

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) 00086265	2 Total pages filed: 13	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Robert David	MI MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 02/23/2026
	NICKNAME Bob	LAST Mitchell	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 2404 Golf Crest Dr. Pearland, TX 77581			Date Hand-delivered or Date Postmarked
				Receipt # Amount
				Date Processed
				Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST David P.	MI MI	
	NICKNAME	LAST Martin	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 5811 Blackstone Cr. Kingwood, TX 77345			
7 CAMPAIGN TREASURER PHONE	AREA CODE (713)	PHONE NUMBER 825-8672	EXTENSION	
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input checked="" 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 Day Year 01/23/2026	THROUGH		Month Day Year 02/21/2026
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) State Representative District 129	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

2 of 13

13 C / OH NAME Mitchell, Robert David (Mr.)	14 Filer ID (Ethics Commission Filers) 00086265
--	---

15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.									
<table border="1" style="width:100%"> <tr> <td style="width:25%">COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>	COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS		
	COMMITTEE TYPE	COMMITTEE NAME								
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS								
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME								
	COMMITTEE CAMPAIGN TREASURER ADDRESS									

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 102,869.63
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 27.93
	4. TOTAL POLITICAL EXPENDITURES	\$ 24,948.36
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 8,387.44
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 50,000.00

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.

 Mr. Robert David Mitchell
 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**

