/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 10/15/2025	5 Payee name Southwest	
6 Amount (\$) \$281.74	7 Payee address; City; State; Zip Code 2702 Love Field Drive Dallas, TX 75235	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 TRAVELOUT - Member Airtravel
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2025	Payee name Southwest	
Amount (\$) \$538.36	Payee address; City; State; Zip Code 2702 Love Field Drive Dallas, TX 75235	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 TRAVELOUT - Member Airtravel
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2025	Payee name Southwest	
Amount (\$) \$604.96	Payee address; City; State; Zip Code 2702 Love Field Drive Dallas, TX 75235	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 TRAVELOUT - Airtravel to Austin
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: 22/27 Rpt: 52/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 07/02/2025	5 Payee name Sparebox Storage	
6 Amount (\$) \$75.00	7 Payee address; City; State; Zip Code 601 Lawrence Boulevard Amarillo, TX 79101	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Storage	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OTHER - Storage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/04/2025	Candidate/Officeholder name Office sought Office held	
Payee name Sparebox Storage		
Amount (\$) \$88.00	Payee address; City; State; Zip Code 601 Lawrence Boulevard Amarillo, TX 79101	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Storage	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OTHER - Storage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/02/2025	Candidate/Officeholder name Office sought Office held	
Payee name Sparebox Storage		
Amount (\$) \$88.00	Payee address; City; State; Zip Code 601 Lawrence Boulevard Amarillo, TX 79101	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Storage	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OTHER - Storage
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: 23/27 Rpt: 53/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 10/02/2025	5 Payee name Sparebox Storage	
6 Amount (\$) \$88.00	7 Payee address; City; State; Zip Code 601 Lawrence Boulevard Amarillo, TX 79101	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Storage	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OTHER - Storage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/03/2025	Candidate/Officeholder name Office sought Office held	
Payee name Sparebox Storage		
Amount (\$) \$88.00	Payee address; City; State; Zip Code 601 Lawrence Boulevard Amarillo, TX 79101	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Storage	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OTHER - Storage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/02/2025	Candidate/Officeholder name Office sought Office held	
Payee name Sparebox Storage		
Amount (\$) \$88.00	Payee address; City; State; Zip Code 601 Lawrence Boulevard Amarillo, TX 79101	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Storage	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OTHER - Storage
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: 24/27 Rpt: 54/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 11/20/2025	5 Payee name The Ivy Flowers	
6 Amount (\$) \$951.78	7 Payee address; City; State; Zip Code 3602 Mockingbird Lane Amarillo, TX 79109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EVENT - Flowers for Event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/25/2025	Candidate/Officeholder name Thomas Graphics	
Amount (\$) \$5,647.61	Office sought Office held	
Purpose of Expenditure	Payee name Thomas Graphics	
Purpose of Expenditure	Payee address; City; State; Zip Code 9501 North Interstate Highway 35 Austin, TX 78753	
Purpose of Expenditure	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PRINTING - Printing and Mailing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/20/2025	Candidate/Officeholder name Thomas Graphics	
Amount (\$) \$5,142.96	Office sought Office held	
Purpose of Expenditure	Payee name Thomas Graphics	
Purpose of Expenditure	Payee address; City; State; Zip Code 9501 North Interstate Highway 35 Austin, TX 78753	
Purpose of Expenditure	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PRINTING - Printing and Mailing
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: 25/27 Rpt: 55/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 07/02/2025	5 Payee name USPS	
6 Amount (\$) \$192.00	7 Payee address; City; State; Zip Code 8301 West Amarillo Boulevard Amarillo, TX 79124	
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 OVERHEAD - Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/04/2025	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$8.00	Payee address; City; State; Zip Code 8301 West Amarillo Boulevard Amarillo, TX 79124	
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 OVERHEAD - Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/10/2025	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$87.58	Payee address; City; State; Zip Code 8301 West Amarillo Boulevard Amarillo, TX 79124	
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 OVERHEAD - Postage
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: 26/27 Rpt: 56/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 12/10/2025	5 Payee name USPS	
6 Amount (\$) \$140.20	7 Payee address; City; State; Zip Code 8301 West Amarillo Boulevard Amarillo, TX 79124	
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 OVERHEAD - Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/16/2025	Payee name USPS	
Amount (\$) \$46.20	Payee address; City; State; Zip Code 8301 West Amarillo Boulevard Amarillo, TX 79124	
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 OVERHEAD - Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2025	Payee name USPS	
Amount (\$) \$37.35	Payee address; City; State; Zip Code 8301 West Amarillo Boulevard Amarillo, TX 79124	
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 OVERHEAD - Postage
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: 27/27 Rpt: 57/58	2 FILER NAME Fairly, Caroline (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088079
4 Date 10/31/2025	5 Payee name United Airlines	
6 Amount (\$) \$506.98	7 Payee address; City; State; Zip Code 233 South Wacker Drive Chicago, IL 60606	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of 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 TRAVELOUT - Staff Travel to Austin
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
Sch: 1/1 Rpt: 58/58

2 FILER NAME

Fairly, Caroline (The Honorable)

3 Filer ID (Ethics Commission Filers)
00088079

4 Date

12/05/2025

5 Name of person from whom amount is received

Hobby Lobby

8 Amount (\$)

\$94.52

6 Address of person from whom amount is received; City; State; Zip Code

Amarillot, TX 79106

7 Purpose for which amount is received

Refund of Supplies for Event

☐ Check if political contribution returned to filer

Date

12/11/2025

Name of person from whom amount is received

Office Depot

Amount (\$)

\$8.65

Address of person from whom amount is received; City; State; Zip Code

Amarillo, TX 79109

Purpose for which amount is received

Office Supplies Refund

☐ Check if political contribution returned to filer