

# CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM JCOR-C/OH

1 Filer ID (Ethics Commission Filers) 00089892		2 Total pages filed: 57		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME Mr. Robert A.		FIRST LAST SUFFIX		Date Received ELECTRONICALLY FILED 01/16/2026	
NICKNAME Rob		Jr.		Date Hand-delivered or Date Postmarked	
4 ORIGINAL REPORT TYPE  <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election		<input type="checkbox"/> Runoff <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> Final Report (Attach C/OH-FR)		Receipt # _____ Amount _____	
5 ORIGINAL PERIOD COVERED Month Day Year 07/01/2025		Month Day Year THROUGH 12/31/2025		Date Processed Date Imaged	

## 6 EXPLANATION OF CORRECTION

The payroll contributions were erroneously entered from payor. They were donated by the candidate from his payroll, so the correct entry would detail that the contributor was indeed himself, NOT the San Jacinto County DAs Office.

## 7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

**Semiannual reports:** I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

**Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Mr. Robert A. Freyer Jr.

\_\_\_\_\_  
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 oath

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

\_\_\_\_\_  
Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form  
Needed To Report And Explain Corrections**

**JUDICIAL CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

**FORM JC/OH  
COVER SHEET PG 1**

The JC/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers) 00089892	2 Total pages filed: 57		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Robert A.	MI	<b>OFFICE USE ONLY</b>		
	NICKNAME Rob	LAST Freyer	SUFFIX Jr.	Date Received ELECTRONICALLY FILED 01/16/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; P.O. Box 133  Coldspring, TX 77331			Date Hand-delivered or Date Postmarked		
				Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Mariana Nicoleta	MI			
	NICKNAME Nicole	LAST Coconu	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 133  Coldspring, TX 77331					
7 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION (405) 921-7598					
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 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) None			12 OFFICE SOUGHT (if known) District Judge District 258		

**GO TO PAGE 2**

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

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

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13 C / OH NAME	Freyer Jr., Robert A. (Mr.)		14 Filer ID (Ethics Commission Filers) 00089892												
15 NOTICE FROM POLITICAL COMMITTEE(S)	<p>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.</p> <table border="1"> <tr> <td><input type="checkbox"/> Additional Pages</td> <td>COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td></td> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td></td> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>			<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS		<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			COMMITTEE CAMPAIGN TREASURER ADDRESS
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME													
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS													
	<input type="checkbox"/> SPECIFIC	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. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 52,433.86												
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00												
	4. <b>TOTAL POLITICAL EXPENDITURES</b>		\$ 25,588.37												
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 45,197.16												
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 20,000.00												
17 AFFIDAVIT															
<p>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.</p>															
<p>Mr. Robert A. Freyer Jr. _____ Signature of Candidate or Officeholder</p>															
AFFIX NOTARY STAMP / SEAL ABOVE															
<p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p>															
Signature of officer administering oath		Printed name of officer administering oath													
		Title of officer administering oath													

