

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) 00089818 | 2 Total pages filed: 9 |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR FIRST MI Mr. Arshia N. | | OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/16/2026 |
| | NICKNAME LAST SUFFIX Papari | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE PO Box 100131 Austin, TX 78703 | | Date Hand-delivered or Date Postmarked |
| | | | Receipt # Amount |
| | | | Date Processed |
| | | | Date Imaged |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST MI Reese R. | | |
| | NICKNAME LAST SUFFIX Armstrong | | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2004 Hardy Cir Austin, TX 78757 | | |
| | | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (512) 829-7248 | | |
| 8 REPORT TYPE | <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input checked="" type="checkbox"/> January 15</div> <div style="width: 50%;"><input type="checkbox"/> 30th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Runoff</div> <div style="width: 50%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</div> <div style="width: 50%;"><input type="checkbox"/> July 15</div> <div style="width: 50%;"><input type="checkbox"/> 8th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Exceeded modified reporting limit</div> <div style="width: 50%;"><input type="checkbox"/> Final Report (Attach C/OH-FR)</div> </div> | | |
| | | | |
| 9 PERIOD COVERED | Month Day Year Month Day Year 07/01/2025 THROUGH 12/31/2025 | | |
| 10 ELECTION | ELECTION DATE Month Day Year 11/03/2026 | | ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special |
| | | | |
| 11 OFFICE | OFFICE HELD (if any) | | 12 OFFICE SOUGHT (if known) |
| | | | State Representative Place Texas District 49 |

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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| | | | |
|----------------|-------------------------|-------------|----------------------------|
| 13 C / OH NAME | Papari, Arshia N. (Mr.) | 14 Filer ID | (Ethics Commission Filers) |
| | | 00089818 | |

| | | |
|--|--|---|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. | |
| | COMMITTEE TYPE | COMMITTEE NAME |
| | <input checked="" type="checkbox"/> GENERAL | Student Victory Fund |
| | <input type="checkbox"/> SPECIFIC | COMMITTEE ADDRESS |
| | | PO Box 100131 Austin, TX 78703 |
| | COMMITTEE CAMPAIGN TREASURER NAME | Papari, Arshia |
| | COMMITTEE CAMPAIGN TREASURER ADDRESS | 2819 Rio Grande St 614 Austin, TX 78705 |

| | | | |
|-------------------------|---|----|----------|
| 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) | \$ | 1,182.22 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 991.02 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 1,182.22 |
| 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. Arshia N. Papari

