

**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) 00080883	2 Total pages filed: 16		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST The Honorable Armin	MI	<b>OFFICE USE ONLY</b>		
	NICKNAME	LAST Mizani	SUFFIX	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 678  Keller, TX 76244			Date Hand-delivered or Date Postmarked		
				Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST The Honorable Armin	MI			
	NICKNAME	LAST Mizani	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); P.O. Box 678  Keller, TX 76244		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION (817) 366-3696					
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 Day Year 03/03/2026		<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) Place Mayor District Keller Tarrant			12 OFFICE SOUGHT (if known) State Representative District 98		

**GO TO PAGE 2**

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

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

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13 C / OH NAME	Mizani, Armin (The Honorable)		14 Filer ID (Ethics Commission Filers) 00080883
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 type="checkbox"/> Additional Pages	COMMITTEE TYPE <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME TTLA PAC	
		COMMITTEE ADDRESS 1220 Colorado	
		Austin, TX 78701	
		COMMITTEE CAMPAIGN TREASURER NAME Tamez, Laura	
		COMMITTEE CAMPAIGN TREASURER ADDRESS 1220 Colorado	
		Austin, TX 78701	
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 279,604.50
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>		\$ 182,450.68
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 669,471.36
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 200,000.00

**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 Armin Mizani

\_\_\_\_\_  
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

## **SUBTOTALS - C/OH**

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

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<b>18 FILER NAME</b> Mizani, Armin (The Honorable)		<b>19 Filer ID</b> (Ethics Commission Filers) 00080883
<b>20 SCHEDULE SUBTOTALS</b>		
NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 279,604.50
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 E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 182,450.68
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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/8 Rpt: 4/16
<b>2</b> FILER NAME Mizani, Armin (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00080883
<b>4</b> Date 01/22/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adler, Jim ..... <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77027	<b>7</b> Amount of Contribution (\$) \$5,000.00
	<b>8</b> Principal occupation / Job title (See Instructions) Attorney	<b>9</b> Employer (See Instructions) Self
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adler, William Scott ..... Contributor address; City; State; Zip Code  Houston, TX 77007	Amount of Contribution (\$) \$5,000.00
	Principal occupation / Job title (See Instructions) Attorney	Employer (See Instructions) Self
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Mark ..... Contributor address; City; State; Zip Code  Fort Worth, TX 76107	Amount of Contribution (\$) \$5,000.00
	Principal occupation / Job title (See Instructions) Attorney	Employer (See Instructions) Self
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Montgomery ..... Contributor address; City; State; Zip Code  Dallas, TX 75254	Amount of Contribution (\$) \$2,500.00
	Principal occupation / Job title (See Instructions) CEO	Employer (See Instructions) Ashford, Inc.
Date 01/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blankenship, William ..... Contributor address; City; State; Zip Code  Dallas, TX 75219	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions) Attorney	Employer (See Instructions) Blankenship Law Firm

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/8 Rpt: 5/16
<b>2</b> FILER NAME Mizani, Armin (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00080883
<b>4</b> Date 01/10/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boghani, Aly	<b>7</b> Amount of Contribution (\$) \$750.00
	<b>6</b> Contributor address; City; State; Zip Code  Lewisville, TX 75056	
<b>8</b> Principal occupation / Job title (See Instructions) consultant business		<b>9</b> Employer (See Instructions) self employed
Date 01/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boghani, Aly	Amount of Contribution (\$) \$750.00
	Contributor address; City; State; Zip Code  Lewisville, TX 75056	
Principal occupation / Job title (See Instructions) consultant business		Employer (See Instructions) self employed
Date 01/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brennan, Karen	Amount of Contribution (\$) \$104.48
	Contributor address; City; State; Zip Code  Keller, TX 76248	
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#: _____) Carr, Steve	Amount of Contribution (\$) \$10.73
	Contributor address; City; State; Zip Code  Keller, TX 76248	
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#: _____) Crenshaw, Cory	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code  Beaumont, TX 77706	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Crenshaw Law Firm

