

**SPECIFIC-PURPOSE COMMITTEE  
CAMPAIGN FINANCE REPORT**

**FORM SPAC  
COVER SHEET PG 1**

The SPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00065047	2 Total pages filed: 30				
3 COMMITTEE NAME Texans for Joan Huffman		<b>OFFICE USE ONLY</b> Date Received <b>ELECTRONICALLY FILED</b> 02/02/2026  Date Hand-delivered or Date Postmarked  Receipt # <input type="text"/> Amount <input type="text"/>  Date Processed  Date Imaged					
4 COMMITTEE ADDRESS 3733-1 Westheimer Rd. Suite 40 Houston, TX 77027							
5 CAMPAIGN TREASURER NAME  <hr/>	MS / MRS / MR Mr.			FIRST Jeb	MI		
	NICKNAME  <hr/>	LAST Brown	SUFFIX				
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 2900 Weslayan Ste 580 Houston, TX 77027		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET OR PO BOX; 2900 Weslayan Ste 580 Houston, TX 77027		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE (713) 439-1988	PHONE NUMBER	EXTENSION				
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> July 15		<input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff	<input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> 10th day after campaign treasurer termination			
10 PERIOD COVERED	Month 01/01/2026	Day	Year	THROUGH	Month 01/22/2026	Day	Year
11 ELECTION	ELECTION DATE Month 03/03/2026	Day	Year	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special			

**GO TO PAGE 2**

**SPECIFIC-PURPOSE COMMITTEE REPORT:  
PURPOSE AND TOTALS**

**FORM SPAC  
COVER SHEET PG 2**

<b>12 COMMITTEE NAME</b> Texans for Joan Huffman		<b>13 FILER ID</b> (Ethics Commission Filers) 00065047	
<b>14 COMMITTEE PURPOSE</b>  (Attach lists on plain paper to complete this report if necessary.)	<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Officeholder	CANDIDATE / OFFICEHOLDER NAME Sen. Joan Huffman	
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Attorney General	
	<input checked="" type="checkbox"/> SUPPORT (Candidate or Measure)  <input type="checkbox"/> OPPOSE (Candidate or Measure)  <input type="checkbox"/> ASSIST (Officeholder)	BALLOT IDENTIFICATION / #	ELECTION DATE Month Day Year
		<input type="checkbox"/> Measure	DESCRIPTION
<b>15 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED	\$ \$0.00	
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ \$440,026.99	
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ \$1,150.45	
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ \$545,118.72	
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ \$2,439,556.00	
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ \$0.00	
<b>16 AFFIDAVIT</b>			
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.			
Mr. Jeb Brown _____ Signature of Campaign Treasurer			
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 oath		_____ Printed name of officer administering oath	
_____ Signature of officer administering oath		_____ Title of officer administering oath	

## **SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE**

# FORM SPAC APPENDUM

Page 3 of 30

<b>12 COMMITTEE NAME</b> Texans for Joan Huffman		<b>13 Filer ID</b> (Ethics Commission Filers) 00065047	
<b>14 COMMITTEE PURPOSE</b>  (Attach lists on plain paper to complete this report if necessary.)	<input type="checkbox"/> CANDIDATE  <input checked="" type="checkbox"/> OFFICE HOLDER	<b>CANDIDATE / OFFICE HOLDER NAME</b> Sen. Joan Huffman	
		<b>OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)</b> State Senator	
	<input type="checkbox"/> SUPPORT (Candidate or Measure)	<b>BALLOT IDENTIFICATION</b>	<b>ELECTION DATE</b> MONTH DAY YEAR
		<input type="checkbox"/> OPPOSE (Candidate or Measure)	<b>DESCRIPTION</b>
<input checked="" type="checkbox"/> ASSIST (Officeholders only)			

