

**SPECIFIC-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT**

**FORM SPAC
COVER SHEET PG 1**

The SPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00089953	2 Total pages filed: 98		
3 COMMITTEE NAME Texans for Chip Roy		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 02/02/2026 Date Hand-delivered or Date Postmarked Receipt # <input type="text"/> Amount <input type="text"/> Date Processed Date Imaged			
4 COMMITTEE ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 6705 W Highway 290, Ste. 50295 Austin, TX 78735					
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Cabell			MI	
	NICKNAME LAST Hobbs	SUFFIX			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 7415 Southwest Pkwy, Bldg 6, Ste. 500 #134 Austin, TX 78735	APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET OR PO BOX; 7415 Southwest Pkwy, Bldg 6, Ste. 500 #134 Austin, TX 78735	APT / SUITE #;	CITY;	STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE (512) 277-6095	PHONE NUMBER	EXTENSION		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> July 15	<input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff	<input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year 01/01/2026	THROUGH	Month Day Year 01/22/2026		
11 ELECTION	ELECTION DATE Month Day Year 03/03/2026	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	ELECTION TYPE <input type="checkbox"/> Runoff <input type="checkbox"/> Special	<input type="checkbox"/> Other	

GO TO PAGE 2

**SPECIFIC-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM SPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Texans for Chip Roy		13 FILER ID (Ethics Commission Filers) 00089953	
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.)	<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Officeholder	CANDIDATE / OFFICEHOLDER NAME CHIP ROY	
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Attorney General	
	<input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	BALLOT IDENTIFICATION / #	ELECTION DATE Month Day Year
		<input type="checkbox"/> Measure	DESCRIPTION
15 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED	\$ \$0.00	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ \$250,506.60	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ \$2,111.13	
	4. TOTAL POLITICAL EXPENDITURES	\$ \$1,361,325.16	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ \$3,170,992.22	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ \$1,000,000.00	

16 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.

Cabell Hobbs

Signature of Campaign Treasurer

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 - SPAC**FORM SPAC**
COVER SHEET PG 3
3 of 98

