

**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) 00037413	2 Total pages filed: 20		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Chap B.	MI	<b>OFFICE USE ONLY</b>		
	NICKNAME	LAST Cain	SUFFIX III	Date Received ELECTRONICALLY FILED 01/31/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE			Date Hand-delivered or Date Postmarked		
	<b>REDACTED PER 254.0313, GOV'T CODE</b>			Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Stacey C.	MI			
	NICKNAME	LAST Cain	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;	ZIP CODE
	<b>REDACTED PER 254.0313, GOV'T CODE</b>					
7 CAMPAIGN TREASURER PHONE	AREA CODE (936) 776-7396	PHONE NUMBER EXTENSION				
8 REPORT TYPE	<input type="checkbox"/> January 15	<input checked="" 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 01/01/2026	Day	Year	Month 01/22/2026	Day	Year
10 ELECTION	ELECTION DATE Month 03/03/2026	Day	Year	ELECTION TYPE  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Runoff <input type="checkbox"/> Special <input type="checkbox"/> Other		
11 OFFICE	OFFICE HELD (if any) District Judge (Multi-county) District 253 Chambers & Liberty			12 OFFICE SOUGHT (if known) District Judge District 253		

**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	Cain III, Chap B. (The Honorable)		14 Filer ID (Ethics Commission Filers) 00037413												
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)		\$ 10,150.00												
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00												
	4. <b>TOTAL POLITICAL EXPENDITURES</b>		\$ 11,329.19												
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 9,138.69												
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00												
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>The Honorable Chap B. Cain III _____ 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 Cain III, Chap B. (The Honorable)	<b>19</b> Filer ID (Ethics Commission Filers) 00037413
<b>20</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A(J): MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) \$ 10,150.00	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$	
3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) \$	
4. <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL) \$	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 11,329.19	
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 type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$	
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$	
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 1/5 Rpt: 4/20												
<b>2</b> FILER NAME Cain III, Chap B. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00037413												
<b>4</b> Date 01/08/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etheridge and Bacon Law Firm, PLLC .....  <b>6</b> Contributor address; City; State; Zip Code  Liberty, TX 77575	<b>7</b> Amount of Contribution (\$) \$500.00												
	<b>8</b> Contributor's Principal Occupation  <b>10</b> Contributor's employer/law firm	<b>9</b> Contributor's Job Title  <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)														
<table border="1"> <tr> <td>Date 01/08/2026</td> <td> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Roy .....   Contributor address; City; State; Zip Code  Baytown, TX 77521 </td> <td>Amount of Contribution (\$) \$100.00</td> </tr> <tr> <td colspan="2"> Contributor's Principal Occupation Attorney at Law </td> <td>Contributor's Job Title Attorney at Law</td> </tr> <tr> <td colspan="2"> Contributor's employer/law firm Roy L. Fuller, P.C. </td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3"> If contributor is a child, law firm of parent(s) (if any) </td> </tr> </table>			Date 01/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Roy .....  Contributor address; City; State; Zip Code  Baytown, TX 77521	Amount of Contribution (\$) \$100.00	Contributor's Principal Occupation Attorney at Law		Contributor's Job Title Attorney at Law	Contributor's employer/law firm Roy L. Fuller, P.C.		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 01/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Roy .....  Contributor address; City; State; Zip Code  Baytown, TX 77521	Amount of Contribution (\$) \$100.00												
Contributor's Principal Occupation Attorney at Law		Contributor's Job Title Attorney at Law												
Contributor's employer/law firm Roy L. Fuller, P.C.		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 01/14/2026</td> <td> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gelb, Jeffrey .....   Contributor address; City; State; Zip Code  Galveston, TX 77550 </td> <td>Amount of Contribution (\$) \$200.00</td> </tr> <tr> <td colspan="2"> Contributor's Principal Occupation Attorney at Law </td> <td>Contributor's Job Title Attorney at Law</td> </tr> <tr> <td colspan="2"> Contributor's employer/law firm Jeffrey Gelb, Attorney at Law </td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3"> If contributor is a child, law firm of parent(s) (if any) </td> </tr> </table>			Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gelb, Jeffrey .....  Contributor address; City; State; Zip Code  Galveston, TX 77550	Amount of Contribution (\$) \$200.00	Contributor's Principal Occupation Attorney at Law		Contributor's Job Title Attorney at Law	Contributor's employer/law firm Jeffrey Gelb, Attorney at Law		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gelb, Jeffrey .....  Contributor address; City; State; Zip Code  Galveston, TX 77550	Amount of Contribution (\$) \$200.00												
Contributor's Principal Occupation Attorney at Law		Contributor's Job Title Attorney at Law												
Contributor's employer/law firm Jeffrey Gelb, Attorney at Law		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: 2/5 Rpt: 5/20
<b>2</b> FILER NAME Cain III, Chap B. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00037413