**SUBTOTALS - SPAC****FORM SPAC**  
**COVER SHEET PG 3**  
4 of 30

<b>17</b> COMMITTEE NAME Texans for Joan Huffman	<b>18</b> Filer ID (Ethics Commission Filers) 00065047
<b>19</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	
4. <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	
5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	
6. <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	
7. <input type="checkbox"/> SCHEDULE E: LOANS	
8. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
9. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	
10. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	
11. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	
12. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	
13. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
14. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/15 Rpt: 5/30
<b>2</b> FILER NAME Texans for Joan Huffman		<b>3</b> Filer ID (Ethics Commission Filers) 00065047
<b>4</b> Date 01/20/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMEGY BANK OF TEXAS PAC ..... <b>6</b> Contributor address; City; State; Zip Code  HOUSTON, TX 77027	<b>7</b> Amount of Contribution (\$) \$3,500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ATHARI, MOHAMMAD (Dr.) ..... Contributor address; City; State; Zip Code  BAYTOWN, TX 77521	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BADIOZZAMANI, REZA ..... Contributor address; City; State; Zip Code  MCALLEN, TX 78504	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) B2Z ENGINEERING
Date 01/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUGUS, HEIDI ..... Contributor address; City; State; Zip Code  DALLAS, TX 75212	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEER ALLIANCE OF TEXAS 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)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/15 Rpt: 6/30
<b>2</b> FILER NAME Texans for Joan Huffman		<b>3</b> Filer ID (Ethics Commission Filers) 00065047
<b>4</b> Date 01/20/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSTON, ALTON	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  BELTON, TX 76513	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOULWARE, TRACY	Amount of Contribution (\$) \$750.00
	Contributor address; City; State; Zip Code  HOUSTON, TX 77270	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADY, ZACHARY	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  LUBBOCK, TX 79401	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRISCH, MICHAEL	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  HOUSTON, TX 77005	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, BILLY	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code  SUGAR LAND, TX 77479	
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) BIG EASY RANCH