17 COMMITTEE NAME Texans for Chip Roy	18 Filer ID (Ethics Commission Filers) 00089953
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 250,506.60	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS \$	
4. <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
6. <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
7. <input type="checkbox"/> SCHEDULE E: LOANS \$	
8. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 1,360,274.18	
9. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$	
10. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$	
11. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ 1,050.98	
12. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$	
13. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	
14. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$ 983.00	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/74 Rpt: 4/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACKERMAN, FREDERICK	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code SILVER SPRING, MD 20906-4851	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, AMOS	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code CARY, NC 27519-8868	
Principal occupation / Job title (See Instructions) CONSTRUCTION		Employer (See Instructions) SELF EMPLOYED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, SHIRLENE	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code KINGSPORT, TN 37665-1440	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREWS, BARBARA A.	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code AUGUSTA, GA 30906-3303	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREWS, NORMAN	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code BUCKEYE, AZ 85396-1671	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/74 Rpt: 5/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/04/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APPLEWHITE,MD, MONICA	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code EAST AMHERST, NY 14051-1856	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMENT, GWEN	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code BROOKFIELD, CT 06804-1039	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BABBS, WILLIAM	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code LAS VEGAS, NV 89149-5127	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALDRIDGE, PATRICIA	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code BEAVER, OK 73932-1183	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALLING, RICHARD	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code FRISCO, TX 75035-5076	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/74 Rpt: 6/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANKHEAD, DENNIS	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code DONNA, TX 78537-9739	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARBOUR, VERNON	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code CLAYTON, NC 27520-6882	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNES, CYNTHIA C	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code BEAUMONT, TX 77705	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNES, CYNTHIA C	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code BEAUMONT, TX 77705	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRETT, BRET ALLEN (Mr.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code LEVELLAND, TX 79336-6818	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/74 Rpt: 7/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEARD, LISA	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code SPRING, TX 77382-6201	
8 Principal occupation / Job title (See Instructions) COMMERCIAL REAL ESTATE		9 Employer (See Instructions) SELF
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECKERMAN, MATHEW L.	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code CONROE, TX 77384-2211	
Principal occupation / Job title (See Instructions) FOUNDER/CEO		Employer (See Instructions) IRCODE
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, MARILYN	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code MCKINNEY, TX 75071-7246	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, GARY	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code AMARILLO, TX 79106-3421	
Principal occupation / Job title (See Instructions) ELECTRICIAN		Employer (See Instructions) AMARILLO ISD
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BJORNHOLM, BRIAN	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code STERLING HEIGHTS, MI 48314-3506	
Principal occupation / Job title (See Instructions) TRANSPORTATION		Employer (See Instructions) BRIAN BJORNHOLM AND LORETTA BJORNHOLM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/74 Rpt: 8/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKWELL, JIM	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code HOUSTON, TX 77077	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOESE, WAYNE	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code MIDLOTHIAN, VA 23113-6493	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOESE, WAYNE	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code MIDLOTHIAN, VA 23113-6493	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONG, ILLA	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code FORT PAYNE, AL 35968-3065	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWLIN, BILL	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code SUGAR LAND, TX 77479-6499	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/74 Rpt: 9/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYD, BARBARA	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code CLACKAMAS, OR 97015-8629	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADLEY, STEPHEN	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code BELMONT, NC 28012-6761	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRANTLEY, BESSIE	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code ZEBULON, NC 27597-8690	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRATCHER, PAM	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code DEER PARK, TX 77536-4315	
Principal occupation / Job title (See Instructions) HOMEMAKER		Employer (See Instructions) HOMEMAKER
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREZOVSKI, WILLIAM	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code LAS VEGAS, NV 89122-6000	
Principal occupation / Job title (See Instructions) SEMI-RETIRED		Employer (See Instructions) SELF-EMLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/74 Rpt: 10/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/05/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRICKMAN, CLAIRE	7 Amount of Contribution (\$) \$2,500.00
	6 Contributor address; City; State; Zip Code AUSTIN, TX 78731-2860	
8 Principal occupation / Job title (See Instructions) HOMEMAKER		9 Employer (See Instructions) HOMEMAKER
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROCKWELL, CINDY	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code BOERNE, TX 78006-1719	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUMBAUGH, PHILIP	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code WEST MILTON, OH 45383-1330	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUMBAUGH, PHILIP	Amount of Contribution (\$) \$6.00
	Contributor address; City; State; Zip Code WEST MILTON, OH 45383-1330	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHER, MARY	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code SOUTH BEND, IN 46619-9783	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/74 Rpt: 11/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/02/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSHEY, ALBERT 6 Contributor address; City; State; Zip Code MANSFIELD, MA 02048-4511	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BZDEL, ANNA Contributor address; City; State; Zip Code GARFIELD, NJ 07026-1222	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALLANDER, HUGH Contributor address; City; State; Zip Code MONTGOMERY, TX 77316-6501	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) BROKER		Employer (See Instructions) SELF
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, CODY Contributor address; City; State; Zip Code FORT WORTH, TX 76109-2744	Amount of Contribution (\$) \$50,000.00
Principal occupation / Job title (See Instructions) CO-CEO		Employer (See Instructions) DOUBLE EAGLE
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAREY, JOHN Contributor address; City; State; Zip Code WATERFORD, CT 06385-1419	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/74 Rpt: 12/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/22/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARNEY, CAROL	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code ARKANSAS CITY, KS 67005-1625	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLL, MARY ANN	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77027-4921	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLL, RONALD H.	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code KERRVILLE, TX 78028-8230	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARUSO, PAT	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NORTH ARLINGTON, NJ 07031-5719	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASE, DAVID	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code CEDAR CITY, UT 84720-1346	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/74 Rpt: 13/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/01/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASEY, LAWRENCE	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code FONTANA, CA 92336-0183	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASEY, LAWRENCE	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code FONTANA, CA 92336-0183	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASEY, MIKE	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code SAN JOSE, CA 95124-1440	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAUGHLIN, JUDY	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code ARLINGTON, TX 76006-2739	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAUGHLIN, JUDY	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code ARLINGTON, TX 76006-2739	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/74 Rpt: 14/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHARLAND, DAVID 6 Contributor address; City; State; Zip Code FORT LAUDERDALE, FL 33322-4724	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, ROBERT Contributor address; City; State; Zip Code BEAVERTON, OR 97006	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAVEZ, LUELLA Contributor address; City; State; Zip Code NAMPA, ID 83686-6215	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHN, JOHN Contributor address; City; State; Zip Code TAVARES, FL 32778-5647	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLICHO, DUKE Contributor address; City; State; Zip Code BELLPORT, NY 11713-2911	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/74 Rpt: 15/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/12/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLICHIO, DUKE	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code BELLPORT, NY 11713-2911	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLIE, PATRICIA	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code AMARILLO, TX 79109-3843	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLINS, CATHY S. (Ms.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78735-1480	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMEAUX, FRANCIS	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code CANYON LAKE, TX 78132-2739	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONLEY, WILLIAM	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code WIMBERLEY, TX 78676-6269	
Principal occupation / Job title (See Instructions) AUTO SERVICES		Employer (See Instructions) CONLEY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/74 Rpt: 16/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/18/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRANE, JAMES	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code BOLIVIA, NC 28422-8195	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRIMMINS, DEBRA	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77077-5530	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROOKS, BETTY	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code KERRVILLE, TX 78028-9521	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURTIS, RANKIN	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NACOGDOCHES, TX 75965-6841	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, CHARLOTTE J. (Dr.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code ABILENE, TX 79601-2065	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/74 Rpt: 17/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/05/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, ROBERT	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code ATLANTA, GA 30340-3216	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELTION, JIM	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code TEMPE, AZ 85284-2569	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENCKER, JUDY	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84103-3230	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENCKER, JUDY	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84103-3230	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DESLIVA, ROHINI	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code HERNANDO, FL 34442-6526	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/74 Rpt: 18/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/22/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEVORE, CHARLES 6 Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620-2720	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) VP		9 Employer (See Instructions) TEXAS PUBLIC POLICY FOUNDATION
Date 01/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEXHEIMER, BRADLEY Contributor address; City; State; Zip Code LITTLE FALLS, MN 56345-6622	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DICKENS, MONA Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217-1188	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIETHRICH, JOANN Contributor address; City; State; Zip Code GRIDLEY, CA 95948-1200	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) FARMER
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIETZ, DEBORAH Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340-1038	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/74 Rpt: 19/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DINSE, JOAN B. (Mrs.)	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code PARRISH, FL 34219-7516	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOLL, RANDY	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code NOLANVILLE, TX 76559-9748	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOMINEY, CLIFFORD	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code ALVIN, TX 77511-8434	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUGHERTY, MIKE	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code WHITESBORO, NY 13492-1117	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRAKE, RHONDA	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code FAIR OAKS RANCH, TX 78015-4403	
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) TEXAS MED CLINIC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/74 Rpt: 20/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRIESSNER, RONALD D. (Mr.)	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code ARLINGTON, TX 76016-1129	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUFFY, JUNE	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code PLYMOUTH MEETING, PA 19462-1940	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNCAN, CHARLES	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code SAMMAMISH, WA 98075-6039	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUPUY, TREVOR	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code HORSESHOE BAY, TX 78657-6151	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUTCHER, MICHAEL A	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code SAN DIEGO, CA 92111-4146	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/74 Rpt: 21/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUTTLINGER, GLORIA	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code WILMINGTON, NC 28412-8228	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ECKHARDT, GORDON	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code FLORENCE, OR 97439-9786	
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) BAE SYSTEMS
Date 01/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENOS, KEN	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code LEWISVILLE, TX 75067-3330	
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FACCIANI, PATRICIA A	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code SANTA MARIA, CA 93455-1912	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FACCIANI, PATRICIA A	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code SANTA MARIA, CA 93455-1912	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/74 Rpt: 22/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FALCONE, JULIA 6 Contributor address; City; State; Zip Code FAYETTEVILLE, AR 72701-4643	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERGUSON, EDGAR R Contributor address; City; State; Zip Code EL PASO, TX 79934-3775	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED U.S. ARMY