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

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<b>18</b> FILER NAME Freyer Jr., Robert A. (Mr.)	<b>19</b> Filer ID (Ethics Commission Filers) 00089892
<b>20</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A(J): MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) \$ 51,833.86	
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 600.00	
3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) \$	
4. <input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL) \$ 20,000.00	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 22,472.14	
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 \$ 3,116.23	
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 \$ 1,252.00	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 1/33 Rpt: 5/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 09/25/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alston, James ..... <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77009	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>8</b> Contributor's Principal Occupation Houston Criminal Defense Attorney	<b>9</b> Contributor's Job Title Houston Criminal Defense Attorney
<b>10</b> Contributor's employer/law firm Houston Criminal Defense Attorney		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/19/2025 ..... Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkison, Douglas ..... Contributor address; City; State; Zip Code  Montgomery, TX 77356		Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Conroe Criminal Defense Attorney		Contributor's Job Title Conroe Criminal Defense Attorney
Contributor's employer/law firm Montgomery County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/05/2025 ..... Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balette, Jacques ..... Contributor address; City; State; Zip Code  Houston, TX 77055		Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Catastrophic Injury & Nursing Home Malpractice Attorney		Contributor's Job Title Marks Balette Young & Moss
Contributor's employer/law firm Marks Balette Young & Moss		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 2/33 Rpt: 6/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balette, Jeff	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Garland, TX 75042	
<b>8</b> Contributor's Principal Occupation Business owner / construction & plumbing sector		<b>9</b> Contributor's Job Title Business owner / construction & plumbing sector
<b>10</b> Contributor's employer/law firm self employed		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balette, Mark	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  Trinity, TX 75862	
Contributor's Principal Occupation Business owner; operator of B&C Outfitters (hunting ranch)		Contributor's Job Title Owner
Contributor's employer/law firm B&C Outfitters (hunting ranch)		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balette, Natasha	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77055	
Contributor's Principal Occupation Building and Grounds Cleaning and Maintenance Occupations		Contributor's Job Title Building and Grounds Cleaning and Maintenance Occupations
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 3/33 Rpt: 7/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 08/27/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barclay, David <b>6</b> Contributor address; City; State; Zip Code  Aledo, TX 76008	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Contributor's Principal Occupation Aledo ISD Coach		<b>9</b> Contributor's Job Title Coach
<b>10</b> Contributor's employer/law firm Aledo ISD		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/14/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barron, Rachel  Contributor address; City; State; Zip Code  Corrigan, TX 75939		Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Founding Attorney, The Barron Firm, PLLC		Contributor's Job Title Attorney
Contributor's employer/law firm Founding Attorney, The Barron Firm, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/10/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bertillion, Leland  Contributor address; City; State; Zip Code  Houston , TX 77042		Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Sales		Contributor's Job Title consultant
Contributor's employer/law firm SNBT Diamonds & Jewelry Ltd.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 4/33 Rpt: 8/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 09/25/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackburn, Celeste	<b>7</b> Amount of Contribution (\$) \$1,000.00
	<b>6</b> Contributor address; City; State; Zip Code  The Woodlands, TX 77381	
<b>8</b> Contributor's Principal Occupation Founder, Celeste Blackburn, PLLC		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Founder, Celeste Blackburn, PLLC		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bond, Stacey	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  Trinity, TX 75862	
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braddock, Kathy	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Houston, TX 77024	
Contributor's Principal Occupation Texas CriminalLaw Attorney		Contributor's Job Title Texas CriminalLaw Attorney
Contributor's employer/law firm Harris County DA		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 5/33 Rpt: 9/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 09/02/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brawner, Catherine <b>6</b> Contributor address; City; State; Zip Code  Raleigh, NC 27612	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Contributor's Principal Occupation Education Consultant		<b>9</b> Contributor's Job Title Research Triangle Educational Consultants
<b>10</b> Contributor's employer/law firm Research Triangle Educational Consultants		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 09/02/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brawner, Philip Contributor address; City; State; Zip Code  Coral Gables, FL 33156		Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/24/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brawner, Robert Contributor address; City; State; Zip Code  Atlanta, GA 30307		Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Executive Director of the Atlanta BeltLine Partnership		Contributor's Job Title Executive Director of the Atlanta BeltLine Partnership
Contributor's employer/law firm Atlanta BeltLine Partnership		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 6/33 Rpt: 10/57	
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892	
<b>4</b> Date 11/07/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burleson, Wallace <b>6</b> Contributor address; City; State; Zip Code  Oakhurst, TX 77359	<b>7</b> Amount of Contribution (\$) \$100.00	
<b>8</b> Contributor's Principal Occupation retired		<b>9</b> Contributor's Job Title retired	
<b>10</b> Contributor's employer/law firm retired		<b>11</b> Law firm of contributor's spouse (if any)	
<b>12</b> If contributor is a child, law firm of parent(s) (if any)			
Date 10/08/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Brian Contributor address; City; State; Zip Code  Conroe, TX 77301	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation criminal defense attorney		Contributor's Job Title criminal defense attorney	
Contributor's employer/law firm Brian C. Burns, Attorney at Law, PLLC		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 12/09/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buster, Todd Contributor address; City; State; Zip Code  Houston, TX 77043	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Partner / Owner – Buster & Cogdell Builders, L.L.C.		Contributor's Job Title President – Horizon Development & Construction	
Contributor's employer/law firm Horizon Development & Construction		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 7/33 Rpt: 11/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 12/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheshire, Cary <b>6</b> Contributor address; City; State; Zip Code  Lufkin, TX 75901	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Contributor's Principal Occupation Leader/activist with Tarrant County Patriots PAC		<b>9</b> Contributor's Job Title Activist
<b>10</b> Contributor's employer/law firm Self Employed		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 08/28/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cogdell, Dan Contributor address; City; State; Zip Code  Houston, TX 77002		Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Principal & Founder — Cogdell Law Firm		Contributor's Job Title Principal Attorney
Contributor's employer/law firm Cogdell Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/03/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corley, Duane Contributor address; City; State; Zip Code  Conroe, TX 77304		Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Principal
Contributor's employer/law firm Law Office of Duane T. Corley, P.C.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

## MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 8/33 Rpt: 12/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 10/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denman, Steven ..... <b>6</b> Contributor address; City; State; Zip Code  Conroe, TX 77304	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Contributor's Principal Occupation Assistant District Attorney, Liberty County, Texas		<b>9</b> Contributor's Job Title Assistant District Attorney, Liberty County, Texas
<b>10</b> Contributor's employer/law firm Liberty County, Texas		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
 <b>Date</b> 12/01/2025 ..... <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillingham, Taylor ..... <b>Contributor address; City; State; Zip Code</b>  Houston, TX 77079		<b>Amount of Contribution (\$)</b> \$200.00
<b>Contributor's Principal Occupation</b> Retired		<b>Contributor's Job Title</b> retired
<b>Contributor's employer/law firm</b> retired		<b>Law firm of contributor's spouse (if any)</b>
<b>If contributor is a child, law firm of parent(s) (if any)</b>		
 <b>Date</b> 09/11/2025 ..... <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Dishongh, Jeremy ..... <b>Contributor address; City; State; Zip Code</b>  Conroe, TX 77301		<b>Amount of Contribution (\$)</b> \$1,000.00
<b>Contributor's Principal Occupation</b> criminal defense and personal injury attorney		<b>Contributor's Job Title</b> Principal
<b>Contributor's employer/law firm</b> Law Office of Jeremy S. Dishongh, PLLC		<b>Law firm of contributor's spouse (if any)</b>
<b>If contributor is a child, law firm of parent(s) (if any)</b>		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 9/33 Rpt: 13/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 12/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnell, Matthew ..... <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76132	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Contributor's Principal Occupation Planning Manager		<b>9</b> Contributor's Job Title Planning Manager - Fort Worth
<b>10</b> Contributor's employer/law firm Fort Worth		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 08/27/2025 ..... Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnell, Matthew ..... Contributor address; City; State; Zip Code  Fort Worth, TX 76132		Amount of Contribution (\$)  \$200.00
Contributor's Principal Occupation Planning Manager		Contributor's Job Title Planning Manager - Fort Worth
Contributor's employer/law firm Fort Worth		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/29/2025 ..... Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnenfield, Debra ..... Contributor address; City; State; Zip Code  Franklin, WI 53132		Amount of Contribution (\$)  \$200.00
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 10/33 Rpt: 14/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 08/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Martha <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77025	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>8</b> Contributor's Principal Occupation retired		<b>9</b> Contributor's Job Title retired
<b>10</b> Contributor's employer/law firm retired		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 08/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Michael Contributor address; City; State; Zip Code  Houston, TX 77025		Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Senior Sales Manager at General Electric (GE)		Contributor's Job Title Senior Sales Manager at General Electric (GE)
Contributor's employer/law firm General Electric (GE)		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/27/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Paul Contributor address; City; State; Zip Code  Houston, TX 77025		Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation criminal defense attorney		Contributor's Job Title Paul Doyle & Associates, P.C.
Contributor's employer/law firm Paul Doyle & Associates, P.C.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 11/33 Rpt: 15/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Sara  <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77025	<b>7</b> Amount of Contribution (\$) \$1,000.00
	<b>8</b> Contributor's Principal Occupation Forensic Pathologist in Montgomery County, Texas	
<b>9</b> Contributor's Job Title Pathologist		
<b>10</b> Contributor's employer/law firm Montgomery County, Texas		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Kevin  Contributor address; City; State; Zip Code  Spring, TX 77380	Amount of Contribution (\$) \$500.00
	Contributor's Principal Occupation Conroe / Montgomery County Attorney	
Contributor's Job Title Conroe / Montgomery County Attorney		
Contributor's employer/law firm Montgomery County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etheridge, Chad  Contributor address; City; State; Zip Code  Liberty, TX 77575	Amount of Contribution (\$) \$200.00
	Contributor's Principal Occupation Liberty, Texas-based attorney	
Contributor's Job Title cofounder		
Contributor's employer/law firm Etheridge & Bacon Law Firm, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 12/33 Rpt: 16/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 12/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Bethany <b>6</b> Contributor address; City; State; Zip Code  Livingston, TX 77351	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Contributor's Principal Occupation Retail Outlet		<b>9</b> Contributor's Job Title Owner
<b>10</b> Contributor's employer/law firm Self Employed		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 11/10/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Bethany Contributor address; City; State; Zip Code  Livingston, TX 77351		Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Owner		Contributor's Job Title Retail Outlet
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/24/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forir, Gabriel Contributor address; City; State; Zip Code  Spring, TX 77381		Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Chief Growth Officer at Quantix SCS.		Contributor's Job Title Chief Growth Officer at Quantix SCS.
Contributor's employer/law firm Quantix SCS.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 13/33 Rpt: 17/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 09/02/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freyer, Fred ..... <b>6</b> Contributor address; City; State; Zip Code  St. Simons Island, GA 31522	<b>7</b> Amount of Contribution (\$) \$250.00
<b>8</b> Contributor's Principal Occupation retired		<b>9</b> Contributor's Job Title retired
<b>10</b> Contributor's employer/law firm retired		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 12/23/2025 ..... Contributor address; City; State; Zip Code  Coldspring, TX 77331		Amount of Contribution (\$) \$600.00
Contributor's Principal Occupation Lawyer		Contributor's Job Title ADA
Contributor's employer/law firm San Jacinto County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/03/2025 ..... Contributor address; City; State; Zip Code  Coldspring, TX 77331		Amount of Contribution (\$) \$600.00
Contributor's Principal Occupation Lawyer		Contributor's Job Title ADA
Contributor's employer/law firm San Jacinto County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 14/33 Rpt: 18/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 09/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freyer, Robert <b>6</b> Contributor address; City; State; Zip Code  Coldspring, TX 77331	<b>7</b> Amount of Contribution (\$)  \$600.00
<b>8</b> Contributor's Principal Occupation Lawyer		<b>9</b> Contributor's Job Title ADA
<b>10</b> Contributor's employer/law firm San Jacinto County		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freyer, Robert Contributor address; City; State; Zip Code  Coldspring, TX 77331	Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Lawyer		Contributor's Job Title San Jacinto County ADA
Contributor's employer/law firm San Jacinto County ADA		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freyer, Robert Contributor address; City; State; Zip Code  Coldspring, TX 77331	Amount of Contribution (\$)  \$39.93
Contributor's Principal Occupation Lawyer		Contributor's Job Title San Jacinto County ADA
Contributor's employer/law firm San Jacinto County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 15/33 Rpt: 19/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 11/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freyer, Robert <b>6</b> Contributor address; City; State; Zip Code  Coldspring, TX 77331	<b>7</b> Amount of Contribution (\$)  \$79.00
<b>8</b> Contributor's Principal Occupation Lawyer		<b>9</b> Contributor's Job Title San Jacinto County ADA
<b>10</b> Contributor's employer/law firm San Jacinto County		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/08/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freyer, Robert Contributor address; City; State; Zip Code  Coldspring, TX 77331		Amount of Contribution (\$)  \$39.93
Contributor's Principal Occupation Lawyer		Contributor's Job Title San Jacinto County ADA
Contributor's employer/law firm San Jacinto County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/08/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freyer, Robert Contributor address; City; State; Zip Code  Coldspring, TX 77331		Amount of Contribution (\$)  \$600.00
Contributor's Principal Occupation Lawyer		Contributor's Job Title ADA
Contributor's employer/law firm San Jacinto County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 16/33 Rpt: 20/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 10/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freyer, Robert <b>6</b> Contributor address; City; State; Zip Code  Coldspring, TX 77331	<b>7</b> Amount of Contribution (\$)  \$600.00