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

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

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| | | |
|--|---|---|
| 18 FILER NAME Papari, Arshia N. (Mr.) | | 19 Filer ID (Ethics Commission Filers) 00089818 |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 1,135.22 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 47.00 |
| 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 | \$ 991.02 |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/4 Rpt: 4/9 |
| 2 FILER NAME Papari, Arshia N. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00089818 |
| 4 Date 08/07/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anwar, Muhammad <hr/> 6 Contributor address; City; State; Zip Code Irving, TX 75063 | 7 Amount of Contribution (\$) \$96.05 |
| 8 Principal occupation / Job title (See Instructions) Doctor | | 9 Employer (See Instructions) Self employed |
| Date 12/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anwar, Muhammad <hr/> Contributor address; City; State; Zip Code Irving, TX 75063 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Doctor | | Employer (See Instructions) Self employed |
| Date 12/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bauman, Matthew <hr/> Contributor address; City; State; Zip Code Denton, TX 76209 | Amount of Contribution (\$) \$300.00 |
| Principal occupation / Job title (See Instructions) Courier | | Employer (See Instructions) Dropoff |
| Date 08/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bautista, Edwin <hr/> Contributor address; City; State; Zip Code Austin, TX 78757 | Amount of Contribution (\$) \$24.01 |
| Principal occupation / Job title (See Instructions) Planner | | Employer (See Instructions) GrantWorks, Inc. |
| Date 11/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloman, Frankie <hr/> Contributor address; City; State; Zip Code Spring, TX 77373 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Packing | | Employer (See Instructions) Amazon |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/4 Rpt: 5/9 |
| 2 FILER NAME Papari, Arshia N. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00089818 |
| 4 Date 12/30/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Andrew <hr/> 6 Contributor address; City; State; Zip Code Pearland, TX 77584 | 7 Amount of Contribution (\$) \$5.00 |
| 8 Principal occupation / Job title (See Instructions) Unemployed | | 9 Employer (See Instructions) N/A |
| Date 12/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Clare <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Dental assistant | | Employer (See Instructions) Christopher Walker |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Taren <hr/> Contributor address; City; State; Zip Code Austin, TX 78756 | Amount of Contribution (\$) \$14.41 |
| Principal occupation / Job title (See Instructions) Legislative Staffer | | Employer (See Instructions) Texas House |
| Date 12/04/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knauer, Haryaksha <hr/> Contributor address; City; State; Zip Code Williams, AZ 86046 | Amount of Contribution (\$) \$47.06 |
| Principal occupation / Job title (See Instructions) Night Porter | | Employer (See Instructions) Xanterra |
| Date 11/04/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knauer, Haryaksha <hr/> Contributor address; City; State; Zip Code Williams, AZ 86046 | Amount of Contribution (\$) \$47.06 |
| Principal occupation / Job title (See Instructions) Night Porter | | Employer (See Instructions) Xanterra |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/4 Rpt: 6/9 |
| 2 FILER NAME Papari, Arshia N. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00089818 |
| 4 Date 07/16/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lam, Eliot <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78664 | 7 Amount of Contribution (\$) \$9.61 |
| 8 Principal occupation / Job title (See Instructions) Not employed | | 9 Employer (See Instructions) Not employed |
| Date 12/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulkay, Annika <hr/> Contributor address; City; State; Zip Code Spring, TX 77379 | Amount of Contribution (\$) \$30.00 |
| Principal occupation / Job title (See Instructions) Student | | Employer (See Instructions) N/A |
| Date 10/25/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nava, Diana <hr/> Contributor address; City; State; Zip Code Rosenberg, TX 77471 | Amount of Contribution (\$) \$19.21 |
| Principal occupation / Job title (See Instructions) Registered Nurse | | Employer (See Instructions) MD Anderson Cancer Center |
| Date 08/01/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nouri, Nadia <hr/> Contributor address; City; State; Zip Code San Jose, CA 95134 | Amount of Contribution (\$) \$96.05 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) N/A |
| Date 07/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez-Salazar, Javier <hr/> Contributor address; City; State; Zip Code Austin, TX 78745 | Amount of Contribution (\$) \$5.76 |
| 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: 4/4 Rpt: 7/9 |
| 2 FILER NAME Papari, Arshia N. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00089818 |
| 4 Date 09/07/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Romley, Griffin <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704 | 7 Amount of Contribution (\$) \$47.06 |
| 8 Principal occupation / Job title (See Instructions) Software engineer | | 9 Employer (See Instructions) New American funding |
| Date 09/23/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seth, Mukul <hr/> Contributor address; City; State; Zip Code Bulverde, TX 78163 | Amount of Contribution (\$) \$240.13 |
| Principal occupation / Job title (See Instructions) Sel | | Employer (See Instructions) Mukul Seth |
| Date 07/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van den Bergh, El <hr/> Contributor address; City; State; Zip Code Austin, TX 78741 | Amount of Contribution (\$) \$24.01 |
| Principal occupation / Job title (See Instructions) Custom Framing Director | | Employer (See Instructions) Ao5 Gallery |
| Date 12/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villarreal, Julián <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Self |
| Date 10/25/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Michaela <hr/> Contributor address; City; State; Zip Code Aubrey, TX 76227 | Amount of Contribution (\$) \$4.80 |
| Principal occupation / Job title (See Instructions) Bus Assistant | | Employer (See Instructions) Denton ISD |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE **A2**

| | | | |
|---|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: Sch: 1/1 Rpt: 8/9 | |
| 2 FILER NAME Papari, Arshia N. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00089818 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date 11/15/2025 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Papari , Farzaneh 7 Contributor address; City; State; Zip Code Austin, TX 78728 | 8 Amount of contribution (\$) \$47.00 | 9 In-kind contribution description Table, wagon and 2 chairs |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Loan Officer | | 11 Employer (FOR NON-JUDICIAL) (See instructions) Self | |
| 12 Contributor's principal occupation (FOR JUDICIAL) | | 13 Contributor's job title (FOR JUDICIAL) (See instructions) | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) | | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |
| | | | |

POLITICAL EXPENDITURES FROM 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: 1/1 Rpt: 9/9 | 2 FILER NAME Papari, Arshia N. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00089818 |
| 4 Date 07/25/2025 | 5 Payee name Amazon.com | |
| 6 Amount (\$) \$137.10 <input checked="checked" type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98019 | |
| 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 DJI Osmo 7P mobile gimbal |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/04/2025 | Candidate/Officeholder name Bumperactive | |
| Amount (\$) \$103.92 <input type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code 1045 A Reinli Street Austin, TX 78723 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Printing Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banner |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 12/01/2025 | Candidate/Officeholder name Texas Secretary of State | |
| Amount (\$) \$750.00 <input checked="checked" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code 1019 Brazos St. Austin, TX 78701 | |
| 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 | | |