

# CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM JCOR-C/OH

<b>1</b> Filer ID (Ethics Commission Filers) 00082114		<b>2</b> Total pages filed: 45		<b>OFFICE USE ONLY</b>			
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable		FIRST Charles M.	MI	Date Received  ELECTRONICALLY FILED 01/25/2026		
	NICKNAME Michael		LAST Davis	SUFFIX			
<b>4</b> ORIGINAL REPORT TYPE	<input checked="" type="checkbox"/> January 15		<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)	Date Hand-delivered or Date Postmarked		
	<input type="checkbox"/> July 15		<input type="checkbox"/> Exceeded modified reporting limit		Receipt #		
	<input type="checkbox"/> 30th day before election		<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		Amount		
	<input type="checkbox"/> 8th day before election		<input type="checkbox"/> Final Report (Attach C/OH-FR)		Date Processed		
<b>5</b> ORIGINAL PERIOD COVERED	Month	Day	Year	Month	Day	Year	Date Imaged
07/01/2025 THROUGH 12/31/2025							

**6** EXPLANATION OF CORRECTION

The reported cash on hand was incorrectly entered as of the last date of this reporting period.

**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.

The Honorable Charles M. Davis

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

<b>The JC/OH Instruction Guide explains how to complete this form.</b>		<b>1 Filer ID</b> (Ethics Commission Filers) 00082114	<b>2 Total pages filed:</b> 45								
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	<table style="width: 100%;"> <tr> <td style="width: 30%;">MS / MRS / MR The Honorable</td> <td style="width: 30%;">FIRST Charles M.</td> <td style="width: 40%;">MI</td> </tr> </table>		MS / MRS / MR The Honorable	FIRST Charles M.	MI	<b>OFFICE USE ONLY</b> Date Received <b>ELECTRONICALLY FILED</b> 01/25/2026					
	MS / MRS / MR The Honorable	FIRST Charles M.	MI								
<table style="width: 100%;"> <tr> <td style="width: 30%;">NICKNAME Michael</td> <td style="width: 30%;">LAST Davis</td> <td style="width: 40%;">SUFFIX</td> </tr> </table>		NICKNAME Michael	LAST Davis	SUFFIX							
NICKNAME Michael	LAST Davis	SUFFIX									
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE  <div style="background-color: black; color: white; text-align: center; padding: 5px;"> <b>REDACTED PER 254.0313, GOV'T CODE</b> </div>		Date Hand-delivered or Date Postmarked  <table style="width: 100%;"> <tr> <td style="width: 50%;">Receipt #</td> <td style="width: 50%;">Amount</td> </tr> </table> Date Processed  Date Imaged	Receipt #	Amount						
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	<table style="width: 100%;"> <tr> <td style="width: 30%;">MS / MRS / MR Mr.</td> <td style="width: 30%;">FIRST Michael S.</td> <td style="width: 40%;">MI</td> </tr> </table>		MS / MRS / MR Mr.	FIRST Michael S.	MI						
	MS / MRS / MR Mr.	FIRST Michael S.	MI								
<table style="width: 100%;"> <tr> <td style="width: 30%;">NICKNAME</td> <td style="width: 30%;">LAST Thomason</td> <td style="width: 40%;">SUFFIX</td> </tr> </table>		NICKNAME	LAST Thomason	SUFFIX							
NICKNAME	LAST Thomason	SUFFIX									
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  <div style="background-color: black; color: white; text-align: center; padding: 5px;"> <b>REDACTED PER 254.0313, GOV'T CODE</b> </div>											
<b>6 CAMPAIGN TREASURER ADDRESS</b> (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  <div style="background-color: black; color: white; text-align: center; padding: 5px;"> <b>REDACTED PER 254.0313, GOV'T CODE</b> </div>										
<b>7 CAMPAIGN TREASURER PHONE</b>	AREA CODE PHONE NUMBER EXTENSION (903) 922-6315										
<b>8 REPORT TYPE</b>	<table style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded modified reporting limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH-FR)</td> </tr> </table>			<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)
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<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)								
<b>9 PERIOD COVERED</b>	Month Day Year                      Month Day Year 07/01/2025                      THROUGH                      12/31/2025										
<b>10 ELECTION</b>	<table style="width: 100%;"> <tr> <td style="width: 40%;">           ELECTION DATE            Month Day Year            03/03/2026         </td> <td style="width: 60%;">           ELECTION TYPE  <input checked="" type="checkbox"/> Primary      <input type="checkbox"/> Runoff      <input type="checkbox"/> Other  <input type="checkbox"/> General      <input type="checkbox"/> Special         </td> </tr> </table>			ELECTION DATE Month Day Year 03/03/2026	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special						
ELECTION DATE Month Day Year 03/03/2026	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special										
<b>11 OFFICE</b>	OFFICE HELD (if any) Court Of Appeals, Justice Place 3 District 12th Smith		<b>12 OFFICE SOUGHT (if known)</b> Court Of Appeals, Justice Place 3 District 12								