<b>8</b> Contributor's Principal Occupation Lawyer		<b>9</b> Contributor's Job Title ADA
<b>10</b> Contributor's employer/law firm San Jacinto County		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/21/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freyer, Robert Contributor address; City; State; Zip Code  Coldspring, TX 77331		Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Lawyer		Contributor's Job Title Criminal ADA
Contributor's employer/law firm San Jacinto County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freyer, Robert Contributor address; City; State; Zip Code  Coldspring, TX 77331		Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Lawyer		Contributor's Job Title ADA - San Jacinto County
Contributor's employer/law firm San Jacinto County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 17/33 Rpt: 21/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 09/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freyer, William <b>6</b> Contributor address; City; State; Zip Code  Winter Park, FL 32789	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Contributor's Principal Occupation Retail Sales		<b>9</b> Contributor's Job Title Salesman
<b>10</b> Contributor's employer/law firm Self Employed		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 11/22/2025 <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gallagher, Joseph M <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76109		<b>7</b> Amount of Contribution (\$)  \$250.00
Contributor's Principal Occupation personal injury and litigation attorney		Contributor's Job Title personal injury and litigation attorney
Contributor's employer/law firm Haslam & Gallagher LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/31/2025 <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Carlos <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77006		<b>7</b> Amount of Contribution (\$)  \$200.00
Contributor's Principal Occupation Lawyer		Contributor's Job Title Criminal Defense Attorney
Contributor's employer/law firm The Law Office of Carlos A García		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 18/33 Rpt: 22/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 08/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garver, Jared	<b>7</b> Amount of Contribution (\$) \$200.00
	<b>6</b> Contributor address; City; State; Zip Code  Montgomery, TX 77316	
<b>8</b> Contributor's Principal Occupation Manager for IBE Ranch, LLC		<b>9</b> Contributor's Job Title Manager
<b>10</b> Contributor's employer/law firm IBE Ranch, LLC		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 08/29/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ghutzman, Phillip  Contributor address; City; State; Zip Code  Houston, TX 77098		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Houstonbased attorney practicing Family Law and Alternative		Contributor's Job Title Houstonbased attorney practicing Family Law and Alternative
Contributor's employer/law firm Law Office of Phillip G. Ghutzman, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/31/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves, James  Contributor address; City; State; Zip Code  Houston, TX 77056		Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 19/33 Rpt: 23/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 11/13/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hager, Temple ..... <b>6</b> Contributor address; City; State; Zip Code  Spring, TX 77382	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Contributor's Principal Occupation retired airlinepilot memorial network.		<b>9</b> Contributor's Job Title retired
<b>10</b> Contributor's employer/law firm retired		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2025 ..... Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hansen, Donna ..... Contributor address; City; State; Zip Code  Conroe, TX 77301		Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation Montgomery County District Attorney's Office		Contributor's Job Title Division B Chief Prosecutor
Contributor's employer/law firm Montgomery County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/02/2025 ..... Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Adrienne ..... Contributor address; City; State; Zip Code  Pinecrest, FL 33156		Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 20/33 Rpt: 24/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 09/02/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harros, Mason <b>6</b> Contributor address; City; State; Zip Code  Pinecrest, FL 33156	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>8</b> Contributor's Principal Occupation Construction		<b>9</b> Contributor's Job Title Owner
<b>10</b> Contributor's employer/law firm Self Employed		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 11/05/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Kyle Contributor address; City; State; Zip Code  Baytown, TX 77521		Amount of Contribution (\$) \$25.00
Contributor's Principal Occupation hunting guide with KB Outdoors, Inc		Contributor's Job Title hunting guide
Contributor's employer/law firm KB Outdoors, Inc		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Joe Contributor address; City; State; Zip Code  Houston, TX 77007		Amount of Contribution (\$) \$300.00
Contributor's Principal Occupation Houston Criminal Defense Attorney		Contributor's Job Title Houston Criminal Defense Attorney
Contributor's employer/law firm Harris County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 21/33 Rpt: 25/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 11/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hickey, Kurt <b>6</b> Contributor address; City; State; Zip Code  Coldspring, TX 77331	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Contributor's Principal Occupation retired		<b>9</b> Contributor's Job Title retired
<b>10</b> Contributor's employer/law firm retired		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/31/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston Police Officers Union Contributor address; City; State; Zip Code  Houston, TX 77007		Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/15/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keith, Keith Contributor address; City; State; Zip Code  Trinity, TX 75862		Amount of Contribution (\$)  \$200.00
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 22/33 Rpt: 26/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 08/27/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Collin	<b>7</b> Amount of Contribution (\$) \$1,000.00
	<b>6</b> Contributor address; City; State; Zip Code  McKinney, TX 75071	
<b>8</b> Contributor's Principal Occupation Partner, Hanshaw Kennedy Hafen, LLP		<b>9</b> Contributor's Job Title Partner, Hanshaw Kennedy Hafen, LLP
<b>10</b> Contributor's employer/law firm Partner, Hanshaw Kennedy Hafen, LLP		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/07/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirklin, Charles
		Contributor address; City; State; Zip Code  Houston, TX 77055
Contributor's Principal Occupation longpracticing attorney		Contributor's Job Title The Kirklin Law Firm, P.C.
Contributor's employer/law firm The Kirklin Law Firm, P.C.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/06/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koloroutis, George
		Contributor address; City; State; Zip Code  Lake Lotawana, MO 64086
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 23/33 Rpt: 27/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 08/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaGrappe, John  <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77002	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>8</b> Contributor's Principal Occupation Criminal Defense (primary)		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm John LaGrappe Attorney at Law		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/18/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Jason  Contributor address; City; State; Zip Code  Houston, TX 77089		Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Warshofsky Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/13/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lozano, Raul  Contributor address; City; State; Zip Code  Coldspring, TX 77331		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 24/33 Rpt: 28/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 10/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mokaram, Ali <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77027	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>8</b> Contributor's Principal Occupation Houston Personal Injury Attorney		<b>9</b> Contributor's Job Title Founder
<b>10</b> Contributor's employer/law firm Mokaram Injury Lawyers (formerly Mokaram Law Firm)		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 12/15/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, M.G. Contributor address; City; State; Zip Code  Sugarland, TX 77479		Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/31/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mousa Thurman, Cherise Contributor address; City; State; Zip Code  Friendswood, TX 77546		Amount of Contribution (\$) \$50.00
Contributor's Principal Occupation PR / Media Relations Coordinator		Contributor's Job Title PR / Media Relations Coordinator
