

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) 00084054	2 Total pages filed: 19		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Jon P.	MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 02/22/2026	
	NICKNAME	LAST Bouche	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 7127 Silverleaf Oak Street Conroe , TX 77304		ZIP CODE	Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
	MS / MRS / MR Mr.		FIRST Kenneth	MI	
	NICKNAME	LAST Earnest	SUFFIX		
	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 11 Marquise Oaks Place The Woodlands, TX 77382				
7 CAMPAIGN TREASURER PHONE	AREA CODE (281)	PHONE NUMBER 435-6658	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) Lone Star Groundwater Conservation District Place 6 Montgomery		12 OFFICE SOUGHT (if known) State Representative District 16		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Bouche, Jon P. (Mr.)	14 Filer ID (Ethics Commission Filers) 00084054
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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.		
<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		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)	\$	52,767.61
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	78,171.95
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	21,084.22
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

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. Jon P. Bouche

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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18 FILER NAME Bouche, Jon P. (Mr.)		19 Filer ID (Ethics Commission Filers) 00084054
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 51,177.21
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,590.40
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	\$ 78,171.95
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: 1/5 Rpt: 4/19
2 FILER NAME Bouche, Jon P. (Mr.)		3 Filer ID (Ethics Commission Filers) 00084054
4 Date 02/12/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Ray (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Conroe, TX 77304	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bagley, Bob (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Conroe, TX 77385	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bevers, Charles (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Montgomery, TX 77356	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Church, Graham (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Conroe, TX 77384	
Principal occupation / Job title (See Instructions) Railroad Conductor		Employer (See Instructions) BNSF
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Councill, Randy (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Montgomery, TX 77318	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Waterworks Utilities

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/5 Rpt: 5/19
2 FILER NAME Bouche, Jon P. (Mr.)		3 Filer ID (Ethics Commission Filers) 00084054
4 Date 01/28/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Earnest, Kenneth (Mr.)	7 Amount of Contribution (\$) \$520.51
6 Contributor address; City; State; Zip Code The Woodlands, TX 77382		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fessenden, Dale (Mr.)	Amount of Contribution (\$) \$26.03
Contributor address; City; State; Zip Code Conroe, TX 77303		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadley, Diane (Mrs.)	Amount of Contribution (\$) \$104.10
Contributor address; City; State; Zip Code Montgomery, TX 77356		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Pfizer
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Elvira (Mrs.)	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code Richmond, TX 77406		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larson, Ray (Mr.)	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code The Woodlands, TX 77389		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) EXP Realty

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/5 Rpt: 6/19
2 FILER NAME Bouche, Jon P. (Mr.)		3 Filer ID (Ethics Commission Filers) 00084054
4 Date 02/11/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Gary (Mr.)	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Montgomery, TX 77356	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Locetta, Cathie (Mrs.)	Amount of Contribution (\$) \$52.05
	Contributor address; City; State; Zip Code Spring, TX 77382	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarty, Fred (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Grapevine, TX 76051	
Principal occupation / Job title (See Instructions) RE		Employer (See Instructions) self
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newman, Dale (Mr.)	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Montgomery, TX 77316	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reiser, Bruce (Mr.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Spring, TX 77381	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/5 Rpt: 7/19
2 FILER NAME Bouche, Jon P. (Mr.)		3 Filer ID (Ethics Commission Filers) 00084054
4 Date 01/27/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shurts, Wayne (Mr.) 6 Contributor address; City; State; Zip Code West Montgomery, TX 77356	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shurts, Wayne (Mr.) Contributor address; City; State; Zip Code West Montgomery, TX 77356	Amount of Contribution (\$) \$104.10
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stegeman, Linda (Mrs.) Contributor address; City; State; Zip Code Montgomery, TX 77356	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teague, Kenneth (Mr.) Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$260.25
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) ExxonMobil
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas United for a Conservative Majority PAC Contributor address; City; State; Zip Code Victoria, TX 77801	Amount of Contribution (\$) \$25,000.00
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: 5/5 Rpt: 8/19
2 FILER NAME Bouche, Jon P. (Mr.)		3 Filer ID (Ethics Commission Filers) 00084054
4 Date 01/23/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thaeler, John (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Spring, TX 77381	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wesley, Phoebe (Mrs.)	Amount of Contribution (\$) \$20.82
	Contributor address; City; State; Zip Code New Caney, TX 77353	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Herschel (Mr.)	Amount of Contribution (\$) \$52.05
	Contributor address; City; State; Zip Code Montgomery, TX 77356	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 9/19	
2 FILER NAME Bouche, Jon P. (Mr.)		3 Filer ID (Ethics Commission Filers) 00084054	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 01/31/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reiser, Bruce (Mr.)	8 Amount of contribution (\$) \$1,590.40	9 In-kind contribution description Texting campaign
	7 Contributor address; City; State; Zip Code Spring, TX 77381	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		11 Employer (FOR NON-JUDICIAL) (See instructions) Retired	
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)			