3 of 13

18 FILER NAME Mitchell, Robert David (Mr.)		19 Filer ID (Ethics Commission Filers) 00086265
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 16,675.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 86,194.63
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	\$ 24,948.36
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: 1/4 Rpt: 4/13
2 FILER NAME Mitchell, Robert David (Mr.)		3 Filer ID (Ethics Commission Filers) 00086265
4 Date 01/28/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benton, Levi	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Houston, TX 77002		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conservative Citizens' Club PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Houston, TX 77059		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Decardenas, Eva	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Seabrook, TX 77586		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorman, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Houston, TX 77062		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freedman, Glenn	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Friendswood, TX 77546		
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: 2/4 Rpt: 5/13
2 FILER NAME Mitchell, Robert David (Mr.)		3 Filer ID (Ethics Commission Filers) 00086265
4 Date 02/17/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregg Jr., Dick <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77062	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Harvey <hr/> Contributor address; City; State; Zip Code Houston, TX 77058	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HillCo PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston Police Officers Union PAC <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ILA Local 24 Political Action Fund <hr/> Contributor address; City; State; Zip Code Houston, TX 77012	Amount of Contribution (\$) \$1,500.00
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: 3/4 Rpt: 6/13
2 FILER NAME Mitchell, Robert David (Mr.)		3 Filer ID (Ethics Commission Filers) 00086265
4 Date 02/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Stephen <hr/> 6 Contributor address; City; State; Zip Code League, TX 77573	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Yvette <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/01/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kempf, Mike <hr/> Contributor address; City; State; Zip Code Houston, TX 77059	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendrick Jr., Marshall <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77504	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manufacturers PAC of Texas <hr/> Contributor address; City; State; Zip Code Austin, TX 78711	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: 4/4 Rpt: 7/13
2 FILER NAME Mitchell, Robert David (Mr.)		3 Filer ID (Ethics Commission Filers) 00086265
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAC of the Texas Hospital Assn	7 Amount of Contribution (\$) \$3,000.00
6 Contributor address; City; State; Zip Code Austin, TX 78701		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teegarden, Rhonda	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Seabrook, TX 77586		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Sands PAC	Amount of Contribution (\$) \$4,000.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warner Jr., Frederic	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Houston, TX 77019		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Wayne	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Houston, TX 77059		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/3 Rpt: 8/13	
2 FILER NAME Mitchell, Robert David (Mr.)		3 Filer ID (Ethics Commission Filers) 00086265	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 01/26/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Associated Republicans of Texas Campaign Fund	8 Amount of contribution (\$) \$8,000.00	9 In-kind contribution description Campaign Mailer
7 Contributor address; City; State; Zip Code Austin, TX 78701		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Associated Republicans of Texas Campaign Fund	Amount of contribution (\$) \$10,500.00	In-kind contribution description Digital Advertising
Contributor address; City; State; Zip Code Austin, TX 78701		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Associated Republicans of Texas Campaign Fund	Amount of contribution (\$) \$16,194.35	In-kind contribution description Campaign Mailer
Contributor address; City; State; Zip Code Austin, TX 78701		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/3 Rpt: 9/13	
2 FILER NAME Mitchell, Robert David (Mr.)		3 Filer ID (Ethics Commission Filers) 00086265	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/12/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Associated Republicans of Texas Campaign Fund	8 Amount of contribution (\$) \$14,638.59	9 In-kind contribution description Campaign Mailer
	7 Contributor address; City; State; Zip Code Austin, TX 78701	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Associated Republicans of Texas Campaign Fund	Amount of contribution (\$) \$14,638.60	In-kind contribution description Campaign Mailer
	Contributor address; City; State; Zip Code Austin, TX 78701	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Associated Republicans of Texas Campaign Fund	Amount of contribution (\$) \$4,000.00	In-kind contribution description Campaign Mailer
	Contributor address; City; State; Zip Code Austin, TX 78701	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 3/3 Rpt: 10/13	
2 FILER NAME Mitchell, Robert David (Mr.)		3 Filer ID (Ethics Commission Filers) 00086265	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/12/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Associated Republicans of Texas Campaign Fund	8 Amount of contribution (\$) \$2,723.09	9 In-kind contribution description Text Messages
	7 Contributor address; City; State; Zip Code Austin, TX 78701	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston Region Business Coalition	Amount of contribution (\$) \$15,500.00	In-kind contribution description Polling Expense
	Contributor address; City; State; Zip Code Bellaire, TX 77401	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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: 1/3 Rpt: 11/13	2 FILER NAME Mitchell, Robert David (Mr.)	3 Filer ID (Ethics Commission Filers) 00086265
4 Date 01/23/2026	5 Payee name Catalyst Advisors Group	
6 Amount (\$) \$1,082.50	7 Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701	
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 Grassroots Advertising Expense - Reported on Prior Sch F2
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/23/2026	Payee name Catalyst Advisors Group	
Amount (\$) \$1,082.50	Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Grassroots Advertising Expense - Reported on Prior Sch F2
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/23/2026	Payee name Catalyst Advisors Group	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(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 Design and Placement of Digital Campaign Advertisements - Reported on Prior Sch F2
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: 2/3 Rpt: 12/13	2 FILER NAME Mitchell, Robert David (Mr.)	3 Filer ID (Ethics Commission Filers) 00086265
4 Date 01/23/2026	5 Payee name Catalyst Advisors Group	
6 Amount (\$) \$4,750.82	7 Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701	
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 Design and Production of Campaign Signs - Reported on Prior Sch F2
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/13/2026	Payee name Catalyst Advisors Group	
Amount (\$) \$1,082.50	Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Grassroots Advertising Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/27/2026	Payee name Catalyst Advisors Group	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting Fee
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: 3/3 Rpt: 13/13	2 FILER NAME Mitchell, Robert David (Mr.)	3 Filer ID (Ethics Commission Filers) 00086265
--	---	--

4 Date 02/17/2026	5 Payee name Catalyst Advisors Group
-----------------------------	--

6 Amount (\$) \$10,581.12	7 Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701
-------------------------------------	---

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 Design, Data, Postage and Production of Campaign Mail Advertisements
---------------------------------	--	--

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 02/03/2026	Payee name Minuteman Press
--------------------	-------------------------------

Amount (\$) \$340.99	Payee address; City; State; Zip Code 1040 Hercules Ave Houston, TX 77058
-------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Printing Expense for Campaign Materials
-------------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

--	--	--	--