Contributor's employer/law firm Mousa Media		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 25/33 Rpt: 29/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 08/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nash, Shannon <b>6</b> Contributor address; City; State; Zip Code  Spring, TX 77373	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Contributor's Principal Occupation Texas CriminalDefense Attorney (Spring, TX)		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Tolleson & Nash, Attorneys at Law		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 11/08/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newman, Jessica Contributor address; City; State; Zip Code  Montgomery, TX 77356		Amount of Contribution (\$) \$300.00
Contributor's Principal Occupation Dental Hygienist		Contributor's Job Title Dental Hygienist
Contributor's employer/law firm Lakeside Dental Practice		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/17/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neyland, Dustan Contributor address; City; State; Zip Code  Houston, TX 77006		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation criminaldefense trial lawyer		Contributor's Job Title criminaldefense trial lawyer
Contributor's employer/law firm Greco Neyland, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 26/33 Rpt: 30/57	
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892	
<b>4</b> Date 10/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Lou <b>6</b> Contributor address; City; State; Zip Code  Deer Park, TX 77536	<b>7</b> Amount of Contribution (\$) \$1,000.00	
<b>8</b> Contributor's Principal Occupation retired		<b>9</b> Contributor's Job Title retired	
<b>10</b> Contributor's employer/law firm retired		<b>11</b> Law firm of contributor's spouse (if any)	
<b>12</b> If contributor is a child, law firm of parent(s) (if any)			
Date 09/05/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pozo, Denice Contributor address; City; State; Zip Code  Miami, FL 33146	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation retired		Contributor's Job Title retired	
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 11/18/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prior, Daniel Contributor address; City; State; Zip Code  Houston, TX 77036	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation attorney		Contributor's Job Title attorney	
Contributor's employer/law firm self-employed		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 27/33 Rpt: 31/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray, Darin <b>6</b> Contributor address; City; State; Zip Code  Conroe, TX 77301	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>8</b> Contributor's Principal Occupation criminaldefense lawyer based in Conroe, Texas		<b>9</b> Contributor's Job Title criminaldefense lawyer based in Conroe, Texas
<b>10</b> Contributor's employer/law firm Duckworth & Ray, LLP		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/10/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Brandon Contributor address; City; State; Zip Code  Conroe, TX 77304		Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Lawyer		Contributor's Job Title Principal
Contributor's employer/law firm Riley Law Group PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/31/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seufert, Chris Contributor address; City; State; Zip Code  Tomball, TX 77377		Amount of Contribution (\$) \$50.00
Contributor's Principal Occupation Montgomery County District Attorney's Office		Contributor's Job Title Attorney
Contributor's employer/law firm Montgomery County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 28/33 Rpt: 32/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 11/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharpen, Gary <b>6</b> Contributor address; City; State; Zip Code  The Woodlands, TX 77381	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Contributor's Principal Occupation Detective		<b>9</b> Contributor's Job Title Detective SJC Sheriff's Dept.
<b>10</b> Contributor's employer/law firm San Jacinto County		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shields, Judy Contributor address; City; State; Zip Code  The Woodlands, TX 77380	Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation Criminal Defense Attorney		Contributor's Job Title Criminal Defense Attorney
Contributor's employer/law firm Judith Shields, Attorney at Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siegler, Kelly Contributor address; City; State; Zip Code  Houston, TX 77063	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation TV Personality		Contributor's Job Title Cold Justice Lead Investigator
Contributor's employer/law firm Cold Justice		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 29/33 Rpt: 33/57	
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892	
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siegler, Sam <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77063	<b>7</b> Amount of Contribution (\$) \$1,000.00	
<b>8</b> Contributor's Principal Occupation retired		<b>9</b> Contributor's Job Title retired	
<b>10</b> Contributor's employer/law firm retired		<b>11</b> Law firm of contributor's spouse (if any)	
<b>12</b> If contributor is a child, law firm of parent(s) (if any)			
Date 10/31/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, William Contributor address; City; State; Zip Code  Houaton, TX 77030	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Art Dealer		Contributor's Job Title Simpson Galleries (Houston)	
Contributor's employer/law firm Simpson Galleries (Houston)		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 12/30/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snider, Marilyn Contributor address; City; State; Zip Code  Pointblank, TX 77364	Amount of Contribution (\$) \$50.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired	
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 30/33 Rpt: 34/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 09/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thering, Mark <b>6</b> Contributor address; City; State; Zip Code  Spring, TX 77373	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>8</b> Contributor's Principal Occupation founder of Thering Law Firm, P.C.		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Thering Law Firm, P.C.		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 08/28/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Buren, William Contributor address; City; State; Zip Code  Houston, TX 77002		Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Founder
Contributor's employer/law firm Law Offices of William H. Van Buren, P.C.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/05/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vogel, Clyde Contributor address; City; State; Zip Code  Conroe, TX 77304		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Police officer		Contributor's Job Title Conroe PD
Contributor's employer/law firm Conroe		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 31/33 Rpt: 35/57	
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892	
<b>4</b> Date 11/07/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vore, Amanda <b>6</b> Contributor address; City; State; Zip Code  Liberty, TX 77575	<b>7</b> Amount of Contribution (\$) \$1,000.00	
<b>8</b> Contributor's Principal Occupation retired		<b>9</b> Contributor's Job Title retired	
<b>10</b> Contributor's employer/law firm retired		<b>11</b> Law firm of contributor's spouse (if any)	
<b>12</b> If contributor is a child, law firm of parent(s) (if any)			
Date 11/07/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vore, Brian Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation retired		Contributor's Job Title retired	
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 11/07/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vore, Pam Contributor address; City; State; Zip Code  Liberty, TX 77575	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation retired		Contributor's Job Title retired	
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 32/33 Rpt: 36/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 11/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waggoner, Jason  <b>6</b> Contributor address; City; State; Zip Code  Coldspring, TX 77331	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Contributor's Principal Occupation Construction		<b>9</b> Contributor's Job Title General Manager
<b>10</b> Contributor's employer/law firm Self Employed		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 11/18/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Jeff  Contributor address; City; State; Zip Code  Houston, TX 77047		Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation President & Founder, Enterprise Commercial Paving		Contributor's Job Title President & Founder, Enterprise Commercial Paving
Contributor's employer/law firm Enterprise Commercial Paving		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/31/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, John B  Contributor address; City; State; Zip Code  Deer Park, TX 77536		Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Stock Broker		Contributor's Job Title Stock Broker
Contributor's employer/law firm UBS Financial Services Inc.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A(J)1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 33/33 Rpt: 37/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> Date 11/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zavitsanos, John ..... <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77024	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>8</b> Contributor's Principal Occupation commercial trial lawyer		<b>9</b> Contributor's Job Title Co-Founder
<b>10</b> Contributor's employer/law firm Ahmad, Zavitsanos & Mensing (AZA)		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