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/15 Rpt: 7/30
<b>2</b> FILER NAME Texans for Joan Huffman		<b>3</b> Filer ID (Ethics Commission Filers) 00065047
<b>4</b> Date 01/20/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, SUSAN	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>6</b> Contributor address; City; State; Zip Code  HOUSTON, TX 77024	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS BAIL BONDS	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  HOUSTON, TX 77007	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS, JOHN	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  HOUSTON, TX 77007	
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) BURNS BAIL BONDS
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASO LAW FIRM PLLC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  EDINBURG, TX 78539	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELEON, RICHARD	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  BAY CITY, TX 77414	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/15 Rpt: 8/30
<b>2</b> FILER NAME Texans for Joan Huffman		<b>3</b> Filer ID (Ethics Commission Filers) 00065047
<b>4</b> Date 01/19/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEMPSEY, ROBERT	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  PLANO, TX 75024	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENSON, AL	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  HOUSTON, TX 77077	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEZEVALLOS, EDWARD	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  HOUSTON, TX 77024	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELDER, RAMSAY	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  HOUSTON, TX 77005	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINKELMAN, STEVEN	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  HOUSTON, TX 77096	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/15 Rpt: 9/30
<b>2</b> FILER NAME Texans for Joan Huffman		<b>3</b> Filer ID (Ethics Commission Filers) 00065047
<b>4</b> Date 01/09/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINKELMAN, STEVEN	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>6</b> Contributor address; City; State; Zip Code  HOUSTON, TX 77096	
<b>8</b> Principal occupation / Job title (See Instructions) FOUNDER AND PRESIDENT		<b>9</b> Employer (See Instructions) LA LOMITA
<b>Date</b> 01/14/2026	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, CARLOS	<b>Amount of Contribution (\$)</b> \$2,500.00
	<b>Contributor address; City; State; Zip Code</b>  PALMHURST, TX 78573	
<b>Principal occupation / Job title (See Instructions)</b> FOUNDER AND PRESIDENT		<b>Employer (See Instructions)</b> LA LOMITA
<b>Date</b> 01/14/2026	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) GODINEZ, BRIAN	<b>Amount of Contribution (\$)</b> \$500.00
	<b>Contributor address; City; State; Zip Code</b>  MCALLEN , TX 78504	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 01/19/2026	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODSON, PAMELA	<b>Amount of Contribution (\$)</b> \$500.00
	<b>Contributor address; City; State; Zip Code</b>  HOUSTON, TX 77079	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 01/19/2026	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAHAM, ROBERT	<b>Amount of Contribution (\$)</b> \$1,000.00
	<b>Contributor address; City; State; Zip Code</b>  HOUSTON, TX 77005	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/15 Rpt: 10/30
<b>2</b> FILER NAME Texans for Joan Huffman		<b>3</b> Filer ID (Ethics Commission Filers) 00065047
<b>4</b> Date 01/14/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAYDON STRAMA LUCIO GROUP ..... <b>6</b> Contributor address; City; State; Zip Code  AUSTIN, TX 78701	<b>7</b> Amount of Contribution (\$) \$2,000.00
	<b>8</b> Principal occupation / Job title (See Instructions) <b>9</b> Employer (See Instructions)	
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIGSBY, TODD ..... Contributor address; City; State; Zip Code  BATON ROUGE, LA 70808	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULF OF AMERICA LOGISTICS LLC ..... Contributor address; City; State; Zip Code  BOSSIER CITY, LA 71111	Amount of Contribution (\$) \$10,000.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASSENFLU, ALAN ..... Contributor address; City; State; Zip Code  BELLAIRE, TX 77401	Amount of Contribution (\$) \$100,000.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions) CEO FIDELIS REALTY PARTNERS, LTD.	