**GO TO PAGE 2**

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2

3 of 45

<b>13 C / OH NAME</b> Davis, Charles M. (The Honorable)	<b>14 Filer ID</b> (Ethics Commission Filers) 00082114
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<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>
	<input type="checkbox"/> GENERAL	<b>COMMITTEE ADDRESS</b>
	<input type="checkbox"/> SPECIFIC	
	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>	
	<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>	

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 115,825.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 18,085.67
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 97,739.33
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**17 AFFIDAVIT**

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

The Honorable Charles M. Davis

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

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

4 of 45

<b>18 FILER NAME</b> Davis, Charles M. (The Honorable)		<b>19 Filer ID</b> (Ethics Commission Filers) 00082114
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 115,825.00
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	\$ 14,647.55
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 931.56
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 2,891.56
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: 1/29 Rpt: 5/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Adam (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tyler, TX 75702	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Partner
<b>10</b> Contributor's employer/law firm Allen & Thauwald, P.C.		<b>11</b> Law firm of contributor's spouse (if any) Martin Walker
<b>12</b> 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#: _____) Allen, Marisa (Mrs.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75702	Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Martin Walker		Law firm of contributor's spouse (if any) Allen & Thauwald, P.C.
If contributor is a child, law firm of parent(s) (if any)		

  

Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bankhead, John (Mr.) <hr/> Contributor address; City; State; Zip Code  Madisonville, TX 77864	Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Law Office of John Bankhead		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: 2/29 Rpt: 6/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/22/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bass, Barbara (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tyler, TX 75703	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Contributor's Principal Occupation Retired		<b>9</b> Contributor's Job Title Retired
<b>10</b> Contributor's employer/law firm N/A		<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 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Martin (Mr.) <hr/> Contributor address; City; State; Zip Code  Athens, TX 75752	Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Martin R. Bennett, P.C.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Biggs, Kenneth (Mr.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75703	Amount of Contribution (\$)  \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Biggs & Greenslade, 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: 3/29 Rpt: 7/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonner, Ben (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tyler, TX 75701	<b>7</b> Amount of Contribution (\$)  <div style="text-align: right;">\$1,000.00</div>
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Richards Penn		<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 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Lee (Ms.) <hr/> Contributor address; City; State; Zip Code  Palestine, TX 75801	Amount of Contribution (\$)  <div style="text-align: right;">\$100.00</div>
Contributor's Principal Occupation CASA		Contributor's Job Title Anderson County Case Manager
Contributor's employer/law firm CASA of Trinity Valley		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

  

Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broyles, Morgan (Mrs.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75703	Amount of Contribution (\$)  <div style="text-align: right;">\$2,500.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Biggs & Greenslade, 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: 4/29 Rpt: 8/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Harold (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Palestine, TX 75801	<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 N/A		<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#: _____) Cano, Emma (Mrs.) <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78205	Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Jefferson Cano		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#: _____) Cardwell, Ginger (Ms.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75701	Amount of Contribution (\$)  \$250.00
Contributor's Principal Occupation Consultant		Contributor's Job Title Partner
Contributor's employer/law firm CWJ Strategies		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: 5/29 Rpt: 9/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Jason (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Palestine, TX 75803	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Contributor's Principal Occupation Fuel Distribution		<b>9</b> Contributor's Job Title President
<b>10</b> Contributor's employer/law firm Cole Distributing Company, 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 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crump, Carey (Mr.) <hr/> Contributor address; City; State; Zip Code  Henderson, TX 75654	Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Phenix & Crump, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dacus, Shannon (Mrs.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75704	Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Dacus Law Firm		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: 6/29 Rpt: 10/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Christina (Ms.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tyler, TX 75709	<b>7</b> Amount of Contribution (\$)  <div style="text-align: right; font-weight: bold;">\$1,500.00</div>
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Sinclair 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 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickens, Linda (Mrs.) <hr/> Contributor address; City; State; Zip Code  Palestine, TX 75801	Amount of Contribution (\$)  <div style="text-align: right; font-weight: bold;">\$500.00</div>
Contributor's Principal Occupation Jeweler		Contributor's Job Title Owner
Contributor's employer/law firm Dickens Jewelry		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