<p><b>The Instruction Guide explains how to complete this form.</b></p>		<p><b>1</b> Total pages Schedule A2: Sch: 1/1 Rpt: 38/57</p>
<p><b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)</p>		<p><b>3</b> Filer ID (Ethics Commission Filers) 00089892</p>
<p><b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>		<p><b>\$</b></p>
<p><b>5</b> Date 12/10/2025</p>	<p><b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Hon, Lee</p> <p><b>7</b> Contributor address; City; State; Zip Code  Livingston, TX 77351</p>	<p><b>8</b> Amount of contribution (\$) \$600.00</p> <p><b>9</b> In-kind contribution description 100 T-posts for signs</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p><b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p><b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)</p>
<p><b>12</b> Contributor's principal occupation (FOR JUDICIAL) Attorney</p>		<p><b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions) Attorney</p>
<p><b>14</b> Contributor's employer/law firm (FOR JUDICIAL) Hon Law Firm, PLLC</p>		<p><b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p><b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		

## LOANS (JUDICIAL)

## SCHEDULE E(J)

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E(J): Sch: 1/1 Rpt: 39/57
<b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089892
<b>4</b> TOTAL OF UNITEMIZED LOANS		\$
<b>5</b> Date of loan 12/29/2025	<b>7</b> Name of lender Coconu, Nicoleta	<b>8</b> out-of-state PAC (ID#: .....)
<b>6</b> Is lender a financial institution? No	<b>9</b> Loan Amount (\$) \$20,000.00	<b>10</b> Interest Rate 0
		<b>11</b> Maturity Date 12/31/2028
<b>12</b> Lender's Principal Occupation Dentist		<b>13</b> Lender's Job Title Dentist
<b>14</b> Lender's Employer/Law Firm		<b>15</b> Law Firm of lender's spouse (if any)
<b>16</b> If lender is child, law firm of parent(s) (if any)		
<b>17</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>18</b> Check if personal funds were deposited into political account <input checked="" type="checkbox"/> (See Instructions)
<b>19</b> GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	<b>20</b> Name of guarantor .....	<b>22</b> Amount Guaranteed (\$)
<b>21</b> Guarantor address; City; State; Zip Code		
<b>23</b> Guarantor's Principal Occupation		<b>24</b> Guarantor's Job Title
<b>25</b> Guarantor's Employer/Law Firm		<b>26</b> Law Firm of guarantor's spouse (if any)
<b>27</b> If guarantor is child, law firm of parent(s) (if any)		