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGES, CAROLYN ..... Contributor address; City; State; Zip Code  HOUSTON, TX 77056	Amount of Contribution (\$) \$250.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/15 Rpt: 11/30
<b>2</b> FILER NAME Texans for Joan Huffman		<b>3</b> Filer ID (Ethics Commission Filers) 00065047
<b>4</b> Date 01/20/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOUSTON POLICE OFFICERS UNION PAC .....  <b>6</b> Contributor address; City; State; Zip Code  HOUSTON, TX 77007-7730	<b>7</b> Amount of Contribution (\$) \$5,000.00
	<b>8</b> Principal occupation / Job title (See Instructions) <b>9</b> Employer (See Instructions)	
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWELL, GINGER .....  Contributor address; City; State; Zip Code  HOUSTON, TX 77024	Amount of Contribution (\$) \$250.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAEHNE, JULIE .....  Contributor address; City; State; Zip Code  HOUSTON, TX 77024	Amount of Contribution (\$) \$250.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 01/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) K&L GATES LLP COMMITTEE FOR GOOD GOVERNMENT .....  Contributor address; City; State; Zip Code  DALLAS, TX 75201	Amount of Contribution (\$) \$2,000.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, CORY .....  Contributor address; City; State; Zip Code  HOUSTON, TX 77055	Amount of Contribution (\$) \$2,000.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions) FOUNDER AND CEO ASSURANCE MEDICATION MANAGEMENT	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/15 Rpt: 12/30
<b>2</b> FILER NAME Texans for Joan Huffman		<b>3</b> Filer ID (Ethics Commission Filers) 00065047
<b>4</b> Date 01/20/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANAGAN, LINDSAY	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  HOUSTON, TX 77009	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEFTWICH, BRENT	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  NEW ULM, TX 78950	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANUFACTURERS PAC OF TEXAS	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code  AUSTIN, TX 78711	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, GARY	Amount of Contribution (\$) \$100,000.00
	Contributor address; City; State; Zip Code  MARBLE FALLS, TX 75654	
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) FALCON BAY ENERGY LLC
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, DANIEL	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  HOUSTON, TX 77079	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/15 Rpt: 13/30
<b>2</b> FILER NAME Texans for Joan Huffman		<b>3</b> Filer ID (Ethics Commission Filers) 00065047
<b>4</b> Date 01/22/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEACHAM, LARRY	<b>7</b> Amount of Contribution (\$) \$1,000.00
	<b>6</b> Contributor address; City; State; Zip Code  CAT SPRING, TX 78933	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHAM, DAVID	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  HOUSTON, TX 77019	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOAK CASEY PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  AUSTIN, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOODY, MICHAEL	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code  HOUSTON, TX 77024	
Principal occupation / Job title (See Instructions) HOME BUILDER		Employer (See Instructions) SELF
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, PAM	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  CAT SPRING, TX 78933	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/15 Rpt: 14/30
<b>2</b> FILER NAME Texans for Joan Huffman		<b>3</b> Filer ID (Ethics Commission Filers) 00065047
<b>4</b> Date 01/22/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORIN, JULIE ..... <b>6</b> Contributor address; City; State; Zip Code  HOUSTON, TX 77005	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, RONALD ..... Contributor address; City; State; Zip Code  HOUSTON, TX 77024	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORSAK, BRIAN ..... Contributor address; City; State; Zip Code  LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWENS, RANDALL ..... Contributor address; City; State; Zip Code  HOUSTON, TX 77055	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, NOLAN (Dr.) ..... Contributor address; City; State; Zip Code  HARLINGEN, TX 78550	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) TEXAS DIGESTIVE SYSTEMS