  

Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dollahite, Keith (Mr.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75703	Amount of Contribution (\$)  <div style="text-align: right; font-weight: bold;">\$2,500.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm M. Keith Dollahite, 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: 7/29 Rpt: 11/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 11/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eltife, Kevin (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tyler, TX 75702	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Contributor's Principal Occupation Real Estate Development		<b>9</b> Contributor's Job Title Owner
<b>10</b> Contributor's employer/law firm Eltife Properties		<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 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannery, Matthew (Mr.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75702	Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Grant & Flannery		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

  

Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, William (Mr.) <hr/> Contributor address; City; State; Zip Code  Palestine, TX 75801	Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Law Enforcement		Contributor's Job Title Sheriff
Contributor's employer/law firm Anderson 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: 8/29 Rpt: 12/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flowers, Celia (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tyler, TX 75701	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Partner
<b>10</b> Contributor's employer/law firm Flowers Davis, 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 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franklin, Tanner (Mr.) <hr/> Contributor address; City; State; Zip Code  Nacogdoches, TX 75965	Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Hightower, Franklin, and James		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gold, Mark (Dr.) <hr/> Contributor address; City; State; Zip Code  Bullard, TX 75757	Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Physician		Contributor's Job Title Physician
Contributor's employer/law firm Gold Eye Clinic		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: 9/29 Rpt: 13/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/22/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goolsby, Traylon (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Burnet, TX 78611	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Contributor's Principal Occupation Real Estate		<b>9</b> Contributor's Job Title Co-owner
<b>10</b> Contributor's employer/law firm Reve Realty Group		<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 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grant, Darren (Mr.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75702	Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Grant & Flannery		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenslade, John (Mr.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75701	Amount of Contribution (\$)  \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Biggs & Greenslade, 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: 10/29 Rpt: 14/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Cody (Rep.)	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>6</b> Contributor address; City; State; Zip Code  Palestine, TX 75801		
<b>8</b> Contributor's Principal Occupation Realtor		<b>9</b> Contributor's Job Title President
<b>10</b> Contributor's employer/law firm Liberty Land & Ranch		<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 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harwell, Judy (Ms.)	Amount of Contribution (\$)  \$2,500.00
Contributor address; City; State; Zip Code  Meadows Place, TX 77477		
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatcher, Raymond (Mr.)	Amount of Contribution (\$)  \$2,500.00
Contributor address; City; State; Zip Code  Longview, TX 75606		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Sloan Firm		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: 11/29 Rpt: 15/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrington, Jay (Dr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Palestine, TX 75801	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Contributor's Principal Occupation Dentist		<b>9</b> Contributor's Job Title Dentist
<b>10</b> Contributor's employer/law firm Dr. Jay Herrington, DDS		<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 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrington , Kurt (Mr.) <hr/> Contributor address; City; State; Zip Code  Palestine, TX 75802	Amount of Contribution (\$)  \$1,250.00
Contributor's Principal Occupation Funeral Services		Contributor's Job Title Funeral Director
Contributor's employer/law firm Herrington Land & Memory		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrington, Rhonda (Ms.) <hr/> Contributor address; City; State; Zip Code  Palestine, TX 75801	Amount of Contribution (\$)  \$2,500.00
Contributor's Principal Occupation Educator		Contributor's Job Title Director of Creative Arts
Contributor's employer/law firm Palestine ISD		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: 12/29 Rpt: 16/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/22/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Iglesias, David (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tyler, TX 75701	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Iglesias, 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 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Cliff (Mr.) <hr/> Contributor address; City; State; Zip Code  Palestine, TX 75803	Amount of Contribution (\$)  \$2,500.00
Contributor's Principal Occupation Government Relations Consultant		Contributor's Job Title Government Relations Consultant
Contributor's employer/law firm Capitol Access Partners		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klemme, Amy (Mrs.) <hr/> Contributor address; City; State; Zip Code  Cookeville, TN 38506	Amount of Contribution (\$)  \$2,500.00
Contributor's Principal Occupation Education		Contributor's Job Title Teacher
Contributor's employer/law firm Baxter Primary School		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: 13/29 Rpt: 17/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klemme, Jeremy (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Cookeville, TN 38506	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Contributor's Principal Occupation Retired		<b>9</b> Contributor's Job Title Retired