# 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: 40/57	2 FILER NAME Freyer Jr., Robert A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089892	
4 Date 10/07/2025	5 Payee name Brookshire Brothers		
6 Amount (\$) \$69.75	7 Payee address; City; 14761 TX-150  Coldspring, TX 77331	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event food prep	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/25/2025	Payee name Canva		
Amount (\$) \$166.00	Payee address; City; 2410 S Dupont Highway  Camden, DE 19801	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design Software for Flyers	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/29/2025	Payee name Capitol Promotions Inc		
Amount (\$) \$287.00	Payee address; City; 2362 Oakdale Ave  Glenside, PA 19038	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Table Swag	
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: 41/57	2 FILER NAME Freyer Jr., Robert A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089892	
4 Date 12/03/2025	5 Payee name Constant Contact		
6 Amount (\$) \$117.26	7 Payee address; City; 890 Winter St. Suite 300 Waltham, MA 02451		
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 CRM	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/03/2025	Payee name Constant Contact		
Amount (\$) \$117.26	Payee address; City; 890 Winter St. Suite 300 Waltham, MA 02451		
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 CRM	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/03/2025	Payee name Constant Contact		
Amount (\$) \$117.26	Payee address; City; 890 Winter St. Suite 300 Waltham, MA 02451		
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 CRM	
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: 42/57	2 FILER NAME Freyer Jr., Robert A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089892	
4 Date 09/04/2025	5 Payee name Constant Contact		
6 Amount (\$) \$116.38	7 Payee address; City; 890 Winter St. Suite 300 Waltham, MA 02451	State; Zip Code	
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 CRM	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 12/16/2025	Payee name GOP Store		
Amount (\$) \$4,867.83	Payee address; City; 1810 Afton St.  Houston, TX 77055	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 12/29/2025	Payee name GoDaddy		
Amount (\$) \$5.00	Payee address; City; 100 S Mill Ave, Fl 16  Tempe, AZ 85281	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense URL	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held 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: 43/57	2 FILER NAME Freyer Jr., Robert A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089892
4 Date 11/28/2025	5 Payee name GoDaddy	
6 Amount (\$) \$5.28	7 Payee address; City; 100 S Mill Ave, Fl 16  Tempe, AZ 85281	
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 URL
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/27/2025	Payee name GoDaddy	
Amount (\$) \$5.28	Payee address; City; 100 S Mill Ave, Fl 16  Tempe, AZ 85281	
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 URL
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/29/2025	Payee name GoDaddy	
Amount (\$) \$5.28	Payee address; City; 100 S Mill Ave, Fl 16  Tempe, AZ 85281	
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 URL
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: 44/57	2 FILER NAME Freyer Jr., Robert A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089892	
4 Date 08/28/2025	5 Payee name GoDaddy		
6 Amount (\$) \$190.31	7 Payee address; City; 100 S Mill Ave, Fl 16  Tempe, AZ 85281		
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 URL	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 08/13/2025	Payee name GoDaddy		
Amount (\$) \$24.18	Payee address; City; 100 S Mill Ave, Fl 16  Tempe, AZ 85281		
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 URL	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 12/15/2025	Payee name Mesa Media		
Amount (\$) \$800.00	Payee address; City; PO Box 201131  Austin, TX 78720		
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 Data Management	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held 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: 45/57	2 FILER NAME Freyer Jr., Robert A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089892
4 Date 12/02/2025	5 Payee name Mesa Media	
6 Amount (\$) \$800.00	7 Payee address; City; State; Zip Code PO Box 201131  Austin, TX 78720	
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 Data Management
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Mesa Media	Office sought Office held
Date 12/02/2025	Payee name Mesa Media	
Amount (\$) \$4,000.00	Payee address; City; State; Zip Code PO Box 201131  Austin, TX 78720	
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 Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Mesa Media	Office sought Office held
Date 10/27/2025	Payee name Mesa Media	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code PO Box 201131  Austin, TX 78720	
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 Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Mesa Media	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: 46/57	2 FILER NAME Freyer Jr., Robert A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089892
4 Date 10/21/2025	5 Payee name Mesa Media	
6 Amount (\$) \$2,000.00	7 Payee address; City; State; Zip Code PO Box 201131  Austin, TX 78720	
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 Consulting - Data
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Mesa Media	Office sought Office held
Date 09/22/2025	Payee name Mesa Media	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code PO Box 201131  Austin, TX 78720	
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 Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Oakhurst Volunteer Fire Department	Office sought Office held
Date 11/12/2025	Payee name Oakhurst Volunteer Fire Department	
Amount (\$) \$20.00	Payee address; City; State; Zip Code 990 US-190  Oakhurst, TX 77359	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food Donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Oakhurst Volunteer Fire Department	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: 47/57	2 FILER NAME Freyer Jr., Robert A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089892
4 Date 12/29/2025	5 Payee name People's State Bank	
6 Amount (\$) \$5.00	7 Payee address; City; 15001 TX-150  Coldspring, TX 77331	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense wire fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/05/2025	Payee name People's State Bank	
Amount (\$) \$4.00	Payee address; City; 15001 TX-150  Coldspring, TX 77331	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense wire fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/07/2025	Payee name People's State Bank	
Amount (\$) \$4.00	Payee address; City; 15001 TX-150  Coldspring, TX 77331	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense wire fee
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: 48/57	2 FILER NAME Freyer Jr., Robert A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089892
4 Date 10/07/2025	5 Payee name People's State Bank	
6 Amount (\$) \$4.00	7 Payee address; City; 15001 TX-150  Coldspring, TX 77331	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense wire fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/05/2025	Payee name People's State Bank	
Amount (\$) \$4.00	Payee address; City; 15001 TX-150  Coldspring, TX 77331	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense wire fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/06/2025	Payee name People's State Bank	
Amount (\$) \$30.00	Payee address; City; 15001 TX-150  Coldspring, TX 77331	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense checks
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: 49/57	2 FILER NAME Freyer Jr., Robert A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089892
4 Date 08/22/2025	5 Payee name Polk County Enterprise	
6 Amount (\$) \$134.40	7 Payee address; City; 100 E Calhoun St.  Livingston, TX 77351	
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 Newspaper ad
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/01/2025	Payee name Polk County Enterprise	
Amount (\$) \$409.50	Payee address; City; 100 E Calhoun St.  Livingston, TX 77351	
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 Newspaper ad
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/09/2025	Payee name RWTC	
Amount (\$) \$440.00	Payee address; City; PO Box 1916  Trinity, TX 75862	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation to organization
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: 50/57	2 FILER NAME Freyer Jr., Robert A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089892
4 Date 09/23/2025	5 Payee name RWTC	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code PO Box 1916  Trinity, TX 75862	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation to organization
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/03/2025	Payee name Republican Party of Texas	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 807 Brazos St. Suite 701 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/06/2025	Payee name SAAFE House	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 31 N Butler St.  Coldspring, TX 77331	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to SAAFE House
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: 51/57	2 FILER NAME Freyer Jr., Robert A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089892
4 Date 08/26/2025	5 Payee name SAAFE House	
6 Amount (\$) \$130.00	7 Payee address; City; 31 N Butler St.  Coldspring, TX 77331	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to SAAFE House
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/06/2025	Payee name San Jacinto County Chaimber of Commerce	
Amount (\$) \$200.00	Payee address; City; 31 N Butler Ave.  Coldpsring, TX 77331	
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 Membership Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/25/2025	Payee name Table Covers Now	
Amount (\$) \$307.59	Payee address; City; 12701 Executive Dr Suite 604B Stafford, TX 77477	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Table Cover
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: 13/14 Rpt: 52/57	2 FILER NAME Freyer Jr., Robert A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089892
4 Date 10/02/2025	5 Payee name Trinity Masonic Lodge 14	
6 Amount (\$) \$200.00	7 Payee address; City; 1907 N Washington Ave.  Livingston, TX 77351	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to Lodge
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/21/2025	Payee name Vistaprint	
Amount (\$) \$160.32	Payee address; City; 95 Hayden Ave  Lexington, MA 02421	
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 Business Cards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/16/2025	Payee name Vistaprint	
Amount (\$) \$125.26	Payee address; City; 95 Hayden Ave  Lexington, MA 02421	
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 Business Cards
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: 53/57	2 FILER NAME Freyer Jr., Robert A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089892
4 Date 10/28/2025	5 Payee name Waggin' Tails Dog Rescue of SJC	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 6301 FM 945 South  Cleveland, TX 77328	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to Charity
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: 1/3 Rpt: 54/57	2 FILER NAME Freyer Jr., Robert A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089892	
4 Date 07/28/2025	5 Payee name Gun Owners of America		
6 Amount (\$) \$25.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 8001 Forbes Place Suite 202 Springfield, VA 22151		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to Association	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/29/2025	Payee name NRA		
Amount (\$) \$45.00  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 11250 Waples Mill Road  Fairfax, VA 22030		
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 membership	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/28/2025	Payee name Republican National Lawyers Association		
Amount (\$) \$100.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code Post Office Box 18965  Washington, DC 20036		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to organization	
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: 2/3 Rpt: 55/57	2 FILER NAME Freyer Jr., Robert A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089892	
4 Date 11/05/2025	5 Payee name San Jacinto County GOP		
6 Amount (\$) \$2,500.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 370  Coldpsring, TX 77331		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2026 Silver Table at Reagan Dinner	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/28/2025	Payee name Society for the Rule of Law		
Amount (\$) \$53.60  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1100 Vermont Ave NW 10th Floor Washington, DC 20005		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to Organization	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/06/2025	Payee name TST Bullet Grill House		
Amount (\$) \$194.92  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 401 TX-156  Point Blank, TX 77364		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meet n Greet	
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: 3/3 Rpt: 56/57	2 FILER NAME Freyer Jr., Robert A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00089892	
4 Date 12/30/2025	5 Payee name Thomas Supply, Inc.		
6 Amount (\$) \$74.69	7 Payee address; City; State; Zip Code PO Box 1256  Livingston, TX 77351		
<input type="checkbox"/> Reimbursement from political contributions intended	(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 T Post Driver, gloves, pliers	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/22/2025	Payee name USPS		
Amount (\$) \$33.40	Payee address; City; State; Zip Code 14231 State Highway 150 W  Coldpsring, TX 77331		
<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 mail out check to consultant w tracking	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/25/2025	Payee name Walmart		
Amount (\$) \$89.62	Payee address; City; State; Zip Code 1620 W Church St  Livingston, TX 77351		
<input checked="" type="checkbox"/> Reimbursement from political contributions intended	PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ingredients for event table pickles - SJC event	
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**