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/8 Rpt: 6/16
<b>2</b> FILER NAME Mizani, Armin (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00080883
<b>4</b> Date 01/22/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daly & Black PC .....  <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77098	<b>7</b> Amount of Contribution (\$) \$5,000.00
	<b>8</b> Principal occupation / Job title (See Instructions) retired	
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodson, George .....  Contributor address; City; State; Zip Code  Colleyville, TX 76034	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) retired	
Date 01/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duffy, Colin .....  Contributor address; City; State; Zip Code  Bedford, TX 76021	Amount of Contribution (\$) \$104.48
	Principal occupation / Job title (See Instructions) Attorney	
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn Sheehan .....  Contributor address; City; State; Zip Code  Dallas, TX 75205	Amount of Contribution (\$) \$3,000.00
	Principal occupation / Job title (See Instructions)	
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards & De La Cerdia PLLC .....  Contributor address; City; State; Zip Code  Dallas, TX 75247	Amount of Contribution (\$) \$3,000.00
	Principal occupation / Job title (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/8 Rpt: 7/16
<b>2</b> FILER NAME Mizani, Armin (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00080883
<b>4</b> Date 01/19/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Kevin	<b>7</b> Amount of Contribution (\$) \$104.48
	<b>6</b> Contributor address; City; State; Zip Code  Keller, TX 76248	
<b>8</b> Principal occupation / Job title (See Instructions) Software Engineer		<b>9</b> Employer (See Instructions) Persommony
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fink, Brittainy	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Keller, TX 76248	
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#: _____) Freese & Goss PLLC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Dallas, TX 75219	
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#: _____) Grone, Brock	Amount of Contribution (\$) \$21.15
	Contributor address; City; State; Zip Code  Dallas, TX 75206	
Principal occupation / Job title (See Instructions) director		Employer (See Instructions) Lucas Funeral Home
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ha, Trung	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code  Irving, TX 75062	
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Quantum Pain Spine Injury Physicians

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/8 Rpt: 8/16
<b>2</b> FILER NAME Mizani, Armin (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00080883
<b>4</b> Date 01/14/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hein, Ashley ..... <b>6</b> Contributor address; City; State; Zip Code  Keller, TX 76262	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 01/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horn, Tom ..... Contributor address; City; State; Zip Code  Keller, TX 76248	Amount of Contribution (\$) \$52.40
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#: _____) Justice for Texas Victims Pac ..... Contributor address; City; State; Zip Code  Dallas, TX 75201	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lessner, John ..... Contributor address; City; State; Zip Code  Grapevine, TX 76051	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self
Date 01/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormack, David ..... Contributor address; City; State; Zip Code  Keller, TX 76248	Amount of Contribution (\$) \$26.35
Principal occupation / Job title (See Instructions) Dispatcher		Employer (See Instructions) Texas Time Express

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/8 Rpt: 9/16
<b>2</b> FILER NAME Mizani, Armin (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00080883
<b>4</b> Date 01/17/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKenny, Elizabeth ..... <b>6</b> Contributor address; City; State; Zip Code  Southlake, TX 76092	<b>7</b> Amount of Contribution (\$) \$104.48
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Matt ..... Contributor address; City; State; Zip Code  Dallas, TX 75214	Amount of Contribution (\$) \$521.15
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Matt Montgomery Law P.C.
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Joseph ..... Contributor address; City; State; Zip Code  Dallas, TX 75207	Amount of Contribution (\$) \$7,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Mullen & Mullen
Date 01/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mullen, Shane ..... Contributor address; City; State; Zip Code  Dallas, TX 75205	Amount of Contribution (\$) \$18,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Mullen & Mullen
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peabody, Susan ..... Contributor address; City; State; Zip Code  Grapevine, TX 76051	Amount of Contribution (\$) \$52.40
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/8 Rpt: 10/16
<b>2</b> FILER NAME Mizani, Armin (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00080883
<b>4</b> Date 01/19/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Mika	<b>7</b> Amount of Contribution (\$) \$104.48
	<b>6</b> Contributor address; City; State; Zip Code  Southlake, TX 76092	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Billy	Amount of Contribution (\$) \$104.48
	Contributor address; City; State; Zip Code  Keller, TX 76248	
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#: _____) Segal, Lori	Amount of Contribution (\$) \$52.40
	Contributor address; City; State; Zip Code  Southlake, TX 76092	
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#: _____) Shea, Barbara	Amount of Contribution (\$) \$104.48
	Contributor address; City; State; Zip Code  Colleyville, TX 76034	
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#: _____) Taggart, Christina	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Southlake, LA 76092	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