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRAZZARA, JOHN Contributor address; City; State; Zip Code CLERMONT, FL 34711-7313	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIELDS, PATRICIA A. (Ms.) Contributor address; City; State; Zip Code CARLSBAD, CA 92009-8668	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIELDS, PATRICIA A. (Ms.) Contributor address; City; State; Zip Code CARLSBAD, CA 92009-8668	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/74 Rpt: 23/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIELDS, PATRICIA A. (Ms.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code CARLSBAD, CA 92009-8668	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISH, BRUCE	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code OAKLYN, NJ 08107-1250	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, BRENDA	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code ROCKWALL, TX 75087-2934	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITCH, LARRY	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code FORT WORTH, TX 76137-5912	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLETCHER, DAVID	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code CANYON LAKE, TX 78133-5992	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/74 Rpt: 24/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/18/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLETCHER, DAVID 6 Contributor address; City; State; Zip Code CANYON LAKE, TX 78133-5992	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLIS, WILLIAM T Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070-5048	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ENTREPRENUER		Employer (See Instructions) HEARTLAND CONSULTING
Date 01/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOLK, JAMES Contributor address; City; State; Zip Code YORK, PA 17406-1518	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PORTFOLIO MANAGER		Employer (See Instructions) EXPORT-IMPORT BANK OF THE UNITED STATE
Date 01/01/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOOTE, DURWOOD Contributor address; City; State; Zip Code HURST, TX 76053-4100	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORBECK, DEBORAH Contributor address; City; State; Zip Code STAR, ID 83669-6306	Amount of Contribution (\$) \$110.00
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/74 Rpt: 25/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORBES, BYRON 6 Contributor address; City; State; Zip Code SPRING, TX 77380-2640	7 Amount of Contribution (\$) \$2,000.00
	8 Principal occupation / Job title (See Instructions) RETIRED	9 Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORBES, JOAN Contributor address; City; State; Zip Code BUTLER, NJ 07405-3102	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) RETIRED	Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORET, DR. RANDY Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) NATIONAL DIRECTOR	Employer (See Instructions) FRC
Date 01/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSS, DAVID Contributor address; City; State; Zip Code BRISTOL, VT 05443-9214	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) HEATING	Employer (See Instructions) SELF
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, BUZZ Contributor address; City; State; Zip Code SAN MARCOS, TX 78666-3873	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) RETIRED	Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/74 Rpt: 26/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/01/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOWLER, JERRY P 6 Contributor address; City; State; Zip Code GRAND SALINE, TX 75140-1000	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUCHS, KIMBERLY Contributor address; City; State; Zip Code COLORADO SPRINGS, CO 80906-8267	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUHR, MARILYN Contributor address; City; State; Zip Code HUTCHINSON, MN 55350-5015	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARWOOD, PRISCILLA Contributor address; City; State; Zip Code CINCINNATI, OH 45240-3925	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, JUDY Contributor address; City; State; Zip Code VICTORIA, TX 77904-3333	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/74 Rpt: 27/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/11/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GASTON, ELLEN	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code ABILENE, TX 79606-7039	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEARY, PATRICIA	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code MISSOURI CITY, TX 77489-1417	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEDNEY, DAVID	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code GREER, SC 29650-4426	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERHAB, BRYAN	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code BETHLEHEM, PA 18017-4837	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIAMMARRUSCO, DONNA	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code ALGONQUIN, IL 60102-6727	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/74 Rpt: 28/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIBSON, TERRY 6 Contributor address; City; State; Zip Code HENDERSONVILLE, NC 28791-9770	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TILE MASON		9 Employer (See Instructions) SELF
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GODDARD, PAMELA Contributor address; City; State; Zip Code NICHOLS HILLS, OK 73116-5624	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODOF, DAVID Contributor address; City; State; Zip Code PEABODY, MA 01960-8827	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORDON, CHRISTY Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132-4109	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORDON, CHRISTY Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132-4109	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/74 Rpt: 29/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORE, TRINA 6 Contributor address; City; State; Zip Code DAVIE, FL 33325-5426	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORMAN, PETER Contributor address; City; State; Zip Code CHANDLER, AZ 85248-9262	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAFING, LYNDA Contributor address; City; State; Zip Code ROCK RAPIDS, IA 51246-1622	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAHAM, BETTY Contributor address; City; State; Zip Code SAN MARCOS, TX 78666-2898	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAJALES, RENELLE Contributor address; City; State; Zip Code CHERRY VALLEY, MA 01611-3120	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) R.N.		Employer (See Instructions) WRCH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/74 Rpt: 30/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRASSO, DIANE (Mrs.)	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code HUNTINGTN STA, NY 11746-2823	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, BARBARA	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code SHREWSBURY, MA 01545-5441	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, DELORES	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code CHARLOTTE, NC 28269-4703	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFITH, ROBERT	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code HAMMOND, IN 46324-1544	
Principal occupation / Job title (See Instructions) SALES AGENT		Employer (See Instructions) SELF-EMPLOYED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROSS, BRENT	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code BOISE, ID 83714-2096	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/74 Rpt: 31/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/03/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUYNN, NITA	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633-5148	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HABEMATOLEL POMO OF UPPER LAKE	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code UPPER LAKE, CA 95485-0516	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAGOOD, MARK R. (Mr.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code FORT WORTH, TX 76135-9283	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMPTONMEINZER, MARILYNN	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code PALATINE, IL 60067-7721	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANN, JULIA	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code CINCINNATI, OH 45243-2048	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/74 Rpt: 32/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/21/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSEN, LARRY 6 Contributor address; City; State; Zip Code HAYTI, SD 57241-0156	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, CAROL Contributor address; City; State; Zip Code DEER PARK, TX 77536-4777	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEIMBUCH, TERESITA Contributor address; City; State; Zip Code PORTLAND, OR 97230-5191	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PRODUCTION		Employer (See Instructions) AVALIGN
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELDENFELS, ELIZABETH Contributor address; City; State; Zip Code AUSTIN, TX 78746-6858	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) HOMEMAKER		Employer (See Instructions) HOMEMAKER
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HESS, JAY Contributor address; City; State; Zip Code FARMINGTON, UT 84025-3702	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/74 Rpt: 33/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/05/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLIDAY, KATHLEEN	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code ARBOLES, CO 81121-1942	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLMES, DONNA	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code CANYON LAKE, TX 78133-5291	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOMEYER, JONATHAN	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381-4157	
Principal occupation / Job title (See Instructions) BANKER		Employer (See Instructions) GULF CAPITAL BANK
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOYT, HARRY H	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code PARIS, TX 75460-5265	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HSIEH, HENRY	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code MENIFEE, CA 92584-8090	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/74 Rpt: 34/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/21/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HSIEH, HENRY 6 Contributor address; City; State; Zip Code MENIFEE, CA 92584-8090	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, GERALD Contributor address; City; State; Zip Code MANHATTAN, KS 66503-8762	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUM PHRIES, ART Contributor address; City; State; Zip Code BOERNE, TX 78006-5744	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUMPHREYS, BRIAN Contributor address; City; State; Zip Code LUFKIN, TX 75901-7407	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MEDICAL		Employer (See Instructions) SELF
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNT, JOHN Contributor address; City; State; Zip Code SIMI VALLEY, CA 93063-1206	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/74 Rpt: 35/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNT, SANDRA 6 Contributor address; City; State; Zip Code GLENDORA, CA 91741-1836	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) BROKER		9 Employer (See Instructions) ARC
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNTER III, JAMES Contributor address; City; State; Zip Code MILWAUKEE, WI 53226-3849	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUSSEY, KATHY Contributor address; City; State; Zip Code LLANO, TX 78643-0716	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAIN, UMESH Contributor address; City; State; Zip Code SUGAR LAND, TX 77479-2525	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) MIKE JAIN CPA
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JANES III, RALPH Contributor address; City; State; Zip Code LAGO, TX 78645-0029	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/74 Rpt: 36/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAYARATHNA, LALEENDRA 6 Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022-1041	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ANALYST		9 Employer (See Instructions) SELF EMPLOYED
Date 01/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENNEY, RUSSELL Contributor address; City; State; Zip Code MAGNOLIA, TX 77355-8863	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MMM		Employer (See Instructions) MMM
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENSEN, ALICE M. (Mrs.) Contributor address; City; State; Zip Code CLEBURNE, TX 76033-6662	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, GREGORY Contributor address; City; State; Zip Code SAMMAMISH, WA 98075-9571	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOLICOEUR, ROGER G. Contributor address; City; State; Zip Code SAN CLEMENTE, CA 92673-6862	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/74 Rpt: 37/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, MICHELLE 6 Contributor address; City; State; Zip Code SAVANNAH, TX 76227-7803	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) PROGRAM DIRECTOR		9 Employer (See Instructions) THE UNIVERSITY OF TEXAS AT DALLAS
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JUPPE, JOHN Contributor address; City; State; Zip Code LAKE GROVE, NY 11755-3120	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHANU, EARL Contributor address; City; State; Zip Code NORTH LAS VEGAS, NV 89084-5479	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALLBACK, GARY Contributor address; City; State; Zip Code EASLEY, SC 29642-8638	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAPPADAH, AL Contributor address; City; State; Zip Code CONCORD, CA 94521-2972	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/74 Rpt: 38/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, VICTORIA	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code LIBERTY, IN 47353-9382	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRWIN, THOMAS	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code DPO, AP 96532-6042	
Principal occupation / Job title (See Instructions) ASSISTANT ATTACHE/SUPERVISORY SPECIAL		Employer (See Instructions) U.S. DEPARTMENT OF HOMELAND SECURITY
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNUPPE, H.JAMES	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code CASTRO VALLEY, CA 94552-4803	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOEHNEN, YVONNE	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code GLENN, CA 95943-9653	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOPPEL, LYDIA SUE	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code HAYDEN, ID 83835-8550	
Principal occupation / Job title (See Instructions) SUBSTITUTE TEACHER		Employer (See Instructions) COEUR D ALENE SCHOOL DISTRICT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/74 Rpt: 39/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/05/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOVACS, DELLA	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code WILDWOOD, FL 34785-8302	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRUSE, RANDALL	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code LUBBOCK, TX 79413-5536	
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) NA
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAKEY, DAVID	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code NIXON, TX 78140-4267	
Principal occupation / Job title (See Instructions) SALES ASSOCIATE		Employer (See Instructions) HOME DEPOT SEGUIN, TX
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANDGRAF, KENNI	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code DALLAS, TX 75206-7233	
Principal occupation / Job title (See Instructions) R.N.		Employer (See Instructions) UT SOUTHWESTERN
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAURENT, VICKI	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code BELMONT, MI 49306-9682	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/74 Rpt: 40/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/07/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAHY, LACY	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code YOAKUM, TX 77995-2130	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEBAS, JOHN	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code CANYON LAKE, TX 78133-4000	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEDERLE, VICKI	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code FLORISSANT, MO 63033-4803	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/01/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, KEVIN	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code CENTRAL POINT, OR 97502-1939	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEIDNER, SUE	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code LA QUINTA, CA 92253-8749	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/74 Rpt: 41/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEONARD, KELLY	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code KERRVILLE, TX 78028-7301	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LERMA, BEN	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code ALHAMBRA, CA 91801-5633	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVINE, DAVID	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code HOBE SOUND, FL 33455-8919	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, LYNN	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code MONROVIA, CA 91016-3704	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEYSHON, DAVID W. (Mr.)	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code WEST CHESTER, PA 19380-4361	
Principal occupation / Job title (See Instructions) SHELF STOCKER		Employer (See Instructions) WAL MART

