

# 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<br>(Ethics Commission Filers)<br>00057897   |                 | 2 Total pages filed:<br>10   |  |
| 3 CANDIDATE /<br>OFFICEHOLDER<br>NAME   | MS / MRS / MR<br>The Honorable |  | FIRST<br>Dan    | MI   |  |
|   | NICKNAME                       |  | LAST<br>Patrick | SUFFIX   |  |
| 4 CANDIDATE /<br>OFFICEHOLDER<br>MAILING<br>ADDRESS<br><br><input type="checkbox"/> Change of Address |                                | ADDRESS / PO BOX; APT / SUITE #; CITY;<br>1 E Greenway Plaza Ste 225<br><br>Houston, TX 77046  |                 | ZIP CODE   |  |
|   |                                | OFFICE USE ONLY  |                 |  |  |
|   |                                | Date Received<br>ELECTRONICALLY FILED<br>01/15/2026  |                 |  |  |
|   |                                | Date Hand-delivered or Date Postmarked   |                 |  |  |
| 5 CAMPAIGN<br>TREASURER<br>NAME   |                                | MS / MRS / MR<br>Ryan  |                 | FIRST<br>MI  |  |
|   |                                | NICKNAME   |                 | LAST<br>Patrick  |  |
| 6 CAMPAIGN<br>TREASURER<br>ADDRESS<br><br>(Residence or Business)                                     |                                | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>1 E. Greenway Plaza<br>Ste. 225<br>Houston, TX 77046  |                 |  |  |
| 7 CAMPAIGN<br>TREASURER<br>PHONE  |                                | AREA CODE PHONE NUMBER EXTENSION<br>(713) 526-3399   |                 |  |  |
| 8 REPORT<br>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)<br><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<br>COVERED   |                                | Month Day Year    THROUGH    Month Day Year<br>07/01/2025    12/31/2025  |                 |  |  |
| 10 ELECTION   |                                | ELECTION DATE<br>Month Day Year<br>03/03/2026  |                 | ELECTION TYPE<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special |  |
| 11 OFFICE   |                                | OFFICE HELD (if any)<br>Lieutenant Governor  |                 | 12 OFFICE SOUGHT (if known)<br>Lieutenant Governor   |  |

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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|  |   |
|--|---|
| <b>13 C / OH NAME</b> Patrick, Dan (The Honorable) | <b>14 Filer ID</b> (Ethics Commission Filers)<br>00057897 |
|--|---|

|   |  |   |  |
|---|--|---|--|
| <b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b><br><br><input type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. |   |  |
|   | <b>COMMITTEE TYPE</b>  | <b>COMMITTEE NAME</b>                       |  |
|   | <input type="checkbox"/> GENERAL   | Texans For Dan Patrick                      |  |
|   | <input checked="" type="checkbox"/> SPECIFIC   | <b>COMMITTEE ADDRESS</b>                    |  |
|   |  | 1 E Greenway Plaza Ste 225                  |  |
|   |  | Houston, TX 77046                           |  |
|   |  | <b>COMMITTEE CAMPAIGN TREASURER NAME</b>    |  |
|   |  | Patrick, Ryan                               |  |
|   |  | <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b> |  |
|   |  | 1 E Greenway Plaza Ste 225                  |  |
|   |  | Houston, TX 77046                           |  |

|                               |   |    |          |
|-------------------------------|---|----|----------|
| <b>16 CONTRIBUTION TOTALS</b> | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 0.00     |
|                               | 2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)   | \$ | 0.00     |
| EXPENDITURE TOTALS            | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES  | \$ | 0.00     |
|                               | 4. <b>TOTAL POLITICAL EXPENDITURES</b>  | \$ | 8,266.38 |
| CONTRIBUTION BALANCE          | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD  | \$ | 457.51   |
| OUTSTANDING LOAN TOTALS       | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD   | \$ | 0.00     |

**17 AFFIDAVIT**

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

\_\_\_\_\_  
The Honorable Dan Patrick  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

\_\_\_\_\_  
Signature of officer administering      Printed name of officer administering      Title of officer administering oath

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

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|  |                                     |  |                 |
|--|-------------------------------------|--|-----------------|
| <b>18 FILER NAME</b><br>Patrick, Dan (The Honorable) |                                     | <b>19 Filer ID</b> (Ethics Commission Filers)<br>00057897                          |                 |
| <b>20 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE     |                                     |  | SUBTOTAL AMOUNT |
| 1.   | <input type="checkbox"/>            | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                      | \$              |
| 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 type="checkbox"/>            | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                   | \$              |
| 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                             | \$ 8,266.38     |
| 10.  | <input type="checkbox"/>            | SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH             | \$              |
| 11.  | <input type="checkbox"/>            | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                | \$              |
| 12.  | <input type="checkbox"/>            | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$              |

