

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) 00056697	2 Total pages filed: 28		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST R. Christopher	MI	OFFICE USE ONLY		
	NICKNAME	LAST Bell	SUFFIX	Date Received ELECTRONICALLY FILED 01/15/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; P.O. Box 2161 Houston, TX 77252			Date Hand-delivered or Date Postmarked		
				Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Billy	FIRST	MI			
	NICKNAME	LAST Briscoe	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); P.O. Box 2161 Houston, TX 77252		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (469) 909-1623					
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)					
9 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special			
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known) Governor		

GO TO PAGE 2

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

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

2 of 28

13 C / OH NAME	Bell, R. Christopher (Mr.)		14 Filer ID (Ethics Commission Filers) 00056697
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 33,286.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 45.38
	4. TOTAL POLITICAL EXPENDITURES		\$ 122,853.30
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 4,622.49
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.

Mr. R. Christopher Bell

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**

3 of 28

18 FILER NAME	19 Filer ID	(Ethics Commission Filers)
Bell, R. Christopher (Mr.)	00056697	
20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	33,286.00
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	28,663.55
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	94,189.75
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	\$	0.04

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/5 Rpt: 4/28
2 FILER NAME Bell, R. Christopher (Mr.)		3 Filer ID (Ethics Commission Filers) 00056697
4 Date 11/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alley, Steve 6 Contributor address; City; State; Zip Code Houston, TX 77005	7 Amount of Contribution (\$) \$300.00
	8 Principal occupation / Job title (See Instructions) Not Employed	9 Employer (See Instructions) N/A
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barron, Thomas Contributor address; City; State; Zip Code Dallas, TX 75204	Amount of Contribution (\$) \$200.00
	Principal occupation / Job title (See Instructions) Attorney	Employer (See Instructions) Self-Employed
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Chris Contributor address; City; State; Zip Code Houston, TX 77252	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions) Attorney	Employer (See Instructions) Bell Hagens PLLC
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Chris Contributor address; City; State; Zip Code Houston, TX 77252	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Attorney	Employer (See Instructions) Bell Hagens PLLC
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boehme, George Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$200.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/5 Rpt: 5/28
2 FILER NAME Bell, R. Christopher (Mr.)		3 Filer ID (Ethics Commission Filers) 00056697
4 Date 11/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Terry	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code HOUSTON, TX 77092	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chheda, Sachin	Amount of Contribution (\$) \$101.00
	Contributor address; City; State; Zip Code Milwaukee, WI 53211	
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) WI Dept of Public Instruction
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clifford, Stewart	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Provincetown, MA 02657-0000	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Stewart Clifford Gallery
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, David	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Missouri City, TX 77489	
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) FCM Engineers P C
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frankowski, Richard	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Birmingham, AL 35205	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Frankowski Firm

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/5 Rpt: 6/28
2 FILER NAME Bell, R. Christopher (Mr.)		3 Filer ID (Ethics Commission Filers) 00056697
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frankowski, Richard	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Birmingham, AL 35205	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) The Frankowski Firm
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, John Michael	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Washington, DC 20001	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Tiber Creek Group
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, William	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Bastrop, TX 78602	
Principal occupation / Job title (See Instructions) General Handyman		Employer (See Instructions) William Harper
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Higley, Garrett	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Austin, TX 78703	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Self-Employed
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowenberg, Mike	Amount of Contribution (\$) \$25,000.00
	Contributor address; City; State; Zip Code Houston, TX 77056	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Lowenberg Law Firm

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/5 Rpt: 7/28
2 FILER NAME Bell, R. Christopher (Mr.)		3 Filer ID (Ethics Commission Filers) 00056697
4 Date 12/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAllen, Roman	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Houston, TX 77007	
8 Principal occupation / Job title (See Instructions) Staff		9 Employer (See Instructions) City of Houston
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Menchaca, Gerardo	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) E&P
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ragusa, Elysia	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78731	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Roy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Dallas, TX 75248	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) DISD
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiher, Joie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Brea, CA 92823	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 5/5 Rpt: 8/28
2 FILER NAME Bell, R. Christopher (Mr.)			3 Filer ID (Ethics Commission Filers) 00056697
4 Date 11/18/2025	5 Full name of contributor Zhonga, Elis 6 Contributor address; City; State; Zip Code Houston, TX 77006	7 Amount of Contribution (\$) \$2,000.00	
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Pipeline Equities LLC	
Date 12/18/2025	Full name of contributor Zhonga, Elis Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$50.00	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Pipeline Equities LLC	