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/74 Rpt: 42/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/04/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINARES, MARIO	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code RIVERSIDE, CA 92506-5317	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDEN, TODD	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code SPRING, TX 77389-3889	
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) ISS
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOEWY, ADAM	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78731-1806	
Principal occupation / Job title (See Instructions) LAW		Employer (See Instructions) LOEWY LAW FIRM
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPARDO, CYNTHIA	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code DAYTON, OH 45458-3671	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LORENZ, ALONAH	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code BENSON, MN 56215-1358	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/74 Rpt: 43/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LORENZEN, EDWARD 6 Contributor address; City; State; Zip Code CROSSVILLE, TN 38558-8847	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUKAVEC, HELEN Contributor address; City; State; Zip Code LARGO, FL 33778-1956	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYMAN, JOHN Contributor address; City; State; Zip Code HIGH POINT, NC 27265-8115	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACMATH, ROSEMARY Contributor address; City; State; Zip Code LEVITTOWN, PA 19054-3716	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAKOWSKI, BRUCE Contributor address; City; State; Zip Code CLAWSON, MI 48017-1279	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/74 Rpt: 44/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAKOWSKI, BRUCE 6 Contributor address; City; State; Zip Code CLAWSON, MI 48017-1279	7 Amount of Contribution (\$) \$1.00
	8 Principal occupation / Job title (See Instructions) RETIRED	9 Employer (See Instructions) RETIRED
Date 01/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAKOWSKI, BRUCE Contributor address; City; State; Zip Code CLAWSON, MI 48017-1279	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) RETIRED	Employer (See Instructions) RETIRED
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAKOWSKI, BRUCE Contributor address; City; State; Zip Code CLAWSON, MI 48017-1279	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) RETIRED	Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAKOWSKI, BRUCE Contributor address; City; State; Zip Code CLAWSON, MI 48017-1279	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) RETIRED	Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAKOWSKI, BRUCE Contributor address; City; State; Zip Code CLAWSON, MI 48017-1279	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) RETIRED	Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/74 Rpt: 45/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAKOWSKI, BRUCE 6 Contributor address; City; State; Zip Code CLAWSON, MI 48017-1279	7 Amount of Contribution (\$) \$1.00
	8 Principal occupation / Job title (See Instructions) RETIRED	9 Employer (See Instructions) RETIRED
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAKOWSKI, BRUCE Contributor address; City; State; Zip Code CLAWSON, MI 48017-1279	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) RETIRED	Employer (See Instructions) RETIRED
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAKOWSKI, BRUCE Contributor address; City; State; Zip Code CLAWSON, MI 48017-1279	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) RETIRED	Employer (See Instructions) RETIRED
Date 01/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALIK, ALLAN H. Contributor address; City; State; Zip Code MENIFEE, CA 92584-7207	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) RETIRED	Employer (See Instructions) RETIRED
Date 01/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARINKO, TOM Contributor address; City; State; Zip Code KERSHAW, SC 29067-8121	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) RETIRED	Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/74 Rpt: 46/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/21/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARLING, ROBERT E. 6 Contributor address; City; State; Zip Code MONTGOMERY, TX 77316-2154	7 Amount of Contribution (\$) \$75,000.00
8 Principal occupation / Job title (See Instructions) CHAIRMAN & CEO		9 Employer (See Instructions) WOODFOREST FINANCIAL GROUP
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, ROY (Mr.) Contributor address; City; State; Zip Code KISSIMMEE, FL 34741-1239	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) GREETER/CASHIER		Employer (See Instructions) WAL MART
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASON, PAUL C. (Mr.) Contributor address; City; State; Zip Code PASADENA, MD 21122-2234	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASON, ROBERT Contributor address; City; State; Zip Code ROMEovILLE, IL 60446-5312	Amount of Contribution (\$) \$11.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS, CHERYL Contributor address; City; State; Zip Code PERRY, MI 48872-9596	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/74 Rpt: 47/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTINGLY-CLOUSE, TERESA	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code ABILENE, TX 79605-4201	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYO, LEWIS	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code LODI, CA 95242-2909	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYO, LEWIS	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code LODI, CA 95242-2909	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYRANT, JULIE	Amount of Contribution (\$) \$4,000.00
	Contributor address; City; State; Zip Code MONTGOMERY, TX 77356-8618	
Principal occupation / Job title (See Instructions) BANKER		Employer (See Instructions) WOODFORREST NATIONAL BANK
Date 01/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MC DONALD, MATTHEW	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code ROCK HILL, SC 29732-8466	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/74 Rpt: 48/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCALLISTER, ROBERT	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code CATHREYS VALLEY, CA 95306-9714	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCART, CARL	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code WAMEGO, KS 66547-9509	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRICK, SUSAN	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code CEDAR PARK, TX 78613-1488	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILAM, JAMES	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code MC GREGOR, TX 76657-4144	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILAM, JAMES	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code MC GREGOR, TX 76657-4144	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/74 Rpt: 49/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/07/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, LAWRENCE 6 Contributor address; City; State; Zip Code TRABUCO CANYON, CA 92679-4743	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, PHYLLIS Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216-7813	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SPS DESIGNS
Date 01/01/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOELLER, VIRGINIA Contributor address; City; State; Zip Code SEGUIN, TX 78155-9628	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00828947) MOORE FOR WEST VIRGINIA, INC. Contributor address; City; State; Zip Code HARPERS FERRY, WV 25425-0603	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, THOMAS Contributor address; City; State; Zip Code KERRVILLE, TX 78028-8970	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/74 Rpt: 50/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/05/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORA, MANUEL 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78265-3512	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SECURITY ASSISTANT		9 Employer (See Instructions) DEPARTMENT OF DEFENSE
Date 01/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUELLER SMITH, MARY Contributor address; City; State; Zip Code BALLINGER, TX 76821-7840	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUELLER SMITH, MARY Contributor address; City; State; Zip Code BALLINGER, TX 76821-7840	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURCH, WAYNE Contributor address; City; State; Zip Code NEWTON, NJ 07860-5003	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURTHY, SESHASHAYEE Contributor address; City; State; Zip Code YORKTOWN HEIGHTS, NY 10598-6225	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) COMPUTER SCIENTIST		Employer (See Instructions) UCSD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/74 Rpt: 51/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, BUDDY	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code TULSA, OK 74129-2612	
8 Principal occupation / Job title (See Instructions) REAL ESTATE		9 Employer (See Instructions) MYERS PROPERTY MINT
Date 01/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NA PIER, SUZANNE	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code COSTA MESA, CA 92626-2907	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NG, JENNIFER	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code ELMHURST, NY 11373-2507	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NGUYEN, HAI	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code WESTMINSTER, CA 92683-6662	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NGUYEN, THANH	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code MISSION VIEJO, CA 92692-5271	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/74 Rpt: 52/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORMAN, BRENDA	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code ODESSA, TX 79762-7154	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORTHUP, JONATHAN	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code SAINT CHARLES, MO 63301-0748	
Principal occupation / Job title (See Instructions) ENGINEERING		Employer (See Instructions) MARSUM SOLUTIONS
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'DELL, CHARLES	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070-6398	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORN, MARJORIE	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code AUKE BAY, AK 99821-1448	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OTT, SHARON	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77084-3033	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/74 Rpt: 53/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PADGETT, DIANNE	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code HOUSTON, TX 77005-2537	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PASSMORE, VICTORIA	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code MCALLEN, TX 78501-8919	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTEN, DAVID	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, MARCIA	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code TEMPLE, TX 76502-2134	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAUR, MARY	Amount of Contribution (\$) \$800.00