<b>4</b> Date 01/14/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordy, Russell ..... <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77007	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Contributor's Principal Occupation Oil & Gas		<b>9</b> Contributor's Job Title President
<b>10</b> Contributor's employer/law firm Gordy Companies		<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 01/08/2026 ..... Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Christian ..... Contributor address; City; State; Zip Code  Mont Belvieu, TX 77523		Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Attorney at Law		Contributor's Job Title Attorney at Law
Contributor's employer/law firm Christian R. Johnson PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/08/2026 ..... Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirkwood, Keaton ..... Contributor address; City; State; Zip Code  Liberty, TX 77575		Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Attorney at Law		Contributor's Job Title Attorney at Law
Contributor's employer/law firm Law Office of Keaton Kirkwood, 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: 3/5 Rpt: 6/20
<b>2</b> FILER NAME Cain III, Chap B. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00037413
<b>4</b> Date 01/14/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieck, Ed <b>6</b> Contributor address; City; State; Zip Code  Anahuac, TX 77514	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>8</b> Contributor's Principal Occupation Attorney at Law		<b>9</b> Contributor's Job Title Attorney at Law
<b>10</b> Contributor's employer/law firm Ed D. Lieck, 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 01/08/2026 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebaugh Dority & Associates, LLP Contributor address; City; State; Zip Code  Baytown, TX 77521		Amount of Contribution (\$) \$1,000.00
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 01/08/2026 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neill, Charles Contributor address; City; State; Zip Code  Baytown, TX 77521		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney at Law		Contributor's Job Title Attorney at Law
Contributor's employer/law firm Charles David Neill, Attorney at Law		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: 4/5 Rpt: 7/20												
<b>2</b> FILER NAME Cain III, Chap B. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00037413												
<b>4</b> Date 01/08/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pardo & Homan, P.C.  <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77057	<b>7</b> Amount of Contribution (\$)  \$1,000.00												
<b>8</b> Contributor's Principal Occupation		<b>9</b> Contributor's Job Title												
<b>10</b> Contributor's employer/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)														
<table border="1"> <tr> <td>           Date            01/14/2026         </td> <td>           Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)            Sanders, Maxie              Contributor address; City; State; Zip Code              Anahuac, TX 77514         </td> <td>           Amount of Contribution (\$)              \$100.00         </td> </tr> <tr> <td colspan="2">           Contributor's Principal Occupation            Retired         </td> <td>           Contributor's Job Title            Retired         </td> </tr> <tr> <td colspan="2">           Contributor's employer/law firm            Retired         </td> <td>           Law firm of contributor's spouse (if any)         </td> </tr> <tr> <td colspan="3">           If contributor is a child, law firm of parent(s) (if any)         </td> </tr> </table>			Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Maxie  Contributor address; City; State; Zip Code  Anahuac, TX 77514	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 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Maxie  Contributor address; City; State; Zip Code  Anahuac, TX 77514	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)														
<table border="1"> <tr> <td>           Date            01/14/2026         </td> <td>           Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)            Smith, Donlee              Contributor address; City; State; Zip Code              Katy, TX 77450         </td> <td>           Amount of Contribution (\$)              \$1,000.00         </td> </tr> <tr> <td colspan="2">           Contributor's Principal Occupation            Attorney at Law         </td> <td>           Contributor's Job Title            Attorney at Law         </td> </tr> <tr> <td colspan="2">           Contributor's employer/law firm            Donlee Smith, Attorney at Law         </td> <td>           Law firm of contributor's spouse (if any)         </td> </tr> <tr> <td colspan="3">           If contributor is a child, law firm of parent(s) (if any)         </td> </tr> </table>			Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Donlee  Contributor address; City; State; Zip Code  Katy, TX 77450	Amount of Contribution (\$)  \$1,000.00	Contributor's Principal Occupation Attorney at Law		Contributor's Job Title Attorney at Law	Contributor's employer/law firm Donlee Smith, Attorney at Law		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Donlee  Contributor address; City; State; Zip Code  Katy, TX 77450	Amount of Contribution (\$)  \$1,000.00												
Contributor's Principal Occupation Attorney at Law		Contributor's Job Title Attorney at Law												
Contributor's employer/law firm Donlee Smith, Attorney at Law		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: 5/5 Rpt: 8/20	
<b>2</b> FILER NAME Cain III, Chap B. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00037413	
<b>4</b> Date 01/09/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Speer, Gordon ..... <b>6</b> Contributor address; City; State; Zip Code  Anahuac, TX 77514	<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 01/08/2026		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strong, Randall ..... Contributor address; City; State; Zip Code  Baytown, TX 77521	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Attorney at Law		Contributor's Job Title Attorney at Law	
