

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers) 00067547	2 Total pages filed: 21		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST The Honorable Cecil I.	MI	OFFICE USE ONLY		
	NICKNAME	LAST Bell	SUFFIX Jr.	Date Received ELECTRONICALLY FILED 02/02/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; P.O. Box 819 Magnolia, TX 77355			Date Hand-delivered or Date Postmarked		
				Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Mrs.	MI			
	NICKNAME	LAST Taylor	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 27003 Lavaca Trails Magnolia, TX 77355		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (281) 770-4006					
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)					
9 PERIOD COVERED	Month 01/01/2026	Day	Year	Month 01/22/2026	Day	Year
10 ELECTION	ELECTION DATE Month 03/03/2026		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special			
11 OFFICE	OFFICE HELD (if any) State Representative District 3 Montgomery			12 OFFICE SOUGHT (if known) State Representative District 3		

GO TO PAGE 2

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

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

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13 C / OH NAME	Bell Jr., Cecil I. (The Honorable)		14 Filer ID (Ethics Commission Filers) 00067547
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input checked="" type="checkbox"/> Additional Pages	COMMITTEE TYPE <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME TEXAS REALTORS POLITICAL ACTION COMMITTEE	
		COMMITTEE ADDRESS 1115 SAN JACINTO BLVD STE 200	
		AUSTIN, TX	
		COMMITTEE CAMPAIGN TREASURER NAME CANTU, LESLIE	
		COMMITTEE CAMPAIGN TREASURER ADDRESS P.O. BOX 2246	
		AUSTIN, TX 78768	
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 63,180.99
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 120,582.22
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 60,499.99
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 82,140.00

17 AFFIDAVIT

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

The Honorable Cecil I. Bell Jr.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM C/OH
ADDENDUM

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C / OH NAME	Bell Jr., Cecil I. (The Honorable)		Filer ID (Ethics Commission Filers) 00067547
17 NOTICE FROM POLITICAL COMMITTEE(S)	.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures ..		
	COMMITTEE TYPE <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	TEXAS AFFILIATION OF AFFORDABLE HOUSING PROVIDERS PAC
		COMMITTEE ADDRESS	2401 E 6TH STREET STE 3037 PMB 153
		AUSTIN, TX 78702	
		COMMITTEE CAMPAIGN TREASURER NAME	HENDERSON, BLAIR
		COMMITTEE CAMPAIGN TREASURER ADDRESS	2401 E 6TH STREET STE 3037 PMB 153
AUSTIN, TX 78702			