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/15 Rpt: 15/30
<b>2</b> FILER NAME Texans for Joan Huffman		<b>3</b> Filer ID (Ethics Commission Filers) 00065047
<b>4</b> Date 01/14/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, JOSEPH	<b>7</b> Amount of Contribution (\$) \$2,500.00
	<b>6</b> Contributor address; City; State; Zip Code  MCALLEN, TX 78505	
<b>8</b> Principal occupation / Job title (See Instructions) DEVELOPER		<b>9</b> Employer (See Instructions) SELF
<b>Date</b> 01/20/2026	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) POARCH, DONALD	<b>Amount of Contribution (\$)</b> \$5,000.00
	<b>Contributor address; City; State; Zip Code</b>  HOUSTON, TX 77043	
<b>Principal occupation / Job title (See Instructions)</b> CHAIRMAN		<b>Employer (See Instructions)</b> LONGMONT CAPITAL
<b>Date</b> 01/20/2026	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) PRASEK, MICHAEL	<b>Amount of Contribution (\$)</b> \$500.00
	<b>Contributor address; City; State; Zip Code</b>  EL CAMPO, TX 77437	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 01/20/2026	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) REYES, GREGG	<b>Amount of Contribution (\$)</b> \$1,000.00
	<b>Contributor address; City; State; Zip Code</b>  HOUSTON, TX 77024	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 01/13/2026	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHMOND, CAROLYN	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  MEADOWLAKES, TX 75654	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/15 Rpt: 16/30
<b>2</b> FILER NAME Texans for Joan Huffman		<b>3</b> Filer ID (Ethics Commission Filers) 00065047
<b>4</b> Date 01/20/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROTHFELDER & FALICK, LLP ..... <b>6</b> Contributor address; City; State; Zip Code  HOUSTON, TX 77008	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RRP CONSULTING ENGINEERS LLC ..... Contributor address; City; State; Zip Code  MCALLEN, TX 78504	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUBIANO, RICARDO ..... Contributor address; City; State; Zip Code  WESLACO, TX 78599	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) FOUNDER AND PRINCIPAL		Employer (See Instructions) RUBI GROUP CAPITAL
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUPPERT, KYLE ..... Contributor address; City; State; Zip Code  EDINBURG, TX 78541	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) SANTA CRUZ PROPERTIES
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNOOTS, AMY ..... Contributor address; City; State; Zip Code  HOUSTON, TX 77024	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/15 Rpt: 17/30
<b>2</b> FILER NAME Texans for Joan Huffman		<b>3</b> Filer ID (Ethics Commission Filers) 00065047
<b>4</b> Date 01/14/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPAMER, JOAQUIN ..... <b>6</b> Contributor address; City; State; Zip Code  MCALLEN, TX 78503	<b>7</b> Amount of Contribution (\$) \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions) PRESIDENT		<b>9</b> Employer (See Instructions) CI LOGISTICS GROUP
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXANS FOR GOOD GOVERNMENT PAC ..... Contributor address; City; State; Zip Code  HOUSTON, TX 77007	Amount of Contribution (\$) \$50,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXAS ASSOCIATION OF HEALTH PLANS PAC ..... Contributor address; City; State; Zip Code  AUSTIN, TX 78701	Amount of Contribution (\$) \$6,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THE LAW OFFICE OF BRIAN ETTINGER PLLC ..... Contributor address; City; State; Zip Code  HOUSTON, TX 77084	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, WILL (The Honorable) ..... Contributor address; City; State; Zip Code  CORSICANA, TX 75109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/15 Rpt: 18/30
<b>2</b> FILER NAME Texans for Joan Huffman		<b>3</b> Filer ID (Ethics Commission Filers) 00065047
<b>4</b> Date 01/16/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TILL, MARSHALL	<b>7</b> Amount of Contribution (\$) \$1,500.00
	<b>6</b> Contributor address; City; State; Zip Code  LONGVIEW, TX 75605	
<b>8</b> Principal occupation / Job title (See Instructions) OWNER		<b>9</b> Employer (See Instructions) MLT MANAGEMENT
<b>Date</b> 01/20/2026	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) TOOMEY, MICHAEL	<b>Amount of Contribution (\$)</b> \$1,000.00
	<b>Contributor address; City; State; Zip Code</b>  AUSTIN, TX 78731	
<b>Principal occupation / Job title (See Instructions)</b> CONSULTANT		<b>Employer (See Instructions)</b> THE OLYMPUS GROUP
<b>Date</b> 01/14/2026	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, RIGOBERTO	<b>Amount of Contribution (\$)</b> \$1,500.00
	<b>Contributor address; City; State; Zip Code</b>  MISSION, TX 78572	
<b>Principal occupation / Job title (See Instructions)</b> CONSULTANT		<b>Employer (See Instructions)</b> THE OLYMPUS GROUP
<b>Date</b> 01/21/2026	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) VOTH, RICKY	<b>Amount of Contribution (\$)</b> \$250.00
	<b>Contributor address; City; State; Zip Code</b>  HOUSTON, TX 77008	
<b>Principal occupation / Job title (See Instructions)</b> CONSULTANT		<b>Employer (See Instructions)</b> THE OLYMPUS GROUP
<b>Date</b> 01/21/2026	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) WASEK, DONALD	<b>Amount of Contribution (\$)</b> \$50,000.00
	<b>Contributor address; City; State; Zip Code</b>  SPICEWOOD, TX 78669	
<b>Principal occupation / Job title (See Instructions)</b> BUSINESS OWNER		<b>Employer (See Instructions)</b> BUC-EE'S