# 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.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule G:<br>Sch: 1/7 Rpt: 4/10  | <b>2</b> FILER NAME<br>Patrick, Dan (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00057897   |
| <b>4</b> Date<br>12/10/2025   | <b>5</b> Payee name<br>-, Dannie   |  |
| <b>6</b> Amount (\$)<br>\$400.00<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address; City; State; Zip Code<br>5805 North Lamar Blvd<br><br>Austin, TX 78752           |  |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense | <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>DPS Staff Christmas Gift (Cash) |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>12/10/2025  | Payee name<br>Barksdale, Brian   |  |
| Amount (\$)<br>\$500.00<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          | Payee address; City; State; Zip Code<br>5805 North Lamar Blvd<br><br>Austin, TX 78752                    |  |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense            | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>DPS Staff Christmas Gift (Cash)            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>07/24/2025  | Payee name<br>Coconut Joe's  |  |
| Amount (\$)<br>\$142.85<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          | Payee address; City; State; Zip Code<br>362 West Bay Road<br><br>Georgetown KY11206 Cayman Islands       |  |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense                    | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>DPS Staff Meals                            |
| 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.

|   |  |   |  |   |  |
|---|--|---|--|---|--|
| <b>1</b> Total pages Schedule G:<br>Sch: 2/7 Rpt: 5/10  |  | <b>2</b> FILER NAME<br>Patrick, Dan (The Honorable)   |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00057897  |  |
| <b>4</b> Date<br>07/26/2025   |  | <b>5</b> Payee name<br>Comcast  |  |   |  |
| <b>6</b> Amount (\$)<br>\$270.95<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended |  | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 60533<br><br>City of Industry, CA 91716           |  |   |  |
| <b>8</b> PURPOSE OF EXPENDITURE   |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Officeholder Internet Connection |  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name   |  | Office sought Office held   |  |
| Date<br>08/26/2025  |  | Payee name<br>Comcast   |  |   |  |
| Amount (\$)<br>\$270.95<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          |  | Payee address; City; State; Zip Code<br>PO Box 60533<br><br>City of Industry, CA 91716                    |  |   |  |
| PURPOSE OF EXPENDITURE  |  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Officeholder Internet Connection            |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  |  | Candidate/Officeholder name   |  | Office sought Office held   |  |
| Date<br>09/26/2025  |  | Payee name<br>Comcast   |  |   |  |
| Amount (\$)<br>\$270.95<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          |  | Payee address; City; State; Zip Code<br>PO Box 60533<br><br>City of Industry, CA 91716                    |  |   |  |
| PURPOSE OF EXPENDITURE  |  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Officeholder Internet Connection            |  |
| 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.

|   |  |   |  |   |  |
|---|--|---|--|---|--|
| <b>1</b> Total pages Schedule G:<br>Sch: 3/7 Rpt: 6/10  |  | <b>2</b> FILER NAME<br>Patrick, Dan (The Honorable)   |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00057897  |  |
| <b>4</b> Date<br>10/26/2025   |  | <b>5</b> Payee name<br>Comcast  |  |   |  |
| <b>6</b> Amount (\$)<br>\$270.95<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended |  | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 60533<br><br>City of Industry, CA 91716           |  |   |  |
| <b>8</b> PURPOSE OF EXPENDITURE   |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Officeholder Internet Connection |  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name   |  | Office sought   |  |
| Date<br>11/26/2025  |  | Payee name<br>Comcast   |  |   |  |
| Amount (\$)<br>\$270.95<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          |  | Payee address; City; State; Zip Code<br>PO Box 60533<br><br>City of Industry, CA 91716                    |  |   |  |
| <b>PURPOSE OF EXPENDITURE</b>   |  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Officeholder Internet Connection            |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  |  | Candidate/Officeholder name   |  | Office sought   |  |
| Date<br>12/26/2025  |  | Payee name<br>Comcast   |  |   |  |
| Amount (\$)<br>\$279.00<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          |  | Payee address; City; State; Zip Code<br>PO Box 60533<br><br>City of Industry, CA 91716                    |  |   |  |
| <b>PURPOSE OF EXPENDITURE</b>   |  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense            |  | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Officeholder Internet Connection            |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  |  | Candidate/Officeholder name   |  | Office sought   |  |