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

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18 FILER NAME Bell Jr., Cecil I. (The Honorable)	19 Filer ID (Ethics Commission Filers) 00067547
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 45,094.25
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 18,086.74
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 120,582.22
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/8 Rpt: 5/21
2 FILER NAME Bell Jr., Cecil I. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067547
4 Date 01/21/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGC OF TEXAS PAC	7 Amount of Contribution (\$) \$2,500.00
	6 Contributor address; City; State; Zip Code AUSTIN, TX 78768	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN BOONE HUMPHRIES ROBINSON LLP	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Houston, TX 77027	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREWS, JAMES	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78704	
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) CCTADR, LLC
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ATMOS ENERGY CORPORATION PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code DALLAS, TX 75240	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKRIDGE	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/8 Rpt: 6/21
2 FILER NAME Bell Jr., Cecil I. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067547
4 Date 01/21/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANNON, DONALD	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code MAGNOLIA, TX 77355	
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#: _____) CLEAT PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code AUSTIN , TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONGRESS AVENUE PARTNERS PAC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWNOVER CAPITOL LLC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78759	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EYE-PAC OF THE TEXAS SOCIETY OF EYE PHYSICIANS &	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78711	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/8 Rpt: 7/21
2 FILER NAME Bell Jr., Cecil I. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067547
4 Date 01/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: GONZALEZ PUBLIC AFFAIRS & CONSULTING 6 Contributor address; City; State; Zip Code AUSTIN, TX 78716	7 Amount of Contribution (\$) \$250.00
	8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: GREENBERG TRAURIG, PA AUSTIN, TX 78701	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: HICKS PATE STRATEGIES LLC AUSTIN, TX 78767	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: HOMEPAK OF TEXAS, TEXAS ASSOCIATION OF BUILDERS AUSTIN, TX 78701	Amount of Contribution (\$) \$3,000.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: HUFFINS LIBERTY PAC DALLAS, TX 75225	Amount of Contribution (\$) \$1,432.50
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/8 Rpt: 8/21
2 FILER NAME Bell Jr., Cecil I. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067547
4 Date 01/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) K&L GATES LLP COMMITTEE FOR GOOD GOVERNMENT 6 Contributor address; City; State; Zip Code DALLAS, TX 75201	7 Amount of Contribution (\$) \$1,000.00
	8 Principal occupation / Job title (See Instructions) PRESIDENT	9 Employer (See Instructions) KEFFER KONSULTING LLC
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEFFER, JAMES Contributor address; City; State; Zip Code EASTLAND, TX 76448	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions) MANAGER	Employer (See Instructions) HMWK LLC
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LLOYD GOSSELINK ROCHELLE & TOWNSEND P.C Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LLOYD GOSSELINK ROCHELLE & TOWNSEND P.C Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/8 Rpt: 9/21
2 FILER NAME Bell Jr., Cecil I. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067547
4 Date 01/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger Goggan Blair & Sampson, LLP 6 Contributor address; City; State; Zip Code Austin, TX 78760	7 Amount of Contribution (\$) \$1,000.00
	8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIKE TOOMEY & ASSOCIATES AUSTIN, TX 78701	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOAK CASEY PAC AUSTIN, TX 78701	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORIN, THOMAS HOUSTON, TX 77005	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions) PRESIDENT	Employer (See Instructions) DAILY COURT REVIEW
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHIE, CARL WINDCREST, TX 78239	Amount of Contribution (\$) \$477.50
	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: 6/8 Rpt: 10/21
2 FILER NAME Bell Jr., Cecil I. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067547
4 Date 01/21/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RURAL FRIENDS OF ELECTRIC COOPERATIVES 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 01/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, MICHAEL Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$95.50
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#: _____) SAMPSON PUBLIC AFFAIRS LLC Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLEDGE LAW GROUP PLLC Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXAS ALLIANCE FOR LIFE PAC Contributor address; City; State; Zip Code AUSTIN, TX 78754	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/8 Rpt: 11/21
2 FILER NAME Bell Jr., Cecil I. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067547
4 Date 01/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXAS AUTOMOBILE DEALERS ASSOCIATION PAC 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$1,000.00
	8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXAS CHEMISTRY COUNCIL / TEXAS CHEMISTRY ALLIANCE AUSTIN, TX 78701	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXAS LOBBY PARTNERS LLP AUSTIN, TX 78701	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXAS LOBBY STRATEGIES AUSTIN, TX 78701	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXAS OUR TEXAS PAC AUSTIN, TX 78767	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/8 Rpt: 12/21
2 FILER NAME Bell Jr., Cecil I. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067547
4 Date 01/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOOMEY, MICHAEL	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	
8 Principal occupation / Job title (See Instructions) LOBBYIST		9 Employer (See Instructions) TEXAS LOBBY PARTNERS
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TXTA TRUCKPAC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code AUSTIN, TX 75701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN DE PUTTE, LETICIA	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code CASTLE HILLS, TX 78213	
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) ANDRADE-VANDE PUTTE & ASSOCIATES
Date 01/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZEIS, MATT	Amount of Contribution (\$) \$238.75
	Contributor address; City; State; Zip Code HOUSTON, TX 77009	
Principal occupation / Job title (See Instructions) PARTNER		Employer (See Instructions) CONCENTRIC COMMUNITY ADVISORS

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>				<p>1 Total pages Schedule A2: Sch: 1/1 Rpt: 13/21</p>
<p>2 FILER NAME Bell Jr., Cecil I. (The Honorable)</p>				<p>3 Filer ID (Ethics Commission Filers) 00067547</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				\$
<p>5 Date 01/22/2026</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHARTER SCHOOLS NOW PAC</p>		<p>8 Amount of contribution (\$) \$86.74</p>	<p>9 In-kind contribution description TEXTING SERVICE</p>
	<p>7 Contributor address; City; State; Zip Code AUSTIN, TX 78704</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 01/12/2026</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUSTIN BURROWS CAMPAIGN</p>		<p>Amount of contribution (\$) \$9,000.00</p>	<p>In-kind contribution description POLLING</p>
	<p>Contributor address; City; State; Zip Code AUSTIN, TX 78767</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 01/13/2026</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXANS FOR LAWSUIT REFORM PAC</p>		<p>Amount of contribution (\$) \$9,000.00</p>	<p>In-kind contribution description CAMPAIGN POLLING</p>
	<p>Contributor address; City; State; Zip Code AUSTIN, TX 78701</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				