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/15 Rpt: 19/30
<b>2</b> FILER NAME Texans for Joan Huffman		<b>3</b> Filer ID (Ethics Commission Filers) 00065047
<b>4</b> Date 01/20/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITMIRE, WHITNEY ..... <b>6</b> Contributor address; City; State; Zip Code  HOUSTON, TX 77018	<b>7</b> Amount of Contribution (\$) \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YIDA HOLDINGS LLC ..... Contributor address; City; State; Zip Code  HOUSTON, TX 77036	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) DENTIST		Employer (See Instructions) RODEO DENTAL & ORTHODONTICS
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZARRABI, SAAM ..... Contributor address; City; State; Zip Code  IRVING, TX 75038	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) DENTIST	Employer (See Instructions) RODEO DENTAL & ORTHODONTICS	
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZHITNITSKY, JULIANNA ..... Contributor address; City; State; Zip Code  HOUSTON, TX 77027	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

<p><b>The Instruction Guide explains how to complete this form.</b></p>				<p><b>1</b> Total pages Schedule A2: Sch: 1/2 Rpt: 20/30</p>
<p><b>2</b> FILER NAME Texans for Joan Huffman</p>				<p><b>3</b> Filer ID (Ethics Commission Filers) 00065047</p>
<p><b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				\$
<p><b>5</b> Date 01/20/2026</p>	<p><b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAYALA, MANO</p>			<p><b>8</b> Amount of contribution (\$) \$2,103.45</p> <p><b>9</b> In-kind contribution description EVENT FEES AND EXPENSES</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
	<p><b>7</b> Contributor address; City; State; Zip Code  HOUSTON, TX 77024</p>			
<p><b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) ATTORNEY</p>		<p><b>11</b> Employer (FOR NON-JUDICIAL) (See instructions) BUCK KEENAN LLP</p>		
<p><b>12</b> Contributor's principal occupation (FOR JUDICIAL)</p>		<p><b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p><b>14</b> Contributor's employer/law firm (FOR JUDICIAL)</p>		<p><b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p><b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 01/22/2026</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGG, KIM</p>			<p>Amount of contribution (\$) \$1,370.00</p> <p>In-kind contribution description EVENT FEES AND EXPENSES</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
	<p>Contributor address; City; State; Zip Code  HOUSTON, TX 77027</p>			
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) ATTORNEY</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions) GREGOR WYNNE ARNEY PLLC</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 01/14/2026</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, RENE</p>			<p>Amount of contribution (\$) \$2,433.54</p> <p>In-kind contribution description EVENT FEES AND EXPENSES</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
	<p>Contributor address; City; State; Zip Code  MCALLEN, TX 78504</p>			
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) CONSULTANT</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions) SELF</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