	Contributor address; City; State; Zip Code SPRING, TX 77382-2623	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/74 Rpt: 54/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYAN, LEONARD	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code MABANK, TX 75147-6122	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEACHER JR, ED	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code LUBBOCK, TX 79416-2952	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILIP, PHIL	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code DALLAS, TX 75209-6238	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, ROBRT	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code BULVERDE, TX 78163-4199	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLICICCHIO, RINALDO ANTONIO	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code PITTSBURGH, PA 15213	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/74 Rpt: 55/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, PAUL	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code LEXINGTON, TX 78947-4134	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRZYBYLO, JOSEPH	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code BUCKEYE, AZ 85396-7220	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUSHKAREWICZ, MICHAEL	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code WILMINGTON, DE 19808-4399	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUTNAM, WILMA JOY	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code GEORGETOWN, TX 78633-4971	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUICKERT, PAT	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code COLUMBUS, OH 43206-2155	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/74 Rpt: 56/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMOS, CARLOS	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code LOMITA, CA 90717	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, BETH	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code BUDA, TX 78610-9722	
Principal occupation / Job title (See Instructions) TUTOR		Employer (See Instructions) SELF-EMPLOYED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHERZHAGEN, TED	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code COLLEGE PLACE, WA 99324-1757	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHMOND, VICKI	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380-3402	
Principal occupation / Job title (See Instructions) FINANCIAL CONSULTANT		Employer (See Instructions) VR VENTURES
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RISO, DAVID	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code DIAMONDHEAD, MS 39525-3635	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/74 Rpt: 57/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROESING, HENRY 6 Contributor address; City; State; Zip Code WACO, TX 76710-1739	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROESING, HENRY Contributor address; City; State; Zip Code WACO, TX 76710-1739	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROESSNER, GREGORY Contributor address; City; State; Zip Code GRAPEVINE, TX 76051-5217	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, RICHARD Contributor address; City; State; Zip Code DANA POINT, CA 92629-1156	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) INVESTOR		Employer (See Instructions) SELF
Date 01/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMANO, ANTHONY Contributor address; City; State; Zip Code MYRTLE BEACH, SC 29577-1619	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/74 Rpt: 58/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSS, VICKY 6 Contributor address; City; State; Zip Code RANCHO CUCAMONGA, CA 91701-4898	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWLEY, BRUCE Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTH, DAWN E Contributor address; City; State; Zip Code SILVERDALE, WA 98383-9408	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, PAT Contributor address; City; State; Zip Code OXFORD, WI 53952-9615	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) S, GUY Contributor address; City; State; Zip Code DE PERE, WI 54115-4107	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/74 Rpt: 59/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: SABINE, RANDALL T. (Colonel)	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code BOERNE, TX 78006-5612	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: SABINE, RANDALL T. (Colonel)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code BOERNE, TX 78006-5612	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/01/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: SAVAGEAU, KARYL	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code LEXINGTON, VA 24450-1789	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: SAVAGEAU, KARYL	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code LEXINGTON, VA 24450-1789	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: SCHERER, JOHN C.	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code THE VILLAGES, FL 32163-5821	
Principal occupation / Job title (See Instructions) BUSINESS MANAGER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/74 Rpt: 60/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHNEIDER, NED	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code CANYON LAKE, TX 78133-4438	
8 Principal occupation / Job title (See Instructions) ENGINEERING CONSULTANT		9 Employer (See Instructions) QIC&TT, LLC
Date 01/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOENFELD, ROSE	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78737-9305	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHROEDER, JUDITH	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code ELGIN, IL 60123-4400	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SELLERS, KAREN	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code SCHWENKSVILLE, PA 19473-1788	
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE		Employer (See Instructions) HARLEYSVILLE INS CO
Date 01/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SERCELY, RONALD	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code CARROLLTON, TX 75006-5209	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/74 Rpt: 61/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEUNG, HSING	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code PLANO, TX 75075-1591	
8 Principal occupation / Job title (See Instructions) CURRICULUM WRITER		9 Employer (See Instructions) CHRISTIAN CREATIVE COMMUNICATION CENTE
Date 01/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEYMOUR, SUSAN	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code NEDERLAND, TX 77627-4956	
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) SEYMOUR & ASSOCIATES
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAFFER, JOHN	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code ZEPHYR COVE, NV 89448-1339	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARPE, JIM	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code LAMPE, MO 65681	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARROW, REGINA	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code ZIONSVILLE, IN 46077-8700	
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) WIF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/74 Rpt: 62/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/22/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHASTEEN, KARLYNN	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code WICHITA FALLS, TX 76310-1002	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHELLEY, GEOFFREY	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code FARMERS BRANCH, TX 75234-4853	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHINN, D.V.M., RICHARD	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code FRANKLIN, NC 28734-7264	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOLL, TED	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code BONITA, CA 91902-2712	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDES, VICTORIA	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code LAKE WORTH, FL 33467-4752	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 60/74 Rpt: 63/98
2 FILER NAME Texans for Chip Roy			3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/19/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMONEAU, P R 6 Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620-1144	7 Amount of Contribution (\$) \$35.00	
8 Principal occupation / Job title (See Instructions) SYSTEMS ANALYST		9 Employer (See Instructions) RAILROAD COMMISSION OF TEXAS	
Date 01/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DWIGHT Contributor address; City; State; Zip Code CARY, NC 27519-9747	Amount of Contribution (\$) \$50.00	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED	
Date 01/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MARY Contributor address; City; State; Zip Code HOUSTON, TX 77070-4337	Amount of Contribution (\$) \$10.00	
Principal occupation / Job title (See Instructions) HOUSEWIFE		Employer (See Instructions) MARY SMITH	
Date 01/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, WILLIAM Contributor address; City; State; Zip Code EXETER, NH 03833-1925	Amount of Contribution (\$) \$5.00	
Principal occupation / Job title (See Instructions) BROKER		Employer (See Instructions) WILLIAM SMITH	
Date 01/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNOW, KIM Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022-6321	Amount of Contribution (\$) \$5.00	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/74 Rpt: 64/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNYDER, MARSHALL 6 Contributor address; City; State; Zip Code WHITNEY, TX 76692-2063	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLBACH, MARK A Contributor address; City; State; Zip Code HOLT, MO 64048-9222	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SONI, SHASHIBALA Contributor address; City; State; Zip Code BRONX, NY 10452	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOTIR, ROBBIN Contributor address; City; State; Zip Code KENNESAW, GA 30152-4613	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOWERS, GEORGE Contributor address; City; State; Zip Code CONROE, TX 77304-1400	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/74 Rpt: 65/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/12/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPERBER, HANNAH 6 Contributor address; City; State; Zip Code PHOENIX, AZ 85016-3719	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STARCHER, MARK Contributor address; City; State; Zip Code BAKERSFIELD, CA 93314-9735	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEGEMAN, LINDA G. Contributor address; City; State; Zip Code MONTGOMERY, TX 77356-8066	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEHLING, LISA Contributor address; City; State; Zip Code KERRVILLE, TX 78029-4852	Amount of Contribution (\$) \$7.84
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEIN, CATHERINE R Contributor address; City; State; Zip Code LAKEHILLS, TX 78063-6994	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/74 Rpt: 66/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEIN, CATHERINE R 6 Contributor address; City; State; Zip Code LAKEHILLS, TX 78063-6994	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, WALLACE Contributor address; City; State; Zip Code GALENA, OH 43021-9443	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENSON, JENNIFER Contributor address; City; State; Zip Code SAN MARCOS, TX 78666-2566	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEUBING, DARRELL & ANNA Contributor address; City; State; Zip Code BOERNE, TX 78015-4635	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) INSURANCE SALES		Employer (See Instructions) DARRELL STEUBING INSURANCE