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: 1/14 Rpt: 9/28	2 FILER NAME Bell, R. Christopher (Mr.)	3 Filer ID (Ethics Commission Filers) 00056697
4 Date 12/31/2025	5 Payee name ActBlue Technical Services	
6 Amount (\$) \$269.02	7 Payee address; City; PO Box 441146 West Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/16/2025	Payee name Azumi Houston	
Amount (\$) \$20.83	Payee address; City; 4444 Westheimer Rd Suite G-130 Houston, TX 77027	
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 Meals
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name Bell, Connally	
Amount (\$) \$2,418.07	Payee address; City; PO Box 2161 Houston, TX 77252	
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 Video and Podcast Production
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: 2/14 Rpt: 10/28	2 FILER NAME Bell, R. Christopher (Mr.)	3 Filer ID (Ethics Commission Filers) 00056697
4 Date 10/20/2025	5 Payee name Best Buy	
6 Amount (\$) \$139.73	7 Payee address; City; State; Zip Code 5133 Richmond Ave Houston, TX 77056	
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 Office Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/17/2025	Payee name Clarkwood	
Amount (\$) \$373.20	Payee address; City; State; Zip Code 3201 Allen Pkwy Suite 190 Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name Ducky McShweeney	
Amount (\$) \$72.79	Payee address; City; State; Zip Code 2025 Post Oak Blvd Suite B Houston, TX 77056	
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 Meals
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: 3/14 Rpt: 11/28	2 FILER NAME Bell, R. Christopher (Mr.)	3 Filer ID (Ethics Commission Filers) 00056697
4 Date 10/17/2025	5 Payee name Fancy's	
6 Amount (\$) \$56.16	7 Payee address; City; 1947 W Gray St Suite 200 Houston, TX 77019	
8 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 Meals
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name Frost Bank	
Amount (\$) \$8.00	Payee address; City; PO Box 1315 Houston, TX 77251	
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 Bank Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/15/2025	Payee name Houston Parking	
Amount (\$) \$3.20	Payee address; City; 2500 Fannin Street Houston, TX 77002	
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 Parking
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: 4/14 Rpt: 12/28	2 FILER NAME Bell, R. Christopher (Mr.)	3 Filer ID (Ethics Commission Filers) 00056697
4 Date 10/15/2025	5 Payee name Houston Parking	
6 Amount (\$) \$1.25	7 Payee address; City; 2500 Fannin Street Houston, TX 77002	
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 Parking
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name Kirby Ice House	
Amount (\$) \$11.32	Payee address; City; 1421 N Loop W Houston, TX 77008	
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 Meals
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/16/2025	Payee name Moxies Houston Galleries	
Amount (\$) \$259.75	Payee address; City; 5000 Westheimer Rd Houston, TX 77056	
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 Meals
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: 5/14 Rpt: 13/28	2 FILER NAME Bell, R. Christopher (Mr.)	3 Filer ID (Ethics Commission Filers) 00056697
4 Date 10/15/2025	5 Payee name Porch Swing Pub	
6 Amount (\$) \$31.98	7 Payee address; City; 69 Heights Blvd Houston, TX 77007	
8 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 Meals
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office held
Date 10/20/2025	Payee name Royal Sonesta Hotel	
Amount (\$) \$323.63	Payee address; City; 2222 W Loop S Houston, TX 77027	
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
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office held
Date 10/16/2025	Payee name Southwest Airlines	
Amount (\$) \$518.48	Payee address; City; 2702 Love Field Drive Dallas, TX 75235	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name 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: 6/14 Rpt: 14/28	2 FILER NAME Bell, R. Christopher (Mr.)	3 Filer ID (Ethics Commission Filers) 00056697
4 Date 10/14/2025	5 Payee name Uber	
6 Amount (\$) \$41.44	7 Payee address; City; State; Zip Code 1725 3rd St San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name Uber	
Amount (\$) \$3.49	Payee address; City; State; Zip Code 1725 3rd St San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name Uber	
Amount (\$) \$10.47	Payee address; City; State; Zip Code 1725 3rd St San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel
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: 7/14 Rpt: 15/28	2 FILER NAME Bell, R. Christopher (Mr.)	3 Filer ID (Ethics Commission Filers) 00056697
4 Date 10/14/2025	5 Payee name Uber	
6 Amount (\$) \$11.55	7 Payee address; City; 1725 3rd St San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office held
Date 10/14/2025	Payee name Uber	