<p><b>The Instruction Guide explains how to complete this form.</b></p>		<p><b>1</b> Total pages Schedule K: Sch: 1/1 Rpt: 57/57</p>
<p><b>2</b> FILER NAME Freyer Jr., Robert A. (Mr.)</p>		<p><b>3</b> Filer ID (Ethics Commission Filers) 00089892</p>
<p><b>4</b> Date 08/27/2025</p>	<p><b>5</b> Name of person from whom amount is received Adam, Adam</p>	<p><b>8</b> Amount (\$) \$1.00</p>
	<p><b>6</b> Address of person from whom amount is received; City; State; Zip Code Houston, TX 77055</p>	
	<p><b>7</b> Purpose for which amount is received contribution</p>	<input checked="" type="checkbox"/> Check if political contribution returned to filer
<p>Date 11/01/2025</p>	<p>Name of person from whom amount is received Henderson, Kyle</p>	<p>Amount (\$) \$1.00</p>
	<p>Address of person from whom amount is received; City; State; Zip Code Baytown, TX 77521</p>	
	<p>Purpose for which amount is received contribution</p>	<input checked="" type="checkbox"/> Check if political contribution returned to filer
<p>Date 10/18/2025</p>	<p>Name of person from whom amount is received Price, MKP</p>	<p>Amount (\$) \$250.00</p>
	<p>Address of person from whom amount is received; City; State; Zip Code Coldspring, TX 77331</p>	
	<p>Purpose for which amount is received contribution</p>	<input checked="" type="checkbox"/> Check if political contribution returned to filer
<p>Date 09/17/2025</p>	<p>Name of person from whom amount is received Ray, Darin</p>	<p>Amount (\$) \$1,000.00</p>
	<p>Address of person from whom amount is received; City; State; Zip Code Conroe, TX 77301</p>	
	<p>Purpose for which amount is received contribution</p>	<input checked="" type="checkbox"/> Check if political contribution returned to filer