

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

12 COMMITTEE NAME Hammer & Nails PAC	13 Filer ID (Ethics Commission Filers) 00015566
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 10,525.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 24,259.20
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 28,426.15
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

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

Robert M. Madeja

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - MPAC

17 COMMITTEE NAME Hammer & Nails PAC		18 Filer ID (Ethics Commission Filers) 00015566
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 10,525.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 24,259.20
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<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: 1/6 Rpt: 4/16
2 FILER NAME Hammer & Nails PAC		3 Filer ID (Ethics Commission Filers) 00015566
4 Date 01/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Don <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76016	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Developer		9 Employer (See Instructions) Aberdeen Land Company
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Block, Marc <hr/> Contributor address; City; State; Zip Code Argyle, TX 76226	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Starpower
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bush Rudnicki Shelton PC <hr/> Contributor address; City; State; Zip Code Arlington, TX 76011	Amount of Contribution (\$) \$900.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CMG Home Loans <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clegg, Travis <hr/> Contributor address; City; State; Zip Code Keller, TX 76244	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) Westwood Professional Services

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/6 Rpt: 5/16
2 FILER NAME Hammer & Nails PAC		3 Filer ID (Ethics Commission Filers) 00015566
4 Date 01/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conner, Ross	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Aledo, TX 76008	
8 Principal occupation / Job title (See Instructions) Insurance and Bonding Agent		9 Employer (See Instructions) Hotchkiss Insurance
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copeland, Reid	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76123	
Principal occupation / Job title (See Instructions) Sales Executive		Employer (See Instructions) Fidelity National Title
Date 01/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) First National Bank	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76102	
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#: _____) Garabedian, Michael	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Southlake, TX 76092	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Garabedian Properties
Date 01/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haydocy, Joe	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Carrollton, TX 75010	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) DDH JV

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/6 Rpt: 6/16
2 FILER NAME Hammer & Nails PAC		3 Filer ID (Ethics Commission Filers) 00015566
4 Date 01/08/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Highland Homes	7 Amount of Contribution (\$) \$300.00
	6 Contributor address; City; State; Zip Code Plano, TX 75024	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JetStream Outdoor Cooling	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Hurst, TX 76053	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kessler, Diane	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76114	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) DMK Properties LLC
Date 01/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight Propane	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Weatherford, TX 76088	
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#: _____) Maverick Warranties & Insurance	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76179	
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: 4/6 Rpt: 7/16
2 FILER NAME Hammer & Nails PAC		3 Filer ID (Ethics Commission Filers) 00015566
4 Date 01/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merge Windows and Doors <hr/> 6 Contributor address; City; State; Zip Code Mansfield, TX 76063	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael, Preetham <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Alvertic
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicoloff, Dan <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75028	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Engel & Volkers
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Odom, Scott <hr/> Contributor address; City; State; Zip Code Arlington, TX 76017	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sale		Employer (See Instructions) Acme Brick
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pella Windows & Doors <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$300.00
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: 5/6 Rpt: 8/16
2 FILER NAME Hammer & Nails PAC		3 Filer ID (Ethics Commission Filers) 00015566
4 Date 01/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Brian	7 Amount of Contribution (\$) \$75.00
6 Contributor address; City; State; Zip Code Keller, TX 76244		
8 Principal occupation / Job title (See Instructions) Service Manager		9 Employer (See Instructions) Southwest Brick & Fireplace
Date 01/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Selman, Jennifer	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Fort Worth, TX 76108		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Tempo Inc
Date 01/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherwin-Williams Paint	Amount of Contribution (\$) \$975.00
Contributor address; City; State; Zip Code Garland, TX 75041		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) State Farm	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code Fort Worth, TX 76131		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart Title	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Southlake, TX 76092		
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: 6/6 Rpt: 9/16
2 FILER NAME Hammer & Nails PAC		3 Filer ID (Ethics Commission Filers) 00015566
4 Date 01/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toll Brothers	7 Amount of Contribution (\$) \$600.00
6 Contributor address; City; State; Zip Code Grapevine, TX 76051		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waggoner, Justin	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Frisco, TX 75034		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) iFOAM
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Joe	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Fort Worth, TX 76108		
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) Edward Jones
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Morgan	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code North Richland Hills, TX 76182		
Principal occupation / Job title (See Instructions) Sales Associate		Employer (See Instructions) J&J Custom Curbing
Date 01/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westwood Professional Services	Amount of Contribution (\$) \$600.00
Contributor address; City; State; Zip Code Fort Worth, TX 76102		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 10/16

2 FILER NAME
Hammer & Nails PAC

3 Filer ID (Ethics Commission Filers)
00015566

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 11/16
2 FILER NAME Hammer & Nails PAC		3 Filer ID (Ethics Commission Filers) 00015566
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

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: 1/5 Rpt: 12/16	2 FILER NAME Hammer & Nails PAC	3 Filer ID (Ethics Commission Filers) 00015566
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4 Date 01/20/2026	5 Payee name Bean, Cheryl
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6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5148 E Vickery Loop Benbrook, TX 76116
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/20/2026	Payee name Bhojani, Salmon
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6301 Campus Circle Dr. E. #100 Irving, TX 75063
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/20/2026	Payee name Blaylock, Alan
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4801 Cargill Cir. Fort Worth, TX 76244
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 2/5 Rpt: 13/16	2 FILER NAME Hammer & Nails PAC	3 Filer ID (Ethics Commission Filers) 00015566
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4 Date 01/15/2026	5 Payee name Chicken N Pickle
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6 Amount (\$) \$12,750.30 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 107 E 18th Ave. North Kansas City, MO 64116
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Event Space
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/20/2026	Payee name Collier, Nicole
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 101 S. Jennings #103C Fort Worth, TX 76104
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/20/2026	Payee name Cook , David
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 309 E Broad St. Mansfield, TX 76063
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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 Hammer & Nails PAC	3 Filer ID (Ethics Commission Filers) 00015566
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4 Date 01/20/2026	5 Payee name Fleischmann, Ellen
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6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3540 E Broad St. 120-249 Mansfield, TX 76063
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/20/2026	Payee name Geren, Charlie
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1440 Fort Worth, TX 76101
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/20/2026	Payee name Kerwin, Helen
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 420 Grand Ave., Unit B Glen Rose, TX 76043
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 4/5 Rpt: 15/16	2 FILER NAME Hammer & Nails PAC	3 Filer ID (Ethics Commission Filers) 00015566
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4 Date 01/20/2026	5 Payee name McQueeney, John
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6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 100458 Fort Worth, TX 76185
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/20/2026	Payee name Mizani, Armin
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 678 Keller, TX 76244
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/20/2026	Payee name Morris, Kyle
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 9121 Belshire Dr. #200 North Richland Hills, TX 76182
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 5/5 Rpt: 16/16	2 FILER NAME Hammer & Nails PAC	3 Filer ID (Ethics Commission Filers) 00015566
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4 Date 01/20/2026	5 Payee name Romero, Ramon
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6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 181 Fort Worth, TX 76101
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/20/2026	Payee name Slawson, Shelby
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 286 Stephenville, TX 76401
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/06/2026	Payee name SquareUp.com
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Amount (\$) \$8.90 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market St San Francisco, CA 94103
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchant Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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