Contributor's employer/law firm Randall B. Strong, Attorney at Law		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 01/08/2026		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner Garrison Law ..... Contributor address; City; State; Zip Code  Baytown, TX 77521	Amount of Contribution (\$) \$1,000.00
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)			

# 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: 1/12 Rpt: 9/20	2 FILER NAME Cain III, Chap B. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00037413
4 Date 01/05/2026	5 Payee name 146 Sign Company, LLC	
6 Amount (\$) \$1,466.68	7 Payee address; City; 24095 Interstate 10  Wallisville, TX 77597	
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 Campaign signs
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/09/2026	Payee name Amazon.com	
Amount (\$) \$39.38	Payee address; City; 13455 Noel Rd Galleria Tower Two Dallas, TX 75240	
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 Ink cartridge for printing labels for campaign packets
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/07/2026	Payee name Anahuac ISD Education Foundation	
Amount (\$) \$450.00	Payee address; City; PO Box 2347  Anahuac, TX 77514	
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: Anahuac ISD Ed. Foundation - Rollin' on the River Bayou Ball (tickets and banner)
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: 2/12 Rpt: 10/20	2 FILER NAME Cain III, Chap B. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00037413
4 Date 01/12/2026	5 Payee name Anahuac ISD Education Foundation	
6 Amount (\$) \$51.55	7 Payee address; City; State; Zip Code PO Box 2347  Anahuac, TX 77514	
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 for ticket to Bayou Ball
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/20/2026	Payee name Ardoin, Chance	
Amount (\$) \$120.00	Payee address; City; State; Zip Code 459 County Road 2092  Liberty, TX 77575	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labor for campaign sign deliver/placement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/08/2026	Payee name Armpow	
Amount (\$) \$51.21	Payee address; City; State; Zip Code 2904 Palm Way  Austin, TX 78758	
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 Zip ties for campaign signs
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: 3/12 Rpt: 11/20	2 FILER NAME Cain III, Chap B. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00037413
4 Date 01/16/2026	5 Payee name Barbers Hill 4-H Booster Club	
6 Amount (\$) \$100.00	7 Payee address; City; PO Box 981  Mont Belvieu, TX 77523	
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 for upcoming Project Show on 2/7/2026
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/07/2026	Payee name Bluebonnet News	
Amount (\$) \$1,200.00	Payee address; City; 1514 Hwy. 105 E  Liberty, TX 77575	
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 January and February 2026 political advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/12/2026	Payee name Brayden, Thomas	
Amount (\$) \$200.00	Payee address; City; State; Zip Code  REDACTED PER 254.0401, ELEC. CODE  Baytown, TX 77523	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labor for sign delivery/placement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/12 Rpt: 12/20	2 FILER NAME Cain III, Chap B. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00037413
4 Date 01/03/2026	5 Payee name CapCut	
6 Amount (\$) \$107.99	7 Payee address; City; State; Zip Code 2801 Mission College Blvd  Mountain View, CA 94043	
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 Photo and video editor software for campaign videos and photos
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/08/2026	Payee name Chambers County GOP	
Amount (\$) \$327.52	Payee address; City; State; Zip Code PO Bo 467  Mont Belvieu, TX 77580	
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 Tickets to the Chambers County GOP Lincoln Reagan Dinner
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/17/2026	Payee name Cleveland Livestock Association	
Amount (\$) \$129.99	Payee address; City; State; Zip Code PO Box 697  Cleveland, TX 77328	
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 - tickets to Cattlemen's Ball
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: 5/12 Rpt: 13/20	2 FILER NAME Cain III, Chap B. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00037413
4 Date 01/09/2026	5 Payee name Dayton Volunteer Fire Department	
6 Amount (\$) \$234.84	7 Payee address; City; State; Zip Code 1001 Bill Moreau Dr.  Dayton, TX 77535	
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 of tabletop griddle to Dayton VFD Boots & Bullets Fundraiser
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/21/2026	Payee name Ducks Unlimited	
Amount (\$) \$143.30	Payee address; City; State; Zip Code One Waterfowl Way  Memphis, TN 38120	
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 - tickets to the Big Thicket Ducks Unlimited Dinner
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/15/2026	Payee name East Chambers ISD Education Foundation	
Amount (\$) \$421.00	Payee address; City; State; Zip Code 216 Champions Loop  Winnie, TX 77665	
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 East Chambers ISD Education Foundation for tickets to 2026 Buccaneer Bingo
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/12 Rpt: 14/20	2 FILER NAME Cain III, Chap B. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00037413
4 Date 01/20/2026	5 Payee name Elmore, Caden	
6 Amount (\$) \$300.00	7 Payee address; City; 360 CR 2092  Liberty, TX 77575	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labor for campaign sign deliver/placement
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/20/2026	Payee name Elmore Jr., Chadwick	