<p><b>The Instruction Guide explains how to complete this form.</b></p>				<p><b>1</b> Total pages Schedule A2: Sch: 2/2 Rpt: 21/30</p>
<p><b>2</b> FILER NAME Texans for Joan Huffman</p>				<p><b>3</b> Filer ID (Ethics Commission Filers) 00065047</p>
<p><b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				\$
<p><b>5</b> Date 01/14/2026</p>	<p><b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SENZ, SERGIO  <b>7</b> Contributor address; City; State; Zip Code  MISSION, TX 78572</p>			<p><b>8</b> Amount of contribution (\$) \$13,000.00</p> <p><b>9</b> In-kind contribution description AIR TRANSPORTATION TO CAMPAIGN EVENT</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p><b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) BUSINESS OWNER</p>		<p><b>11</b> Employer (FOR NON-JUDICIAL) (See instructions) SELF</p>		
<p><b>12</b> Contributor's principal occupation (FOR JUDICIAL)</p>		<p><b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p><b>14</b> Contributor's employer/law firm (FOR JUDICIAL)</p>		<p><b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p><b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 01/22/2026</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYNNE, MICHAEL  Contributor address; City; State; Zip Code  HOUSTON, TX 77055</p>			<p>Amount of contribution (\$) \$1,370.00</p> <p>In-kind contribution description EVENT FEES AND EXPENSES</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) ATTORNEY</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions) GREGOR WYNNE ARNEY PLLC</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/9 Rpt: 22/30	2 FILER NAME Texans for Joan Huffman	3 Filer ID (Ethics Commission Filers) 00065047
4 Date 01/21/2026	5 Payee name ADCRUNCH	
6 Amount (\$) \$393,841.00	7 Payee address; City; State; Zip Code 7907 MOONFLOWER DR  AUSTIN, TX 78750	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  POLITICAL ADVERTISING
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/06/2026	Payee name ANEDOT	
Amount (\$) \$210.90	Payee address; City; State; Zip Code 5555 HILTON AVE SUITE 106 BATON ROUGE , LA 70808	
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  CREDIT CARDS FEES FOR CAMPAIGN CONTRIBUTIONS
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/09/2026	Payee name ANEDOT	
Amount (\$) \$20.60	Payee address; City; State; Zip Code 5555 HILTON AVE SUITE 106 BATON ROUGE , LA 70808	
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  CREDIT CARDS FEES FOR CAMPAIGN CONTRIBUTIONS
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/9 Rpt: 23/30	2 FILER NAME Texans for Joan Huffman	3 Filer ID (Ethics Commission Filers) 00065047
4 Date 01/12/2026	5 Payee name ANEDOT	
6 Amount (\$) \$10.30	7 Payee address; City; State; Zip Code 5555 HILTON AVE SUITE 106 BATON ROUGE , LA 70808	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARDS FEES FOR CAMPAIGN CONTRIBUTIONS
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/14/2026	Payee name ANEDOT	
Amount (\$) \$10.30	Payee address; City; State; Zip Code 5555 HILTON AVE SUITE 106 BATON ROUGE , LA 70808	
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 CREDIT CARDS FEES FOR CAMPAIGN CONTRIBUTIONS
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/16/2026	Payee name ANEDOT	
Amount (\$) \$100.30	Payee address; City; State; Zip Code 5555 HILTON AVE SUITE 106 BATON ROUGE , LA 70808	
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 CREDIT CARDS FEES FOR CAMPAIGN CONTRIBUTIONS
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/9 Rpt: 24/30	2 FILER NAME Texans for Joan Huffman	3 Filer ID (Ethics Commission Filers) 00065047
4 Date 01/21/2026	5 Payee name ANEDOT	
6 Amount (\$) \$60.30	7 Payee address; City; State; Zip Code 5555 HILTON AVE SUITE 106 BATON ROUGE , LA 70808	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARDS FEES FOR CAMPAIGN CONTRIBUTIONS
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/22/2026	Payee name ANEDOT	
Amount (\$) \$184.40	Payee address; City; State; Zip Code 5555 HILTON AVE SUITE 106 BATON ROUGE , LA 70808	
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 CREDIT CARDS FEES FOR CAMPAIGN CONTRIBUTIONS
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/22/2026	Payee name ANEDOT	
Amount (\$) \$10.30	Payee address; City; State; Zip Code 5555 HILTON AVE SUITE 106 BATON ROUGE , LA 70808	
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 CREDIT CARDS FEES FOR CAMPAIGN CONTRIBUTIONS
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/9 Rpt: 25/30	2 FILER NAME Texans for Joan Huffman	3 Filer ID (Ethics Commission Filers) 00065047
4 Date 01/15/2026	5 Payee name BLAKEMORE PUBLIC AFFAIRS	
6 Amount (\$) \$25,000.00	7 Payee address; City; State; Zip Code 1 E GREENWAY PLAZA STE 225 HOUSTON, TX 77046	
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 CAMPAIGN PROFESSIONAL SERVICES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/05/2026	Payee name BRAZORIA COUNTY REPUBLICAN PARTY	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 135 SPANISH OAK CIRCLE  LAKE JACKSON, TX 77566	