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 -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/10 Rpt: 10/19	2 FILER NAME Bouche, Jon P. (Mr.)	3 Filer ID (Ethics Commission Filers) 00084054
4 Date 01/27/2026	5 Payee name CAZ Consulting	
6 Amount (\$) \$1,788.30	7 Payee address; City; State; Zip Code 7720 Laura Lake Ln Ft Worth, TX 76126	
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 Texting Campaign
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2026	Payee name CAZ Consulting	
Amount (\$) \$6,320.00	Payee address; City; State; Zip Code 7720 Laura Lake Ln Ft Worth, TX 76126	
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 Print and mail campaign material
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/05/2026	Payee name CAZ Consulting	
Amount (\$) \$13,680.00	Payee address; City; State; Zip Code 7720 Laura Lake Ln Ft Worth, TX 76126	
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 Print and mail campaign material
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: 2/10 Rpt: 11/19	2 FILER NAME Bouche, Jon P. (Mr.)	3 Filer ID (Ethics Commission Filers) 00084054
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4 Date 02/05/2026	5 Payee name CAZ Consulting
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6 Amount (\$) \$1,511.90	7 Payee address; City; State; Zip Code 7720 Laura Lake Ln Ft Worth, TX 76126
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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 text campaign ad
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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 02/10/2026	Payee name CAZ Consulting
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Amount (\$) \$1,469.50	Payee address; City; State; Zip Code 7720 Laura Lake Ln Ft Worth, TX 76126
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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 Text campaign material
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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 02/10/2026	Payee name CAZ Consulting
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Amount (\$) \$1,441.80	Payee address; City; State; Zip Code 7720 Laura Lake Ln Ft Worth, TX 76126
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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 Text campaign material
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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: 3/10 Rpt: 12/19	2 FILER NAME Bouche, Jon P. (Mr.)	3 Filer ID (Ethics Commission Filers) 00084054
4 Date 02/11/2026	5 Payee name CAZ Consulting	
6 Amount (\$) \$13,680.00	7 Payee address; City; State; Zip Code 7720 Laura Lake Ln Ft Worth, TX 76126	
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 Print and mail campaign material
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/14/2026	Payee name CAZ Consulting	
Amount (\$) \$13,680.00	Payee address; City; State; Zip Code 7720 Laura Lake Ln Ft Worth, TX 76126	
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 Print and mail campaign material
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/14/2026	Payee name CAZ Consulting	
Amount (\$) \$1,419.60	Payee address; City; State; Zip Code 7720 Laura Lake Ln Ft Worth, TX 76126	
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 Text campaign material
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: 4/10 Rpt: 13/19	2 FILER NAME Bouche, Jon P. (Mr.)	3 Filer ID (Ethics Commission Filers) 00084054
4 Date 02/20/2026	5 Payee name CAZ Consulting	
6 Amount (\$) \$1,402.60	7 Payee address; City; State; Zip Code 7720 Laura Lake Ln Ft Worth, TX 76126	
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 Text campaign material
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2026	Payee name CAZ Consulting	
Amount (\$) \$2,174.80	Payee address; City; State; Zip Code 7720 Laura Lake Ln Ft Worth, TX 76126	
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 Text campaign material
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2026	Payee name CAZ Consulting	
Amount (\$) \$13,680.00	Payee address; City; State; Zip Code 7720 Laura Lake Ln Ft Worth, TX 76126	
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 Print and mail campaign material
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: 5/10 Rpt: 14/19	2 FILER NAME Bouche, Jon P. (Mr.)	3 Filer ID (Ethics Commission Filers) 00084054
4 Date 02/20/2026	5 Payee name CAZ Consulting	
6 Amount (\$) \$1,938.20	7 Payee address; City; State; Zip Code 7720 Laura Lake Ln Ft Worth, TX 76126	
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 Text Campaign material
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/21/2026	Payee name CAZ Consulting	
Amount (\$) \$1,169.80	Payee address; City; State; Zip Code 7720 Laura Lake Ln Ft Worth, TX 76126	