Amount (\$) \$30.65	Payee address; City; 1725 3rd St San Francisco, CA 94158	
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 Meals
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office held
Date 10/14/2025	Payee name Uber	
Amount (\$) \$23.30	Payee address; City; 1725 3rd St San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name 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: 8/14 Rpt: 16/28	2 FILER NAME Bell, R. Christopher (Mr.)	3 Filer ID (Ethics Commission Filers) 00056697
4 Date 10/15/2025	5 Payee name Uber	
6 Amount (\$) \$31.21	7 Payee address; City; 1725 3rd St San Francisco, CA 94158	
8 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 Meals
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/15/2025	Payee name Uber	
Amount (\$) \$3.00	Payee address; City; 1725 3rd St San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/16/2025	Payee name Uber	
Amount (\$) \$9.93	Payee address; City; 1725 3rd St San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel
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: 9/14 Rpt: 17/28	2 FILER NAME Bell, R. Christopher (Mr.)	3 Filer ID (Ethics Commission Filers) 00056697
4 Date 10/16/2025	5 Payee name Uber	
6 Amount (\$) \$6.56	7 Payee address; City; State; Zip Code 1725 3rd St San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/16/2025	Payee name Uber	
Amount (\$) \$9.48	Payee address; City; State; Zip Code 1725 3rd St San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/16/2025	Payee name Uber	
Amount (\$) \$3.00	Payee address; City; State; Zip Code 1725 3rd St San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel
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: 10/14 Rpt: 18/28	2 FILER NAME Bell, R. Christopher (Mr.)	3 Filer ID (Ethics Commission Filers) 00056697
4 Date 10/17/2025	5 Payee name Uber	
6 Amount (\$) \$6.14	7 Payee address; City; State; Zip Code 1725 3rd St San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/17/2025	Payee name Uber	
Amount (\$) \$16.55	Payee address; City; State; Zip Code 1725 3rd St San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/21/2025	Payee name Uber	
Amount (\$) \$3.00	Payee address; City; State; Zip Code 1725 3rd St San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel
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: 11/14 Rpt: 19/28	2 FILER NAME Bell, R. Christopher (Mr.)	3 Filer ID (Ethics Commission Filers) 00056697
4 Date 10/17/2025	5 Payee name Uber	
6 Amount (\$) \$36.01	7 Payee address; City; 1725 3rd St San Francisco, CA 94158	
8 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 Meals
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/16/2025	Payee name Urban Smoke	
Amount (\$) \$25.00	Payee address; City; 3913 Richmond Ave Houston, TX 77027	
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 Meals
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/16/2025	Payee name Urban Smoke	
Amount (\$) \$203.87	Payee address; City; 3913 Richmond Ave Houston, TX 77027	
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 Meals
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: 12/14 Rpt: 20/28	2 FILER NAME Bell, R. Christopher (Mr.)	3 Filer ID (Ethics Commission Filers) 00056697
4 Date 10/16/2025	5 Payee name Urban Smoke	
6 Amount (\$) \$18.00	7 Payee address; City; 3913 Richmond Ave Houston, TX 77027	
8 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 Meals
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office held
Date 11/10/2025	Payee name Wagner, Andre	
Amount (\$) \$100.00	Payee address; City; 3100 Cleburne St Houston, TX 77004	
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 Field Consultant
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office held
Date 11/10/2025	Payee name Wagner, Andre	
Amount (\$) \$200.00	Payee address; City; 3100 Cleburne St Houston, TX 77004	
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 Field Consultant
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name 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: 13/14 Rpt: 21/28	2 FILER NAME Bell, R. Christopher (Mr.)	3 Filer ID (Ethics Commission Filers) 00056697
4 Date 12/02/2025	5 Payee name Wagner, Andre	
6 Amount (\$) \$3,000.00	7 Payee address; City; 3100 Cleburne St Houston, TX 77004	
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 Field Consultant
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/15/2025	Payee name Willie G's Oak Post	
Amount (\$) \$300.00	Payee address; City; 1600 W Loop S Houston, TX 77027	
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 Meals
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/15/2025	Payee name Young, Andrew	
Amount (\$) \$20,000.00	Payee address; City; Requested Requested, TX 11111	
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 Strategic Consulting
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: 14/14 Rpt: 22/28	2 FILER NAME Bell, R. Christopher (Mr.)	3 Filer ID (Ethics Commission Filers) 00056697	