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: 1/8 Rpt: 14/21	2 FILER NAME Bell Jr., Cecil I. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067547
4 Date 01/08/2026	5 Payee name AUSTIN CLUB	
6 Amount (\$) \$235.00	7 Payee address; City; State; Zip Code 110 EAST 9TH STREET AUSTIN, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DUES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/05/2026	Payee name AXIOM STRATEGIES	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY , MO 64112	
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 MCRW NEWSLETTER AD
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/19/2026	Payee name AXIOM STRATEGIES	
Amount (\$) \$11,917.00	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY , MO 64112	
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 DIRECT MAIL
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: 2/8 Rpt: 15/21	2 FILER NAME Bell Jr., Cecil I. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067547
4 Date 01/19/2026	5 Payee name AXIOM STRATEGIES	
6 Amount (\$) \$14,641.00	7 Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY , MO 64112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DIRECT MAILER
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/19/2026	Payee name AXIOM STRATEGIES	
Amount (\$) \$11,917.00	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY , MO 64112	
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 DIRECT MAILER ENDORSEMENT
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/17/2026	Payee name AXIOM STRATEGIES	
Amount (\$) \$14,641.00	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY , MO 64112	
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 DIRECT MAIL
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: 3/8 Rpt: 16/21	2 FILER NAME Bell Jr., Cecil I. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067547
4 Date 01/17/2026	5 Payee name AXIOM STRATEGIES	
6 Amount (\$) \$1,820.00	7 Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY , MO 64112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PALMCARDS
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/17/2026	Payee name AXIOM STRATEGIES	
Amount (\$) \$14,100.00	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY , MO 64112	
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
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/17/2026	Payee name AXIOM STRATEGIES	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY , MO 64112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SUBSCRIPTION
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: 4/8 Rpt: 17/21	2 FILER NAME Bell Jr., Cecil I. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067547
4 Date 01/21/2026	5 Payee name AXIOM STRATEGIES	
6 Amount (\$) \$9,975.00	7 Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY , MO 64112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEDIA
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/22/2026	Payee name AXIOM STRATEGIES	
Amount (\$) \$14,641.00	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY , MO 64112	
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 DIRECT MAILER
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/05/2026	Payee name CHALLENGER PG LLC	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code P.O. BOX 1184 EDWARDS, CO 81632	
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
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: 5/8 Rpt: 18/21	2 FILER NAME Bell Jr., Cecil I. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067547
4 Date 01/02/2026	5 Payee name CITY OF AUSTIN	
6 Amount (\$) \$75.61	7 Payee address; City; State; Zip Code P.O. BOX 2267 AUSTIN, TX 78783	
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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense AUSTIN APT UTILITIES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/05/2026	Payee name FeedStor LLC	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 15619 Pebble Bend Dr Houston, TX 77068	
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 DIGITAL CONSULT
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/10/2026	Payee name FeedStor LLC	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 15619 Pebble Bend Dr Houston, TX 77068	
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 DIGITAL CONSULT
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: 6/8 Rpt: 19/21	2 FILER NAME Bell Jr., Cecil I. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067547
4 Date 01/06/2026	5 Payee name MCRW	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code P.O. BOX 1766 CONROE, TX 77305	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense NEWSLETTER AD
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/19/2026	Payee name REMINGTON RESEARCH GROUP	
Amount (\$) \$8,594.64	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY , MO 64112	
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 VOTER OUTREACH
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/02/2026	Payee name RESIDENTS AT THE TRIANGLE	
Amount (\$) \$2,446.88	Payee address; City; State; Zip Code 4600 W. GUADALUPE STREET AUSTIN, TX 78751	
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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense AUSTIN APT RENT
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: 7/8 Rpt: 20/21	2 FILER NAME Bell Jr., Cecil I. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067547
4 Date 01/08/2026	5 Payee name SOUTHWEST MONTGOMERY COUNTY CHAMBER OF COMMERCE	
6 Amount (\$) \$600.00	7 Payee address; City; State; Zip Code 18423 FM 1488 SUITE C MAGNOLIA, TX 77355	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEMBERSHIP DUES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/21/2026	Payee name SPECTRUM	
Amount (\$) \$334.15	Payee address; City; State; Zip Code P.O. BOX 60074 CITY OF INDUSTRY, CA 91716-0074	
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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense AUSTIN APT CABLE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/09/2026	Payee name Signs of Magnolia	
Amount (\$) \$4,405.83	Payee address; City; State; Zip Code P.O Box 613 Magnolia, TX 77353	
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 YARD SIGNS
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/8 Rpt: 21/21	2 FILER NAME Bell Jr., Cecil I. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067547
4 Date 01/15/2026	5 Payee name TEXAS HOUSE OF REPRESENTATIVES	
6 Amount (\$) \$1,050.00	7 Payee address; City; State; Zip Code P.O. BOX 12910 AUSTIN, TX 78711	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DIGITAL MEDIA
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/19/2026	Payee name THE POLITICAL FIRM	
Amount (\$) \$4,200.00	Payee address; City; State; Zip Code 5555 HILTON AVE STE 203 BATON ROUGE, LA 70808	
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 AD CREATION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/19/2026	Payee name VERIZON WIRELESS	
Amount (\$) \$88.11	Payee address; City; State; Zip Code P.O. BOX 489 NEWARK, NJ 07101-0489	
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 CAMPAIGN PHONE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held