# 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.

|   |  |   |  |  |  |
|---|--|---|--|--|--|
| <b>1</b> Total pages Schedule G:<br>Sch: 4/7 Rpt: 7/10  |  | <b>2</b> FILER NAME<br>Patrick, Dan (The Honorable)   |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00057897   |  |
| <b>4</b> Date<br>10/21/2025   |  | <b>5</b> Payee name<br>Constable Mark Hermann Campaign  |  |  |  |
| <b>6</b> Amount (\$)<br>\$1,500.00<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended |  | <b>7</b> Payee address; City; State; Zip Code<br>6831 Cypresswood Dr<br><br>Spring, TX 77379  |  |  |  |
| <b>8</b> PURPOSE OF EXPENDITURE   |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By Candidate/Officeholder/Political Committee |  | <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Contribution                            |  |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH  |  | Candidate/Officeholder name   |  | Office sought Office held  |  |
| Date<br>12/10/2025  |  | Payee name<br>Curry, Wayne  |  |  |  |
| Amount (\$)<br>\$500.00<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended            |  | Payee address; City; State; Zip Code<br>5805 North Lamar Blvd<br><br>Austin, TX 78752   |  |  |  |
| PURPOSE OF EXPENDITURE  |  | Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense   |  | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>DPS Staff Christmas Gift (Cash)                    |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name   |  | Office sought Office held  |  |
| Date<br>08/01/2025  |  | Payee name<br>Fairmont Hotel  |  |  |  |
| Amount (\$)<br>\$469.65<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended            |  | Payee address; City; State; Zip Code<br>1717 North Akard St<br><br>Dallas, TX 75201   |  |  |  |
| PURPOSE OF EXPENDITURE  |  | Category (See Categories listed at the top of this schedule)<br>Travel In District  |  | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Officeholder Lodging To Attend Speaking Engagement |  |
| 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  
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.

|   |  |   |
|---|--|---|
| <b>1</b> Total pages Schedule G:<br>Sch: 5/7 Rpt: 8/10  | <b>2</b> FILER NAME<br>Patrick, Dan (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00057897  |
| <b>4</b> Date<br>12/10/2025   | <b>5</b> Payee name<br>Farias, Joe   |   |
| <b>6</b> Amount (\$)<br>\$500.00<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address; City; State; Zip Code<br>5805 North Lamar Blvd<br><br>Austin, TX 78752           |   |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense | <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>DPS Staff Christmas Gift (Cash)          |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>07/25/2025  | Payee name<br>Grand Old House  |   |
| Amount (\$)<br>\$180.13<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          | Payee address; City; State; Zip Code<br>648 S Church St<br><br>Georgetown KY11106 Cayman Islands         |   |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense                    | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>DPS Staff Meals                                     |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>12/12/2025  | Payee name<br>Martin, Tyler  |   |
| Amount (\$)<br>\$500.00<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          | Payee address; City; State; Zip Code<br>-<br><br>Houston, TX 77000                                       |   |
| PURPOSE OF EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense            | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Son of Fallen Police Officer For Education Expenses |
| 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.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule G:<br>Sch: 6/7 Rpt: 9/10  | <b>2</b> FILER NAME<br>Patrick, Dan (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00057897   |
| <b>4</b> Date<br>12/10/2025   | <b>5</b> Payee name<br>Parker, Antwon  |  |
| <b>6</b> Amount (\$)<br>\$400.00<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address; City; State; Zip Code<br>5805 North Lamar Blvd<br><br>Austin, TX 78752           |  |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense | <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>DPS Staff Christmas Gift (Cash) |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  |  |
| Date<br>12/10/2025  | Candidate/Officeholder name<br>Phillips, Tommy   |  |
| Amount (\$)<br>\$500.00<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          | Payee address; City; State; Zip Code<br>5805 North Lamar Blvd<br><br>Austin, TX 78752                    |  |
| <b>PURPOSE OF EXPENDITURE</b>   | Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense            | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>DPS Staff Christmas Gift (Cash)            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  |  |  |
| Date<br>12/10/2025  | Candidate/Officeholder name<br>Rodriguez, Carlos   |  |
| Amount (\$)<br>\$500.00<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          | Payee address; City; State; Zip Code<br>5805 North Lamar Blvd<br><br>Austin, TX 78752                    |  |
| <b>PURPOSE OF EXPENDITURE</b>   | Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense            | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>DPS Staff Christmas Gift (Cash)            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  |  |  |

# 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.

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| <b>1</b> Total pages Schedule G:<br>Sch: 7/7 Rpt: 10/10  | <b>2</b> FILER NAME<br>Patrick, Dan (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00057897   |
| <b>4</b> Date<br>07/17/2025  | <b>5</b> Payee name<br>Union Kitchen   |  |
| <b>6</b> Amount (\$)<br>\$40.00<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address; City; State; Zip Code<br>12538 Memorial Dr<br><br>Houston, TX 77024      |  |
| <b>8</b> PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Capitol Staff Meeting |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought      Office held   |
| Date<br>12/10/2025   | Payee name<br>Vaughan, Joe   |  |
| Amount (\$)<br>\$500.00<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended         | Payee address; City; State; Zip Code<br>5805 North Lamar Blvd<br><br>Austin, TX 78752            |  |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense    | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>DPS Staff Christmas Gift (Cash)  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought      Office held   |