4 Date 12/08/2025	5 Payee name Zoom		
6 Amount (\$) \$18.11	7 Payee address; City; 55 Almaden Blvd Suite 600 San Jose, CA 95113		
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 Software	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/5 Rpt: 23/28	2 FILER NAME Bell, R. Christopher (Mr.)	3 Filer ID (Ethics Commission Filers) 00056697	
4 Date 11/12/2025	5 Payee name Bell, Connally		
6 Amount (\$) \$20,412.93	7 Payee address; City; State; Zip Code PO Box 2161 Houston, TX 77252		
<input type="checkbox"/> Reimbursement from political contributions intended			
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 Video and Podcast Production	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/02/2025	Payee name Bell, Peter		
Amount (\$) \$19,876.05	Payee address; City; State; Zip Code 476 S Reed Ct Lakewood, CO 80226		
<input type="checkbox"/> Reimbursement from political contributions intended			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Strategic Consulting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/23/2025	Payee name Bell, Peter		
Amount (\$) \$1,025.00	Payee address; City; State; Zip Code 476 S Reed Ct Lakewood, CO 80226		
<input type="checkbox"/> Reimbursement from political contributions intended			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Strategic Consulting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 2/5 Rpt: 24/28	2 FILER NAME Bell, R. Christopher (Mr.)	3 Filer ID (Ethics Commission Filers) 00056697	
4 Date 12/02/2025	5 Payee name Burns, Eric		
6 Amount (\$) \$19,876.05 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 476 S Reed Ct Lakewood, CO 80226		
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 Strategic Consulting	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/23/2025	Payee name Burns, Eric		
Amount (\$) \$1,025.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 476 S Reed Ct Lakewood, CO 80226		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Strategic Consulting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/19/2025	Payee name Dube, Andrea		
Amount (\$) \$428.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 8921 Birch St New Orleans, LA 70118		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Design	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 3/5 Rpt: 25/28	2 FILER NAME Bell, R. Christopher (Mr.)	3 Filer ID (Ethics Commission Filers) 00056697	
4 Date 11/26/2025	5 Payee name SquareSpace		
6 Amount (\$) \$14.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 225 Varick Street 12th Fl New York, NY 10014		
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 Domain Name Purchase	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/26/2025	Payee name SquareSpace		
Amount (\$) \$148.17 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 225 Varick Street 12th Fl New York, NY 10014		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/26/2025	Payee name SquareSpace		
Amount (\$) \$18.19 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 225 Varick Street 12th Fl New York, NY 10014		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Domain Name Purchase	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 4/5 Rpt: 26/28	2 FILER NAME Bell, R. Christopher (Mr.)	3 Filer ID (Ethics Commission Filers) 00056697	
4 Date 11/26/2025	5 Payee name SquareSpace		
6 Amount (\$) \$166.36 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 225 Varick Street 12th Fl New York, NY 10014		
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 Website Hosting	
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 Texas Democratic Party		
Amount (\$) \$3,500.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 314 E Highland Mall Blvd Ste 508 Austin, TX 78752		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/19/2025	Payee name Wagner, Andre		
Amount (\$) \$22,700.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 3100 Cleburne St Houston, TX 77004		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Field Consultant	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 5/5 Rpt: 27/28	2 FILER NAME Bell, R. Christopher (Mr.)	3 Filer ID (Ethics Commission Filers) 00056697
4 Date 11/12/2025	5 Payee name Young, Andrew	
6 Amount (\$) \$5,000.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code Requested Requested, TX 11111	
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 Strategic Consulting
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: 28/28
2 FILER NAME Bell, R. Christopher (Mr.)		3 Filer ID (Ethics Commission Filers) 00056697
4 Date 10/15/2025	5 Name of person from whom amount is received Frost Bank	8 Amount (\$) \$0.04
	6 Address of person from whom amount is received; City; State; Zip Code Houston, TX 77251	
7 Purpose for which amount is received Interest	<input type="checkbox"/> Check if political contribution returned to filer	