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, SARA ANN Contributor address; City; State; Zip Code DENTON, TX 76209	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/74 Rpt: 67/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/01/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, MARK A.	7 Amount of Contribution (\$) \$10,000.00
	6 Contributor address; City; State; Zip Code TOMBALL, TX 77377-5987	
8 Principal occupation / Job title (See Instructions) CONSTRUCTION MANAGER		9 Employer (See Instructions) STEWART BUILDERS
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOCKS, HAYWOOD	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code REHOBOTH BEACH, DE 19971-6102	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRONCZEK, STEVEN	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code HARPER, TX 78631-0203	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTLIFF, GREG	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code CAMP HILL, PA 17011-1619	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTLIFF, GREG	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code CAMP HILL, PA 17011-1619	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/74 Rpt: 68/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/17/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTTON, JOSEPH	7 Amount of Contribution (\$) \$25,000.00
	6 Contributor address; City; State; Zip Code HOUSTON, TX 77002-5346	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) SUTTON VENTURES
Date 01/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THIELEN, THEODORE	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code PARK RAPIDS, MN 56470-1375	
Principal occupation / Job title (See Instructions) AUTO DEALER		Employer (See Instructions) THIELEN MOTORS INC
Date 01/01/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, DIANNE	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code BRUCEVILLE, TX 76630-3522	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, CRYSTAL	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code HURRICANE, UT 84737-1405	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TININENKO, CALVIN	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code SPEARFISH, SD 57783-4168	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/74 Rpt: 69/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TINSLEY, JOE	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code ORMOND BEACH, FL 32176-7839	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIPLER, JUSTIN	Amount of Contribution (\$) \$7,500.00
	Contributor address; City; State; Zip Code MONTGOMERY, TX 77316-2825	
Principal occupation / Job title (See Instructions) DEVELOPER		Employer (See Instructions) SELF EMPLOYED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOBIAS, LISA	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code LOVETTSVILLE, VA 20180-8512	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRACEY, JAMES	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78734-2771	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRENT, MARTIN	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code WADING RIVER, NY 11792-1724	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/74 Rpt: 70/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TROMBA, JOHN	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code EULESS, TX 76040-5717	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, TERRY	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code DIXON, CA 95620-9226	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TYREE, PHILLIP O	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code CARLSBAD, NM 88220	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TYREE, PHILLIP O	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code CARLSBAD, NM 88220	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UDELL Jr., C. ROBERT	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380-2997	
Principal occupation / Job title (See Instructions) VICE CHAIRMAN		Employer (See Instructions) FIDIUM FIBER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/74 Rpt: 71/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) USNIK, TODD	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code HOUSTON, TX 77096-5805	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN SICKLE, KAY	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code FORT WORTH, TX 76116-4503	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VEGA, ALBERT	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code STANTON, CA 90680-3423	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLANUEVA, JOSE	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87114-3687	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOWELL, PAUL	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code FORT MORGAN, CO 80701-2228	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/74 Rpt: 72/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALL, RAY 6 Contributor address; City; State; Zip Code LA PORTE, TX 77571-4424	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSH, THOMAS Contributor address; City; State; Zip Code WATERLOO, AL 35677-3695	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, JANET Contributor address; City; State; Zip Code NASHUA, NH 03064-1250	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, LAURA Contributor address; City; State; Zip Code COLTON, CA 92324-4776	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARE, MIKE Contributor address; City; State; Zip Code SHERIDAN, TX 77475-0307	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/74 Rpt: 73/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARNOCK, DEAN	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code FARMERS BRANCH, TX 75234-4877	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEEKS, TEE	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code DECATUR, TX 76234-6898	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEILAND, JOHN	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code SAN JOSE, CA 95125-1842	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINER, JEFF	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code LEWISTON, ID 83501-3612	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELCH, SALLY	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code PENDLETON, SC 29670-9635	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/74 Rpt: 74/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WENDLAND, KENNETH	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code KERRVILLE, TX 78028-6806	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, CHARLIE	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code BOERNE, TX 78006-8063	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEELER, KATHERINE	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code BRUCEVILLE, TX 76630-3489	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, MICHAEL	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code WILLIS, TX 77318-5508	
Principal occupation / Job title (See Instructions) BANKER		Employer (See Instructions) WOODFOREST NATIONAL BANK
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, STEPHEN M. (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code GARDEN RIDGE, TX 78266-2060	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/74 Rpt: 75/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITEHORN, GARY 6 Contributor address; City; State; Zip Code LONGVIEW, TX 75604-2103	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WICKSTROM, SANDRA Contributor address; City; State; Zip Code MARBLE FALLS, TX 78654-5175	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILES, JAMES Contributor address; City; State; Zip Code CEDAR PARK, TX 78613-2466	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, LARRY Contributor address; City; State; Zip Code LUBBOCK, TX 79416-3224	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, GREG Contributor address; City; State; Zip Code CHESTER, VA 23831-4321	Amount of Contribution (\$) \$17.76
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/74 Rpt: 76/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINDOWS PHONE, KATHLEEN WENNER HOME 6 Contributor address; City; State; Zip Code STILLWATER, PA 17878-9357	7 Amount of Contribution (\$) \$5.00
	8 Principal occupation / Job title (See Instructions) RETIRED	9 Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINOGRADOFF, ALEX Contributor address; City; State; Zip Code PUTNAM VALLEY, NY 10579-3302	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) RETIRED	Employer (See Instructions) RETIRED
Date 01/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WISMER, ANN Contributor address; City; State; Zip Code KEMAH, TX 77565-2923	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) BEER DISTRIBUTOR	Employer (See Instructions) WISMER DISTRIBUTING
Date 01/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WITT, FRANCIS Contributor address; City; State; Zip Code COPPELL, TX 75019-4049	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) SALES	Employer (See Instructions) CYMSTAR
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WITT, FRANCIS Contributor address; City; State; Zip Code COPPELL, TX 75019-4049	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) SALES	Employer (See Instructions) CYMSTAR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/74 Rpt: 77/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODHOUSE, MARILYN M.	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code HOUSTON, TX 77079-6905	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODREY, JIM	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code MIDDLETOWN, OH 45042-2330	
Principal occupation / Job title (See Instructions) P.I.		Employer (See Instructions) SECURITAS
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WORCESTER, SHARON S	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YU, LYDIA	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77090-1270	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZURAWSKI, ROBERT	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code HIGHLANDS RANCH, CO 80126-5023	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/18 Rpt: 78/98	2 FILER NAME Texans for Chip Roy	3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/05/2026	5 Payee name AMERICAN AIRLINES	
6 Amount (\$) \$417.49	7 Payee address; City; 1 SKYVIEW DR. FORT WORTH, TX 76155	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TRAVEL: AIRFARE TO ATTEND CAMPAIGN EVENT
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/15/2026	Payee name AMERICAN AIRLINES	
Amount (\$) \$491.50	Payee address; City; 1 SKYVIEW DR. FORT WORTH, TX 76155	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TRAVEL: AIRFARE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/15/2026	Payee name AMERICAN AIRLINES	
Amount (\$) \$491.50	Payee address; City; 1 SKYVIEW DR. FORT WORTH, TX 76155	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TRAVEL: AIRFARE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/18 Rpt: 79/98	2 FILER NAME Texans for Chip Roy	3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/02/2026	5 Payee name ANEDOT, INC.	
6 Amount (\$) \$176.90	7 Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/02/2026	Payee name ANEDOT, INC.	
Amount (\$) \$529.12	Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/06/2026	Payee name ANEDOT, INC.	
Amount (\$) \$2,032.99	Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/18 Rpt: 80/98	2 FILER NAME Texans for Chip Roy	3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/06/2026	5 Payee name ANEDOT, INC.	
6 Amount (\$) \$451.24	7 Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/07/2026	Payee name ANEDOT, INC.	
Amount (\$) \$318.50	Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/07/2026	Payee name ANEDOT, INC.	