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 POLITICAL DONATION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/21/2026	Payee name CADILLAC BAR	
Amount (\$) \$2,959.56	Payee address; City; State; Zip Code 1802 SHEPHERD DR  HOUSTON, TX 77007	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FOOD AND BEVERAGE FOR CAMPAIGN EVENT
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/9 Rpt: 26/30	2 FILER NAME Texans for Joan Huffman	3 Filer ID (Ethics Commission Filers) 00065047
4 Date 01/15/2026	5 Payee name CARDINAL STRATEGIES GROUP LLC	
6 Amount (\$) \$10,000.00	7 Payee address; City; State; Zip Code 5957 CAPE CORAL DR  AUSTIN, TX 78746	
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 CAMPAIGN PROFESSIONAL SERVICES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/15/2026	Payee name CATALYST ADVISORS GROUP	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1108 LAVACA ST 110-506 AUSTIN, TX 78701	
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 OFFICE SPACE FOR CAMPAIGN
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/09/2026	Payee name DEPARTMENT OF THE TREASURY	
Amount (\$) \$17,013.00	Payee address; City; State; Zip Code INTERNAL REVENUE SERVICE  OGDEN, UT 84201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) FEDERAL INCOME TAXES	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEDERAL INCOME TAXES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/9 Rpt: 27/30	2 FILER NAME Texans for Joan Huffman	3 Filer ID (Ethics Commission Filers) 00065047
4 Date 01/09/2026	5 Payee name HILTON - FT WORTH	
6 Amount (\$) \$245.46	7 Payee address; City; 815 MAIN ST  FT WORTH, TX 76102	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LODGING TO ATTEND CAMPAIGN EVENT
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/09/2026	Payee name HILTON - FT WORTH	
Amount (\$) \$275.38	Payee address; City; 815 MAIN ST  FT WORTH, TX 76102	State; Zip Code
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 LODGING TO ATTEND CAMPAIGN EVENT
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/07/2026	Payee name INTERSTATE INN	
Amount (\$) \$227.12	Payee address; City; 811 EAST ROAD  STEPHENVILLE, TX 76401	State; Zip Code
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 LODGING TO ATTEND CAMPAIGN EVENT
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/9 Rpt: 28/30	2 FILER NAME Texans for Joan Huffman	3 Filer ID (Ethics Commission Filers) 00065047
4 Date 01/07/2026	5 Payee name INTERSTATE INN	
6 Amount (\$) \$227.13	7 Payee address; City; State; Zip Code 811 EAST ROAD  STEPHENVILLE, TX 76401	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LODGING TO ATTEND CAMPAIGN EVENT
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/15/2026	Payee name JOHN DONER & ASSOCIATES INC	
Amount (\$) \$1,271.94	Payee address; City; State; Zip Code 1005 CONGRESS AVE STE 580 AUSTIN, TX 78701	
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 DESIGN AND PRINT CAMPAIGN PUSH CARDS
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/05/2026	Payee name LAND ROVER FINANCIAL GROUP	
Amount (\$) \$737.47	Payee address; City; State; Zip Code P O BOX 650546  DALLAS, TX 75265	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN VEHICLE EXPENSE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/9 Rpt: 29/30	2 FILER NAME Texans for Joan Huffman	3 Filer ID (Ethics Commission Filers) 00065047
4 Date 01/09/2026	5 Payee name POST AND PARCEL	
6 Amount (\$) \$245.00	7 Payee address; City; State; Zip Code 3733 WESTHEIMER  HOUSTON, TX 77027	
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 POST OFFICE BOX RENTAL FOR OFFICEHOLDER'S HOUSTON OFFICE
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/05/2026	Payee name PUBLIC STORAGE	
Amount (\$) \$239.50	Payee address; City; State; Zip Code 1213 W 6TH ST  AUSTIN, TX 78701	
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 STORAGE FOR OFFICEHOLDER'S AUSTIN OFFICE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/05/2026	Payee name PUBLIC STORAGE	
Amount (\$) \$183.00	Payee address; City; State; Zip Code 2603 JOEL WHEATON ROAD STE 400 HOUSTON, TX 77082	
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 STORAGE FOR OFFICEHOLDER'S HOUSTON OFFICE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/9 Rpt: 30/30	2 FILER NAME Texans for Joan Huffman	3 Filer ID (Ethics Commission Filers) 00065047
4 Date 01/15/2026	5 Payee name RACONTEUR COMPANY	
6 Amount (\$) \$20,787.31	7 Payee address; City; P O BOX 26511  AUSTIN, TX 78755	State; Zip Code
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 CAMPAIGN PROFESSIONAL SERVICES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/22/2026	Payee name TEXAS PRESS SERVICE INC	
Amount (\$) \$64,108.00	Payee address; City; 8800 BUSINESS PARK DRIVE #100 AUSTIN, TX 78759	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL ADVERTISING
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held