<b>10</b> Contributor's employer/law firm N/A		<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 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leggett, Ken (Mr.) <hr/> Contributor address; City; State; Zip Code  Elkhart, TX 75839	Amount of Contribution (\$)  \$125.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leggett, Susan (Mrs.) <hr/> Contributor address; City; State; Zip Code  Elkhart, TX 75839	Amount of Contribution (\$)  \$125.00
Contributor's Principal Occupation Realtor		Contributor's Job Title Realtor
Contributor's employer/law firm Premier Realty Combined Group		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: 14/29 Rpt: 18/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markasky, Steven (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Contributor's Principal Occupation Law Enforcement		<b>9</b> Contributor's Job Title Police Chief
<b>10</b> Contributor's employer/law firm City of Jacksonville		<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#: _____) McGuire, Shane (Mr.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75702	Amount of Contribution (\$)  \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The McGuire Firm, PC		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#: _____) Neill, Erika (Mrs.) <hr/> Contributor address; City; State; Zip Code  Lufkin, TX 75901	Amount of Contribution (\$)  \$250.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Erika L. Neill, 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: 15/29 Rpt: 19/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Donna (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Contributor's Principal Occupation Retired		<b>9</b> Contributor's Job Title Retired
<b>10</b> Contributor's employer/law firm N/A		<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 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Robert (Sen.) <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$)  \$2,500.00
Contributor's Principal Occupation Engineer		Contributor's Job Title President
Contributor's employer/law firm Robert Nichols Enterprises		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Northcutt, Annie (Mrs.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75703	Amount of Contribution (\$)  \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Biggs & Greenslade, 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: 16/29 Rpt: 20/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nowlin, Jerry (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tyler, TX 75703	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Nowlin 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 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Todd <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75703	Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Parker Firm, PC		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#: _____) Parsons, Brick (Mr.) <hr/> Contributor address; City; State; Zip Code  Palestine, TX 75801	Amount of Contribution (\$)  \$350.00
Contributor's Principal Occupation Financial Advisor		Contributor's Job Title Owner
Contributor's employer/law firm Parsons Wealth Management		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: 17/29 Rpt: 21/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Shelly (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Palestine, TX 75801	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Contributor's Principal Occupation Educator		<b>9</b> Contributor's Job Title Campus Director
<b>10</b> Contributor's employer/law firm UT Tyler University Academy--Palestine		<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 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Penn, Jill (Mrs.) <hr/> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	Amount of Contribution (\$)  \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Richards Penn		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phenix, Rusty (Mr.) <hr/> Contributor address; City; State; Zip Code  Henderson, TX 75654	Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Phenix & Crump, 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: 18/29 Rpt: 22/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/04/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Presley, Phillip (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Palestine, TX 75801	<b>7</b> Amount of Contribution (\$)  <div style="text-align: right; font-weight: bold;">\$1,250.00</div>
<b>8</b> Contributor's Principal Occupation Accountant		<b>9</b> Contributor's Job Title Partner
<b>10</b> Contributor's employer/law firm Blackwell & Presley		<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 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Race, Deborah (Ms.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75703	Amount of Contribution (\$)  <div style="text-align: right; font-weight: bold;">\$1,000.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Deborah Race, Attorney at Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raine, Jeff (Mr.) <hr/> Contributor address; City; State; Zip Code  Palestine, TX 75801	Amount of Contribution (\$)  <div style="text-align: right; font-weight: bold;">\$200.00</div>
Contributor's Principal Occupation Physical Therapist		Contributor's Job Title Physical Therapist
Contributor's employer/law firm Christus Health		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: 19/29 Rpt: 23/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richards, Rickey (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Jacksonville, TX 75766	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Partner
<b>10</b> Contributor's employer/law firm Richards Penn		<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 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richey, Jonathan (Mr.) <hr/> Contributor address; City; State; Zip Code  Rusk, TX 75785	Amount of Contribution (\$)  \$25.00
Contributor's Principal Occupation Attorney		Contributor's Job Title District Attorney
Contributor's employer/law firm Cherokee County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Bruce (Mr.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75701	Amount of Contribution (\$)  \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Roberts & Roberts		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: 20/29 Rpt: 24/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Justin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tyler, TX 75701	<b>7</b> Amount of Contribution (\$)  <div style="text-align: right;">\$2,500.00</div>