Amount (\$) \$426.80	Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/18 Rpt: 81/98	2 FILER NAME Texans for Chip Roy	3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/08/2026	5 Payee name ANEDOT, INC.	
6 Amount (\$) \$377.00	7 Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/08/2026	Payee name ANEDOT, INC.	
Amount (\$) \$28.30	Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/09/2026	Payee name ANEDOT, INC.	
Amount (\$) \$167.00	Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/18 Rpt: 82/98	2 FILER NAME Texans for Chip Roy	3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/09/2026	5 Payee name ANEDOT, INC.	
6 Amount (\$) \$547.75	7 Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/12/2026	Payee name ANEDOT, INC.	
Amount (\$) \$575.40	Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/12/2026	Payee name ANEDOT, INC.	
Amount (\$) \$41.28	Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/18 Rpt: 83/98	2 FILER NAME Texans for Chip Roy	3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/14/2026	5 Payee name ANEDOT, INC.	
6 Amount (\$) \$184.28	7 Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/14/2026	Payee name ANEDOT, INC.	
Amount (\$) \$46.99	Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/15/2026	Payee name ANEDOT, INC.	
Amount (\$) \$277.40	Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/18 Rpt: 84/98	2 FILER NAME Texans for Chip Roy	3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/15/2026	5 Payee name ANEDOT, INC.	
6 Amount (\$) \$43.24	7 Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/20/2026	Payee name ANEDOT, INC.	
Amount (\$) \$327.28	Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/20/2026	Payee name ANEDOT, INC.	
Amount (\$) \$1,800.30	Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/18 Rpt: 85/98	2 FILER NAME Texans for Chip Roy	3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/22/2026	5 Payee name ANEDOT, INC.	
6 Amount (\$) \$1,226.69	7 Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/22/2026	Payee name ANEDOT, INC.	
Amount (\$) \$10.48	Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/22/2026	Payee name ANEDOT, INC.	
Amount (\$) \$859.78	Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/18 Rpt: 86/98	2 FILER NAME Texans for Chip Roy	3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/22/2026	5 Payee name ANEDOT, INC.	
6 Amount (\$) \$69.60	7 Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/22/2026	Payee name ANEDOT, INC.	
Amount (\$) \$465.50	Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/22/2026	Payee name ANEDOT, INC.	
Amount (\$) \$79.50	Payee address; City; State; Zip Code 1340 POYDRAS ST, STE 1770 NEW ORLEANS, LA 70112-8954	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD MERCHANT FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/18 Rpt: 87/98	2 FILER NAME Texans for Chip Roy	3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/05/2026	5 Payee name CMDI	
6 Amount (\$) \$0.96	7 Payee address; City; State; Zip Code 1595 SPRING HILL RD., STE. 500 TYSONS CORNER, VA 22182	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 DATABASE MANAGEMENT SERVICE
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/22/2026	Payee name CMDI	
Amount (\$) \$2,400.00	Payee address; City; State; Zip Code 1595 SPRING HILL RD., STE. 500 TYSONS CORNER, VA 22182	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 DATABASE MANAGEMENT SERVICE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/06/2026	Payee name COOK, JORDAN	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 4092 TPC PKWY APT. 1046 SAN ANTONIO, TX 78261	
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 POLITICAL STRATEGY CONSULTING
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/18 Rpt: 88/98	2 FILER NAME Texans for Chip Roy	3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/06/2026	5 Payee name COOK, JORDAN	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 4092 TPC PKWY APT. 1046 SAN ANTONIO, TX 78261	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL STRATEGY CONSULTING
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/06/2026	Payee name COOK, JORDAN	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 4092 TPC PKWY APT. 1046 SAN ANTONIO, TX 78261	
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 POLITICAL STRATEGY CONSULTING
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/08/2026	Payee name CUBESMART #4654	
Amount (\$) \$324.00	Payee address; City; State; Zip Code 9521 W US - 290 AUSTIN, TX 78736	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 STORAGE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/18 Rpt: 89/98	2 FILER NAME Texans for Chip Roy	3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/02/2026	5 Payee name DENTON COUNTY REPUBLICAN PARTY	
6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 2921 COUNTRY CLUB DR, STE 102 DENTON, TX 76210	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EVENT SPONSORSHIP
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/02/2026	Payee name FLETCHER, JOHN	
Amount (\$) \$7,500.00	Payee address; City; State; Zip Code 1709 CINNAMON PATH UNIT A AUSTIN, TX 78704	
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 POLITICAL STRATEGY CONSULTING
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/07/2026	Payee name J2 STRATEGIES	
Amount (\$) \$15,000.00	Payee address; City; State; Zip Code 1424 KINGSGATE DRIVE BRYAN, TX 77807	
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 POLITICAL STRATEGY CONSULTING
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/18 Rpt: 90/98	2 FILER NAME Texans for Chip Roy	3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/20/2026	5 Payee name KING RANCH SADDLE SHOP	
6 Amount (\$) \$238.15	7 Payee address; City; State; Zip Code 1333 S. CONGRESS, STE 160 AUSTIN, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 EMBROIDERED VESTS
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/20/2026	Payee name KING RANCH SADDLE SHOP	
Amount (\$) \$119.08	Payee address; City; State; Zip Code 1333 S. CONGRESS, STE 160 AUSTIN, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 EMBROIDERED VESTS
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/20/2026	Payee name KING RANCH SADDLE SHOP	
Amount (\$) \$357.23	Payee address; City; State; Zip Code 1333 S. CONGRESS, STE 160 AUSTIN, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 EMBROIDERED VESTS
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/18 Rpt: 91/98	2 FILER NAME Texans for Chip Roy	3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/05/2026	5 Payee name LOFSTROM CONSULTING LLC	
6 Amount (\$) \$43,050.00	7 Payee address; City; State; Zip Code 3915 SOUTHWESTERN ST. HOUSTON, TX 77005	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FUNDRAISING CONSULTING
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/02/2026	Payee name MARIGOLD STRATEGIES LLC	
Amount (\$) \$20,000.00	Payee address; City; State; Zip Code 2113 CREEKSIDE CIR S IRVING, TX 75063	
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 POLITICAL STRATEGY CONSULTING
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/02/2026	Payee name PALISADE POLICY GROUP	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 1401 PIEDMONT AVENUE OPELIKA, AL 36801	
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 RESEARCH SERVICES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/18 Rpt: 92/98	2 FILER NAME Texans for Chip Roy	3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/05/2026	5 Payee name RIGHTSIDE COMPLIANCE	
6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 7415 SW PKWY, BLDG 6, STE 500-134 AUSTIN, TX 78735	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COMPLIANCE CONSULTING SERVICES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/02/2026	Payee name SOUTHWEST AIRLINES	
Amount (\$) \$400.00	Payee address; City; State; Zip Code P.O. BOX 36647-1CR DALLAS, TX 75235	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TRAVEL: AIRFARE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/07/2026	Payee name STRATEGIC MEDIA SERVICES, INC.	
Amount (\$) \$1,213,280.00	Payee address; City; State; Zip Code 4601 N. FAIRFAX DRIVE, SUITE 730 ARLINGTON, VA 22203	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEDIA PLACEMENT
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/18 Rpt: 93/98	2 FILER NAME Texans for Chip Roy	3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/02/2026	5 Payee name THE LAUDERBACK GROUP	
6 Amount (\$) \$20,200.00	7 Payee address; City; 1307 ELTON LANE AUSTIN, TX 78703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FUNDRAISING CONSULTING
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/02/2026	Payee name THE LAUDERBACK GROUP	
Amount (\$) \$3,575.00	Payee address; City; 1307 ELTON LANE AUSTIN, TX 78703	
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 FUNDRAISING CONSULTING
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/02/2026	Payee name THE LAUDERBACK GROUP	
Amount (\$) \$282.80	Payee address; City; 1307 ELTON LANE AUSTIN, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MILEAGE REIMBURSEMENT TO ATTEND EVENTS IN TEXAS
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/18 Rpt: 94/98	2 FILER NAME Texans for Chip Roy	3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/08/2026	5 Payee name UNITED AIRLINES	
6 Amount (\$) \$410.49	7 Payee address; City; 233 S. WACKER DR. CHICAGO, IL 60606-6060	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TRAVEL: AIRFARE TO ATTEND CAMPAIGN MEETINGS
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/13/2026	Payee name UNITED AIRLINES	
Amount (\$) \$494.50	Payee address; City; 233 S. WACKER DR. CHICAGO, IL 60606-6060	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TRAVEL: AIRFARE TO ATTEND CAMPAIGN MEETINGS
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/16/2026	Payee name UNITED AIRLINES	
Amount (\$) \$103.20	Payee address; City; 233 S. WACKER DR. CHICAGO, IL 60606-6060	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TRAVEL: AIRFARE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/18 Rpt: 95/98	2 FILER NAME Texans for Chip Roy	3 Filer ID (Ethics Commission Filers) 00089953	
4 Date 01/16/2026	5 Payee name UNITED AIRLINES		
6 Amount (\$) \$660.29	7 Payee address; City; 233 S. WACKER DR. CHICAGO, IL 60606-6060		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TRAVEL: AIRFARE	
9 Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/1 Rpt: 96/98	2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 CREDIT CARD ISSUER	Name of financial institution CHAIN BRIDGE BANK, N.A.		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 696.46
6 PAYMENT	(a) Amount Charged \$24.00	(b) Date of Charge 01/09/2026	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name AMERICAN AIRLINES		(b) Payee address; City, State, Zip Code 1 SKYVIEW DR. FORT WORTH, TX 76155
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		(b) Description TRAVEL: AIRLINE FEE <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$322.52	(b) Date of Charge 01/10/2026	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name PRICELINE		(b) Payee address; City, State, Zip Code 800 CONNECTICUT AVE. NORWALK, CT 06854
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		(b) Description TRAVEL: HOTEL <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
PAYMENT	(a) Amount Charged \$8.00	(b) Date of Charge 01/15/2026	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name UNITED AIRLINES		(b) Payee address; City, State, Zip Code 233 S. WACKER DR. CHICAGO, IL 60606-6060
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		(b) Description TRAVEL: WIFI FOR FLIGHT <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