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 Text campaign material
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/06/2026	Payee name Cates Legal Group	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 20210 Silver Strm San Antonio, TX 78259	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PBR Legal 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
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: 6/10 Rpt: 15/19	2 FILER NAME Bouche, Jon P. (Mr.)	3 Filer ID (Ethics Commission Filers) 00084054
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4 Date 01/29/2026	5 Payee name First State Bank of Texas
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6 Amount (\$) \$15.00	7 Payee address; City; State; Zip Code 25700 I-45 North Suite 180 Spring, TX 77386
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment transfer Fee
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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 02/17/2026	Payee name Mailchimp
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Amount (\$) \$63.96	Payee address; City; State; Zip Code 405 N Angier Ave NE Atlanta, GA 30308
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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 email hosting
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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 02/20/2026	Payee name Texas GOP Store
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Amount (\$) \$1,594.27	Payee address; City; State; Zip Code 20230 Kings Camp Drive Katy, TX 77450
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard signs
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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: 7/10 Rpt: 16/19	2 FILER NAME Bouche, Jon P. (Mr.)	3 Filer ID (Ethics Commission Filers) 00084054
4 Date 02/10/2026	5 Payee name Webb's Custom Apparel	
6 Amount (\$) \$638.63	7 Payee address; City; State; Zip Code 25275 Budde Road, #1 Spring, TX 77380	
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 Campaign T shirts
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/27/2026	Payee name Win Red	
Amount (\$) \$1.03	Payee address; City; State; Zip Code 1776 Wilson Road Suite 530 Arlington, VA 22209	
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 Transaction Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/27/2026	Payee name Win Red	
Amount (\$) \$4.10	Payee address; City; State; Zip Code 1776 Wilson Road Suite 530 Arlington, VA 22209	
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 Transaction 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
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: 8/10 Rpt: 17/19	2 FILER NAME Bouche, Jon P. (Mr.)	3 Filer ID (Ethics Commission Filers) 00084054
4 Date 01/29/2026	5 Payee name Win Red	
6 Amount (\$) \$20.51	7 Payee address; City; State; Zip Code 1776 Wilson Road Suite 530 Arlington, VA 22209	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Transaction fee
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 Win Red	
Amount (\$) \$4.92	Payee address; City; State; Zip Code 1776 Wilson Road Suite 530 Arlington, VA 22209	
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 Transaction Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/09/2026	Payee name Win Red	
Amount (\$) \$2.05	Payee address; City; State; Zip Code 1776 Wilson Road Suite 530 Arlington, VA 22209	
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 Transaction Fee
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
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: 9/10 Rpt: 18/19	2 FILER NAME Bouche, Jon P. (Mr.)	3 Filer ID (Ethics Commission Filers) 00084054
4 Date 02/10/2026	5 Payee name Win Red	
6 Amount (\$) \$207.25	7 Payee address; City; State; Zip Code 1776 Wilson Road Suite 530 Arlington, VA 22209	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Transaction Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/16/2026	Payee name Win Red	
Amount (\$) \$4.10	Payee address; City; State; Zip Code 1776 Wilson Road Suite 530 Arlington, VA 22209	
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 Transaction Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/18/2026	Payee name Win Red	
Amount (\$) \$0.99	Payee address; City; State; Zip Code 1776 Wilson Road Suite 530 Arlington, VA 22209	
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 Transaction Fee
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
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: 10/10 Rpt: 19/19	2 FILER NAME Bouche, Jon P. (Mr.)	3 Filer ID (Ethics Commission Filers) 00084054
4 Date 02/10/2026	5 Payee name X Corp	
6 Amount (\$) \$8.64	7 Payee address; City; State; Zip Code 865 FM 1209 Building 2 Bastrop, TX 78602	
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 Social Media subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held