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Roberts & Roberts		<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 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Kristi (Mrs.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75701	Amount of Contribution (\$)  <div style="text-align: right;">\$2,500.00</div>
Contributor's Principal Occupation Community Volunteer		Contributor's Job Title Community Volunteer
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any) Roberts & Roberts
If contributor is a child, law firm of parent(s) (if any)		
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Neysa (Mrs.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75701	Amount of Contribution (\$)  <div style="text-align: right;">\$2,500.00</div>
Contributor's Principal Occupation Community Volunteer		Contributor's Job Title Community Volunteer
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any) Roberts & Roberts
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: 21/29 Rpt: 25/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Paige (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tyler, TX 75701	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Contributor's Principal Occupation Community Volunteer		<b>9</b> Contributor's Job Title Community Volunteer
<b>10</b> Contributor's employer/law firm Roberts & Roberts		<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 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Randell (Mr.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75701	Amount of Contribution (\$)  \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Roberts & Roberts		Law firm of contributor's spouse (if any)
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#: _____) Russell, Keith (Mr.) <hr/> Contributor address; City; State; Zip Code  Palestine, TX 75803	Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Oil & Gas		Contributor's Job Title Owner
Contributor's employer/law firm Oil Country Pipe & Valve		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: 22/29 Rpt: 26/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/04/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwab, Jeffrey (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Palestine, TX 75803	<b>7</b> Amount of Contribution (\$)  \$300.00
<b>8</b> Contributor's Principal Occupation Banking		<b>9</b> Contributor's Job Title Branch Manager
<b>10</b> Contributor's employer/law firm Vera Bank		<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 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Senkyr, Kristen (Mrs.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75709	Amount of Contribution (\$)  \$1,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Sinclair Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sinclair, Beau (Mr.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75709	Amount of Contribution (\$)  \$2,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Sinclair Law Firm		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: 23/29 Rpt: 27/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 11/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloan, John (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Longview, TX 75606	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Sloan 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#: _____) Smith, Greg (Mr.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75707	Amount of Contribution (\$)  \$750.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Smith Legal, PLLC		Law firm of contributor's spouse (if any)
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#: _____) Smith, Nolan (Mr.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75703	Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Smith Legal, 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: 24/29 Rpt: 28/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soules, John (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tyler, TX 75703	<b>7</b> Amount of Contribution (\$)  <div style="text-align: right;">\$500.00</div>
<b>8</b> Contributor's Principal Occupation Food and Beverage Manufacturing		<b>9</b> Contributor's Job Title Chairman
<b>10</b> Contributor's employer/law firm John Soules Foods		<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 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spitzer, Steve (Mr.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75702	Amount of Contribution (\$)  <div style="text-align: right;">\$250.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Ramey & Flock		Law firm of contributor's spouse (if any)
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#: _____) Staples, Janet (Mrs.) <hr/> Contributor address; City; State; Zip Code  Palestine, TX 75801	Amount of Contribution (\$)  <div style="text-align: right;">\$1,000.00</div>
Contributor's Principal Occupation Educator		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: 25/29 Rpt: 29/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stinson, Andy (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tyler, TX 75702	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Ramey & Flock		<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#: _____) Sumrall, Harold (Mr.) <hr/> Contributor address; City; State; Zip Code  Buffalo, TX 75831	Amount of Contribution (\$)  \$300.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomason, Michael (Mr.) <hr/> Contributor address; City; State; Zip Code  Palestine, TX 75802	Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation HVAC		Contributor's Job Title Owner
Contributor's employer/law firm Ranger Air & Heat		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: 26/29 Rpt: 30/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tindel, Andy (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tyler, TX 75701	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Partner
<b>10</b> Contributor's employer/law firm Mann, Tindel & Thompson		<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 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tosh, Bridgett (Mrs.) <hr/> Contributor address; City; State; Zip Code  Rusk, TX 75785	Amount of Contribution (\$)  \$2,500.00
Contributor's Principal Occupation Dental Hygienist		Contributor's Job Title Adjunct Clinical Professor
Contributor's employer/law firm Tyler Junior College		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