**INTEREST, CREDITS, GAINS, REFUNDS, AND
CONTRIBUTIONS RETURNED TO FILER****SCHEDULE K**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/1 Rpt: 97/98
2 FILER NAME Texans for Chip Roy		3 Filer ID (Ethics Commission Filers) 00089953
4 Date 01/19/2026	5 Name of person from whom amount is received AMERICAN AIRLINES	8 Amount (\$) \$491.50
	6 Address of person from whom amount is received; City; State; Zip Code FORT WORTH, TX 76155	
	7 Purpose for which amount is received REFUND CANCELLED AIRFARE	<input type="checkbox"/> Check if political contribution returned to filer
Date 01/19/2026	Name of person from whom amount is received AMERICAN AIRLINES	Amount (\$) \$491.50
	Address of person from whom amount is received; City; State; Zip Code FORT WORTH, TX 76155	
	Purpose for which amount is received REFUND CANCELLED AIRFARE	<input type="checkbox"/> Check if political contribution returned to filer

**IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES
FOR TRAVEL OUTSIDE OF TEXAS**

SCHEDULE T

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule T: Sch: 1/1 Rpt: 98/98</p>												
<p>2 FILER NAME Texans for Chip Roy</p>		<p>3 Filer ID (Ethics Commission Filers) 00089953</p>												
<p>4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee AMERICAN AIRLINES</p>														
<p>5 Contribution / Expenditure reported on:</p> <table> <tr> <td><input type="checkbox"/> Schedule A2</td> <td><input type="checkbox"/> Schedule B</td> <td><input type="checkbox"/> Schedule B(J)</td> <td><input type="checkbox"/> Schedule C2</td> <td><input type="checkbox"/> Schedule D</td> <td><input checked="" type="checkbox"/> Schedule F1</td> </tr> <tr> <td><input type="checkbox"/> Schedule F2</td> <td><input type="checkbox"/> Schedule F4</td> <td><input type="checkbox"/> Schedule G</td> <td><input type="checkbox"/> Schedule H</td> <td><input type="checkbox"/> Schedule COH-UC</td> <td></td> </tr> </table>			<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input checked="" type="checkbox"/> Schedule F1	<input type="checkbox"/> Schedule F2	<input type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	
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<input type="checkbox"/> Schedule F2	<input type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC										
<p>6 Dates of Travel 01/09/2026 01/09/2026</p>	<p>7 Name of person(s) traveling ROY, CHIP</p>													
	<p>8 Departure city or name of departure location WASHINGTON</p>													
	<p>9 Destination city or name of destination location DALLAS</p>													
<p>10 Means of transportation Commercial Airplane</p>	<p>11 Purpose of travel (including name of conference, seminar, or other event) AIRFARE TO ATTEND CAMPAIGN EVENT</p>													
<p>Name of Contributor / Corporation or Labor Organization / Pledgor /Payee UNITED AIRLINES</p>														
<p>Contribution / Expenditure reported on:</p> <table> <tr> <td><input type="checkbox"/> Schedule A2</td> <td><input type="checkbox"/> Schedule B</td> <td><input type="checkbox"/> Schedule B(J)</td> <td><input type="checkbox"/> Schedule C2</td> <td><input type="checkbox"/> Schedule D</td> <td><input checked="" type="checkbox"/> Schedule F1</td> </tr> <tr> <td><input type="checkbox"/> Schedule F2</td> <td><input type="checkbox"/> Schedule F4</td> <td><input type="checkbox"/> Schedule G</td> <td><input type="checkbox"/> Schedule H</td> <td><input type="checkbox"/> Schedule COH-UC</td> <td></td> </tr> </table>			<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input checked="" type="checkbox"/> Schedule F1	<input type="checkbox"/> Schedule F2	<input type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	
<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input checked="" type="checkbox"/> Schedule F1									
<input type="checkbox"/> Schedule F2	<input type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC										
<p>Dates of Travel 01/15/2026 01/15/2026</p>	<p>Name of person(s) traveling HANCOCK, SABRINA</p>													
	<p>Departure city or name of departure location WASHINGTON</p>													
	<p>Destination city or name of destination location HOUSTON</p>													
<p>Means of transportation Commercial Airplane</p>	<p>Purpose of travel (including name of conference, seminar, or other event) AIRFARE TO ATTEND CAMPAIGN MEETINGS</p>													
<p>Name of Contributor / Corporation or Labor Organization / Pledgor /Payee UNITED AIRLINES</p>														
<p>Contribution / Expenditure reported on:</p> <table> <tr> <td><input type="checkbox"/> Schedule A2</td> <td><input type="checkbox"/> Schedule B</td> <td><input type="checkbox"/> Schedule B(J)</td> <td><input type="checkbox"/> Schedule C2</td> <td><input type="checkbox"/> Schedule D</td> <td><input checked="" type="checkbox"/> Schedule F1</td> </tr> <tr> <td><input type="checkbox"/> Schedule F2</td> <td><input type="checkbox"/> Schedule F4</td> <td><input type="checkbox"/> Schedule G</td> <td><input type="checkbox"/> Schedule H</td> <td><input type="checkbox"/> Schedule COH-UC</td> <td></td> </tr> </table>			<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input checked="" type="checkbox"/> Schedule F1	<input type="checkbox"/> Schedule F2	<input type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	
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<input type="checkbox"/> Schedule F2	<input type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC										
<p>Dates of Travel 01/15/2026 01/15/2026</p>	<p>Name of person(s) traveling ROY, CHIP</p>													
	<p>Departure city or name of departure location WASHINGTON</p>													
	<p>Destination city or name of destination location HOUSTON</p>													
<p>Means of transportation Commercial Airplane</p>	<p>Purpose of travel (including name of conference, seminar, or other event) AIRFARE TO ATTEND CAMPAIGN MEETINGS</p>													