## MONETARY POLITICAL CONTRIBUTIONS

## **SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/8 Rpt: 11/16
<b>2</b> FILER NAME Mizani, Armin (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00080883
<b>4</b> Date 01/20/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Truth and Liberty ..... <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701	<b>7</b> Amount of Contribution (\$) \$200,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Orsdol, Gina ..... Contributor address; City; State; Zip Code  Keller, TX 76248	Amount of Contribution (\$) \$31.56
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#: _____) Williams & Cannon PLLC ..... Contributor address; City; State; Zip Code  Dallas, TX 75251	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jeff ..... Contributor address; City; State; Zip Code  Keller, TX 76248	Amount of Contribution (\$) \$26.35
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mcbrayer, greg ..... Contributor address; City; State; Zip Code  fort worth, TX 76244	Amount of Contribution (\$) \$208.65
Principal occupation / Job title (See Instructions) Chief Flight Controller/Chaplain		Employer (See Instructions) American Airlines

# 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: 1/5 Rpt: 12/16	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883
4 Date 01/12/2026	5 Payee name 7-Eleven	
6 Amount (\$) \$60.37	7 Payee address; City; State; Zip Code 1600 W Southlake Blvd  Southlake, TX 76092	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Transportation related expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/14/2026	Payee name Anedot	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 3723 Greenville Ave. Suite 41002 Dallas, TX 75206	
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 Donation Platform
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/22/2026	Payee name Anedot	
Amount (\$) \$553.70	Payee address; City; State; Zip Code 3723 Greenville Ave. Suite 41002 Dallas, TX 75206	
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 Donor Platform 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: 2/5 Rpt: 13/16	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883
4 Date 01/09/2026	5 Payee name Chevron	
6 Amount (\$) \$55.90	7 Payee address; City; State; Zip Code 101 TX-114  Grapevine, TX 76051	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Transportation related expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/05/2026	Payee name Ellis, Ethan	
Amount (\$) \$500.00	Payee address; City; State; Zip Code  REDACTED PER 254.0401, ELEC. CODE  Cypress, TX 77433	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salaries/Wages
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/05/2026	Payee name Griffin Communications	
Amount (\$) \$13,949.04	Payee address; City; State; Zip Code 176 Venice Cv  Austin, TX 78737	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

**The Instruction Guide explains how to complete this form.**

1 Total pages Schedule F1: Sch: 3/5 Rpt: 14/16	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883
4 Date 01/06/2026	5 Payee name Griffin Communications	
6 Amount (\$) \$71,601.67	7 Payee address; City; State; Zip Code 176 Venice Cv  Austin, TX 78737	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/20/2026	Payee name Griffin Communications	
Amount (\$) \$82,730.00	Payee address; City; State; Zip Code 176 Venice Cv  Austin, TX 78737	
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 Consultant
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/02/2026	Payee name Install Connect, Inc.	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 505 W STATE ST.  Garland, TX 75040	
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 Signs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/5 Rpt: 15/16	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883
4 Date 01/05/2026	5 Payee name Mitta, Suk	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code  REDACTED PER 254.0401, ELEC. CODE  Frisco, TX 75035	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense salaries/wages
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/05/2026	Payee name Morse, Cooper	
Amount (\$) \$3,500.00	Payee address; City; State; Zip Code  REDACTED PER 254.0401, ELEC. CODE  Fort Worth, TX 76116	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salaries/Wages
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 01/05/2026	Payee name Vargas, Charles	
Amount (\$) \$1,250.00	Payee address; City; State; Zip Code  REDACTED PER 254.0401, ELEC. CODE  Fort Worth, TX 76107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salaries/Wages
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: 5/5 Rpt: 16/16	2 FILER NAME Mizani, Armin (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080883	
4 Date 01/05/2026	5 Payee name Wenske, John		
6 Amount (\$) \$5,500.00	7 Payee address; City; State; Zip Code  REDACTED PER 254.0401, ELEC. CODE  Moulton, TX 77975		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense salaries/wages	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held