  

Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tosh, Robby (Mr.) <hr/> Contributor address; City; State; Zip Code  Rusk, TX 75785	Amount of Contribution (\$)  \$2,500.00
Contributor's Principal Occupation Hardware Business		Contributor's Job Title President
Contributor's employer/law firm Harry's Building Materials, 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: 27/29 Rpt: 31/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/04/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varela, Fernando (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Palestine, TX 75802	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Contributor's Principal Occupation Car Dealer		<b>9</b> Contributor's Job Title President
<b>10</b> Contributor's employer/law firm Varela Auto Group		<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 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varela, Nicholas (Mr.) <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75703	Amount of Contribution (\$)  \$2,500.00
Contributor's Principal Occupation Car Dealer		Contributor's Job Title Vice-President
Contributor's employer/law firm Varela Auto Group		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Brenda (Mrs.) <hr/> Contributor address; City; State; Zip Code  Palestine, TX 75801	Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm N/A		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: 28/29 Rpt: 32/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiner, Justin (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Athens, TX 75751	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Law Office of Mike Head & Justin Weiner		<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 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Don (Mr.) <hr/> Contributor address; City; State; Zip Code  Center, TX 75935	Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Wheeler & Hughes		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willhite, Leon (Mr.) <hr/> Contributor address; City; State; Zip Code  Palestine, TX 75801	Amount of Contribution (\$)  \$350.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm N/A		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: 29/29 Rpt: 33/45
<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Ernie (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Palestine, TX 75801	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Contributor's Principal Occupation Insurance		<b>9</b> Contributor's Job Title Owner
<b>10</b> Contributor's employer/law firm Ernie Williams Insurance Agency		<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 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodard, Paul (Mr.) <hr/> Contributor address; City; State; Zip Code  Palestine, TX 75803	Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Oil & Gas Equipment Transportation		Contributor's Job Title Owner
Contributor's employer/law firm J&M Premier Services, Inc.		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  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/5 Rpt: 34/45	<b>2</b> FILER NAME Davis, Charles M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 11/24/2025	<b>5</b> Payee name Anedot, Inc.	
<b>6</b> Amount (\$) \$40.30	<b>7</b> Payee address; City; State; Zip Code 3723 Greenville Avenue Ste 41002 Dallas, TX 75206-5311	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</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 donation transaction fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2025	Payee name Anedot, Inc.	
Amount (\$) \$8.30	Payee address; City; State; Zip Code 3723 Greenville Avenue Ste 41002 Dallas, TX 75206-5311	
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 Campaign donation transaction fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/02/2025	Payee name Anedot, Inc.	
Amount (\$) \$40.30	Payee address; City; State; Zip Code 3723 Greenville Avenue Ste 41002 Dallas, TX 75206-5311	
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 Campaign donation transaction fee
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  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/5 Rpt: 35/45	<b>2</b> FILER NAME Davis, Charles M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/09/2025	<b>5</b> Payee name Anedot, Inc.	
<b>6</b> Amount (\$) \$20.30	<b>7</b> Payee address; City; State; Zip Code 3723 Greenville Avenue Ste 41002 Dallas, TX 75206-5311	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</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 donation transaction fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/11/2025	Candidate/Officeholder name Office sought Office held	
Payee name Anedot, Inc.		
Amount (\$) \$40.30	Payee address; City; State; Zip Code 3723 Greenville Avenue Ste 41002 Dallas, TX 75206-5311	
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 Campaign donation transaction fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/15/2025	Candidate/Officeholder name Office sought Office held	
Payee name Anedot, Inc.		
Amount (\$) \$20.30	Payee address; City; State; Zip Code 3723 Greenville Avenue Ste 41002 Dallas, TX 75206-5311	
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 Campaign donation transaction fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# 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.

<b>1</b> Total pages Schedule F1: Sch: 3/5 Rpt: 36/45	<b>2</b> FILER NAME Davis, Charles M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/29/2025	<b>5</b> Payee name Anedot, Inc.	
<b>6</b> Amount (\$) \$100.30	<b>7</b> Payee address; City; State; Zip Code 3723 Greenville Avenue Ste 41002 Dallas, TX 75206-5311	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</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 donation transaction fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/30/2025	Payee name Anedot, Inc.	
Amount (\$) \$14.30	Payee address; City; State; Zip Code 3723 Greenville Avenue Ste 41002 Dallas, TX 75206-5311	
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 Campaign donation transaction fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2025	Payee name Catalyst Advisors Group	
Amount (\$) \$3,500.00	Payee address; City; State; Zip Code 1108 Lavaca St 110-506  Austin, TX 78701	
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 Campaign services
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  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/5 Rpt: 37/45	<b>2</b> FILER NAME Davis, Charles M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 11/18/2025	<b>5</b> Payee name Catalyst Advisors Group	
<b>6</b> Amount (\$) \$2,000.00	<b>7</b> Payee address; City; State; Zip Code 1108 Lavaca St 110-506  Austin, TX 78701	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</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 services
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/26/2025	Payee name Catalyst Advisors Group	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1108 Lavaca St 110-506  Austin, TX 78701	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</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 services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2025	Payee name Jeffrey Todd Photography	
Amount (\$) \$324.75	Payee address; City; State; Zip Code P.O. Box 649  Palestine, TX 75802	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Campaign Photographer	<b>(b)</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 pictures
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  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/5 Rpt: 38/45	<b>2</b> FILER NAME Davis, Charles M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/22/2025	<b>5</b> Payee name Signature Consulting	
<b>6</b> Amount (\$) \$6,400.00	<b>7</b> Payee address; City; State; Zip Code P.O. Box 7575  Tyler, TX 75711	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</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 services
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/22/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$813.40	Payee name Signature Consulting  Payee address; City; State; Zip Code P.O. Box 7575  Tyler, TX 75711	
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 Campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/18/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$325.00	Payee name Smith County Republican Women  Payee address; City; State; Zip Code 3923 S. Broadway Avenue  Tyler, TX 75701	
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's fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

## EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 1/3 Rpt: 39/45	<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> CREDIT CARD ISSUER	Name of financial institution Chase Bank		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b> PAYMENT	(a) Amount Charged \$76.56	(b) Date of Charge 11/02/2025	(c) Date(s) Credit Card Issuer Paid 12/14/2025
<b>7</b> PAYEE	(a) Payee name CVS		(b) Payee address; City, State, Zip Code 1919 S. Loop 256 Palestine, TX 75801
<b>8</b> PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Campaign phone		(b) Description Purchase of campaign phone
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
<b>PAYMENT</b>	(a) Amount Charged \$85.00	(b) Date of Charge 11/09/2025	(c) Date(s) Credit Card Issuer Paid 12/14/2025
<b>PAYEE</b>	(a) Payee name Smith County Bar Association		(b) Payee address; City, State, Zip Code 100 N. Broadway Avenue, Ste 21B Tyler, TX 75702
<b>PURPOSE OF EXPENDITURE</b> <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Bar Association		(b) Description Membership dues
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
<b>PAYMENT</b>	(a) Amount Charged \$21.00	(b) Date of Charge 11/12/2025	(c) Date(s) Credit Card Issuer Paid 12/14/2025
<b>PAYEE</b>	(a) Payee name Tyler Trophy		(b) Payee address; City, State, Zip Code 109 S. Glenwood Tyler, TX 75702
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description Campaign materials
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

## EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 2/3 Rpt: 40/45	<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b> PAYMENT	(a) Amount Charged \$15.60	(b) Date of Charge 12/14/2025	(c) Date(s) Credit Card Issuer Paid 12/14/2025
<b>7</b> PAYEE	(a) Payee name USPS		(b) Payee address; City, State, Zip Code 1213 N. Link Street Palestine, TX 75801
<b>8</b> PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description Postage
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
<b>PAYMENT</b>	(a) Amount Charged \$54.13	(b) Date of Charge 11/19/2025	(c) Date(s) Credit Card Issuer Paid 12/14/2025
<b>PAYEE</b>	(a) Payee name Tyler Trophy		(b) Payee address; City, State, Zip Code 109 S. Glenwood Tyler, TX 75702
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description Campaign materials
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
<b>PAYMENT</b>	(a) Amount Charged \$15.60	(b) Date of Charge 12/02/2025	(c) Date(s) Credit Card Issuer Paid 12/14/2025
<b>PAYEE</b>	(a) Payee name USPS		(b) Payee address; City, State, Zip Code 1213 N. Link Street Palestine, TX 75801
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description Campaign postage
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		



## EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 3/3 Rpt: 41/45		<b>2</b> FILER NAME Davis, Charles M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082114	
<b>4</b> CREDIT CARD ISSUER		Name of financial institution American Express		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
<b>6</b> PAYMENT		(a) Amount Charged \$250.00	(b) Date of Charge 11/10/2025	(c) Date(s) Credit Card Issuer Paid 12/03/2025	
<b>7</b> PAYEE		(a) Payee name Tyler Area Chamber of		(b) Payee address; City, State, Zip Code 315 N. Broadway Avenue, Suite 100 Tyler, TX 75702	
<b>8</b> PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Membership dues		(b) Description Membership dues	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
<b>PAYMENT</b>		(a) Amount Charged \$50.00	(b) Date of Charge 11/10/2025	(c) Date(s) Credit Card Issuer Paid 12/03/2025	
<b>PAYEE</b>		(a) Payee name Tyler Area Chamber of		(b) Payee address; City, State, Zip Code 315 N. Broadway Avenue, Suite 100 Tyler, TX 75702	
<b>PURPOSE OF EXPENDITURE</b> <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Luncheon ticket	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
<b>PAYMENT</b>		(a) Amount Charged \$363.67	(b) Date of Charge 12/18/2025	(c) Date(s) Credit Card Issuer Paid	
<b>PAYEE</b>		(a) Payee name Westmoreland Custom Designs		(b) Payee address; City, State, Zip Code 205 N. Church Street Palestine, TX 75801	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Campaign materials	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 1/4 Rpt: 42/45	<b>2</b> FILER NAME Davis, Charles M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/03/2025	<b>5</b> Payee name American Express	
<b>6</b> Amount (\$) \$250.00  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code P.O. Box 6031  Carol Stream, IL 60197-6031	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment of credit card bill for Tyler Area Chamber of Commerce membership dues
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name <span style="margin-left: 100px;">Office sought</span> <span style="margin-left: 100px;">Office held</span>		
Date 12/03/2025	Payee name American Express	
Amount (\$) \$50.00  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 6031  Carol Stream, IL 60197-6031	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment of credit card bill for Tyler Area Chamber luncheon ticket
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name <span style="margin-left: 100px;">Office sought</span> <span style="margin-left: 100px;">Office held</span>		
Date 12/14/2025	Payee name Chase Bank	
Amount (\$) \$76.56  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 1423  Charlotte, NC 28201-1423	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment of credit card bill for campaign phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name <span style="margin-left: 100px;">Office sought</span> <span style="margin-left: 100px;">Office held</span>		

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 2/4 Rpt: 43/45	<b>2</b> FILER NAME Davis, Charles M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 12/14/2025	<b>5</b> Payee name Chase Bank	
<b>6</b> Amount (\$) \$85.00  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code P.O. Box 1423  Charlotte, NC 28201-1423	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment of credit card bill for Smith County Bar Association dues
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2025	Payee name Cherokee County Republican Women	
Amount (\$) \$70.00  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 807  Jacksonville, TX 75766	
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 Fundraiser/Christmas party tickets (plus spouse)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/12/2025	Payee name Republican Party of Texas	
Amount (\$) \$1,875.00  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1108 Lavaca Street, Suite 500  Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Candidate filing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 3/4 Rpt: 44/45	<b>2</b> FILER NAME Davis, Charles M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00082114			
<b>4</b> Date 12/18/2025	<b>5</b> Payee name Smith County Republican Women				
<b>6</b> Amount (\$)  \$15.00  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 3923 S. Broadway Avenue  Tyler, TX 75701				
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</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 ticket			
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;">Candidate/Officeholder name</td> <td style="width: 33%; border: none;">Office sought</td> <td style="width: 33%; border: none;">Office held</td> </tr> </table>			Candidate/Officeholder name	Office sought	Office held
Candidate/Officeholder name	Office sought	Office held			
Date 12/14/2025	Payee name Tyler Trophy				
Amount (\$)  \$21.00  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 109 S. Glenwood  Tyler, TX 75702				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Paid credit card bill for campaign materials			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;">Candidate/Officeholder name</td> <td style="width: 33%; border: none;">Office sought</td> <td style="width: 33%; border: none;">Office held</td> </tr> </table>			Candidate/Officeholder name	Office sought	Office held
Candidate/Officeholder name	Office sought	Office held			
Date 11/19/2025	Payee name Tyler Trophy				
Amount (\$)  \$54.13  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 109 S. Glenwood  Tyler, TX 75702				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Paid credit card bill for campaign materials			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;">Candidate/Officeholder name</td> <td style="width: 33%; border: none;">Office sought</td> <td style="width: 33%; border: none;">Office held</td> </tr> </table>			Candidate/Officeholder name	Office sought	Office held
Candidate/Officeholder name	Office sought	Office held			

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

**SCHEDULE G**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 4/4 Rpt: 45/45	<b>2</b> FILER NAME Davis, Charles M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00082114
<b>4</b> Date 11/12/2025	<b>5</b> Payee name USPS	
<b>6</b> Amount (\$) \$15.60  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 1213 N. Link Street  Palestine, TX 75801	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Paid credit card bill for postage
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/14/2025	Payee name USPS	
Amount (\$) \$15.60  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1213 N. Link Street  Palestine, TX 75801	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Paid credit card bill for campaign postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/18/2025	Payee name Westmoreland Custom Designs	
Amount (\$) \$363.67  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 205 N. Church Street  Palestine, TX 75801	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Materials
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held