Amount (\$) \$360.00	Payee address; City; 360 CR 2092  Liberty, TX 77575	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labor for campaign sign deliver/placement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/02/2026	Payee name Fregia, Brady	
Amount (\$) \$100.00	Payee address; City; 5903 Plantation Dr.  Baytown, TX 77523	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labor for campaign sign delivery/placement
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  
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 F1: Sch: 7/12 Rpt: 15/20	2 FILER NAME Cain III, Chap B. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00037413
4 Date 01/05/2026	5 Payee name Fregia, Chad	
6 Amount (\$) \$126.40	7 Payee address; City; State; Zip Code 3004 Tyler St  Dayton, TX 77535	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labor for campaign sign trailer light replacement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
Date 01/12/2026	Payee name LuxeCakePrints	
Amount (\$) \$120.41	Payee address; City; State; Zip Code 117 Adams St  Brooklyn, NY 11201	
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 Custom edible cookie toppers for campaign events
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
Date 01/04/2026	Payee name Maybesta	
Amount (\$) \$20.27	Payee address; City; State; Zip Code 11501 Alterra Pkwy  Austin, TX 78758	
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 Wireless mini microphone for iPhone for campaign video recordings
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/12 Rpt: 16/20	2 FILER NAME Cain III, Chap B. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00037413
4 Date 01/20/2026	5 Payee name Mont Belvieu Area Chamber of Commerce	
6 Amount (\$) \$231.75	7 Payee address; City; State; Zip Code 2822 North FM 565 Rd  Mont Belvieu, TX 77523	
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 - tickets to State of the County Luncheon
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/05/2026	Payee name O'Reilly Auto Parts	
Amount (\$) \$73.60	Payee address; City; State; Zip Code 201 Hwy 90 W  Dayton, TX 77535	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tailer light for campaign sign trailer
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/12/2026	Payee name Ogden, Ellisyn	
Amount (\$) \$65.00	Payee address; City; State; Zip Code  REDACTED PER 254.0401, ELEC. CODE  Baytown, TX 77523	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labor for assembling campaign signs
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: 9/12 Rpt: 17/20	2 FILER NAME Cain III, Chap B. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00037413
4 Date 01/12/2026	5 Payee name Ogden, Ellisyn	
6 Amount (\$) \$40.00	7 Payee address; City; State; Zip Code  REDACTED PER 254.0401, ELEC. CODE  Baytown, TX 77523	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labor for assembling campaign signs
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/09/2026	Payee name Pin Chuang Enterprises	
Amount (\$) \$7.46	Payee address; City; State; Zip Code 4121 International Pkwy  Carrollton, TX 75007	
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 Labels for campaign packets
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/20/2026	Payee name Pin Chuang Enterprises	
Amount (\$) \$7.46	Payee address; City; State; Zip Code 4121 International Pkwy  Carrollton, TX 75007	
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 Campaign labels
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: 10/12 Rpt: 18/20	2 FILER NAME Cain III, Chap B. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00037413
4 Date 01/12/2026	5 Payee name Sprint2Print	
6 Amount (\$) \$1,764.48	7 Payee address; City; State; Zip Code 8748 Clay Rd  Houston, TX 77080	
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 Campaign signs
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/22/2026	Payee name The Vindicator	
Amount (\$) \$2,545.00	Payee address; City; State; Zip Code PO Box 9189  Liberty, TX 77575	
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 Campaign ads for The Anahuac Progress, The Vindicator, and subscriptions to both news
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/21/2026	Payee name The Vindicator	
Amount (\$) \$130.00	Payee address; City; State; Zip Code 1939 Trinity  Liberty, TX 77575	
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 Campaign ads
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: 11/12 Rpt: 19/20	2 FILER NAME Cain III, Chap B. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00037413
4 Date 01/12/2026	5 Payee name Tractor Supply	
6 Amount (\$) \$101.80	7 Payee address; City; 1725 East Houston St  Cleveland, TX 77327	
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 6-ft T-posts
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 01/16/2026	Payee name Tractor Supply	
Amount (\$) \$101.80	Payee address; City; 2337 North Main St  Liberty, TX 77575	
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 6-ft T-posts for campaign signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 01/14/2026	Payee name Tractor Supply	
Amount (\$) \$101.80	Payee address; City; 1725 East Houston St  Cleveland, TX 77327	
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 6ft t-posts for campaign signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought

# 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: 12/12 Rpt: 20/20	2 FILER NAME Cain III, Chap B. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00037413
4 Date 01/17/2026	5 Payee name Tractor Supply	
6 Amount (\$) \$50.90	7 Payee address; City; 1725 East Houston St  Cleveland, TX 77327	
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 6ft t-posts for campaign signs
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/16/2026	Payee name Walmart	
Amount (\$) \$37.60	Payee address; City; 8700 N Highway 146  Baytown, TX 77523	
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 Ring light and tripod for campaign videos/photos
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held