

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 30

13 C / OH NAME Hawkins, Kristen Brauchle (The Honorable) **14 Filer ID** (Ethics Commission Filers)
00080005

15 NOTICE FROM POLITICAL COMMITTEE(S)
This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

Additional Pages

| | |
|--|---|
| COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | 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) | \$ | 44,680.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ | 28.79 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 115,692.65 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 253,178.75 |
| 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.

The Honorable Kristen Brauchle Hawkins

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 oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - JC/OH

| | | | |
|---|--|--------------------------------|----------------------------|
| 18 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | | 19 Filer ID 00080005 | (Ethics Commission Filers) |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) | \$ | 44,680.00 |
| 2. | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ | |
| 3. | <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) | \$ | |
| 4. | <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL) | \$ | |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ | 115,692.65 |
| 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 checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ | 529.54 |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 1/16 Rpt: 4/30 |
| 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080005 |
| 4 Date 02/07/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abramowitz, Joel | 7 Amount of Contribution (\$) \$500.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77006-6469 | |
| 8 Contributor's Principal Occupation Retired | | 9 Contributor's Job Title Retired |
| 10 Contributor's employer/law firm Retired | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/01/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ammons, Rob | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77006-4624 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Ammons Law Firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/13/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Jordan | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78404-1603 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 2/16 Rpt: 5/30 |
| 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080005 |
| 4 Date 02/11/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aziz, Muhammad | 7 Amount of Contribution (\$) \$5,000.00 |
| 6 Contributor address; City; State; Zip Code Houston, TX 77002-1707 | | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Abraham Watkins Nichols Agosto Aziz & Stogner | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/10/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bettis, James | Amount of Contribution (\$) \$250.00 |
| Contributor address; City; State; Zip Code Houston, TX 77055-3406 | | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Munsch Hardt | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 01/29/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonham, Suzanna | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code Houston, TX 77002-2812 | | |
| Contributor's Principal Occupation Managing Partner | | Contributor's Job Title Managing Partner |
| Contributor's employer/law firm Seyfarth Shaw | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 3/16 Rpt: 6/30 |
| 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080005 |
| 4 Date 02/15/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyd, Samuel | 7 Amount of Contribution (\$) \$50.00 |
| | 6 Contributor address; City; State; Zip Code Dallas, TX 75206-4163 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Boyd & Associates | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/09/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brady, Mary | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Jamaica Plain, MA 02130-3401 | |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/06/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Terry | Amount of Contribution (\$) \$750.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77024-5637 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Terry Bryant | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 4/16 Rpt: 7/30 |
| 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080005 |
| 4 Date 01/29/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, Sherry <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77027-7335 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm The Chandler Law Firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/07/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dacey, Derin <hr/> Contributor address; City; State; Zip Code Houston, TX 77011-2822 | Amount of Contribution (\$) \$50.00 |
| Contributor's Principal Occupation Academic Advisor | | Contributor's Job Title Academic Advisor |
| Contributor's employer/law firm University of Houston | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/05/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daly & Black PC <hr/> Contributor address; City; State; Zip Code Houston, TX 77098-4030 | Amount of Contribution (\$) \$2,500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 5/16 Rpt: 8/30 |
| 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080005 |
| 4 Date 02/12/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daspit Law Firm, PLLC <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77002-1057 | 7 Amount of Contribution (\$) \$5,000.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 01/29/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle Restrepo Harvin & Robbins LLP <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-1785 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/11/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fessler, Julie <hr/> Contributor address; City; State; Zip Code Houston, TX 77096-3926 | Amount of Contribution (\$) \$100.00 |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 6/16 Rpt: 9/30 |
| 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080005 |
| 4 Date 01/29/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frachtman, Julian <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77027-3281 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm DumasNeel pllc | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 01/26/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Sarah <hr/> Contributor address; City; State; Zip Code Houston, TX 77007-7636 | Amount of Contribution (\$) \$100.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Law Office of Sarah Frazier PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/05/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Chelsie King <hr/> Contributor address; City; State; Zip Code Humble, TX 77396-3793 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Chelsie King Garza PC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 7/16 Rpt: 10/30 |
| 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080005 |
| 4 Date 02/10/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Benjamin L. | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77024-5719 | |
| 8 Contributor's Principal Occupation Lawyer | | 9 Contributor's Job Title Lawyer |
| 10 Contributor's employer/law firm Hall Law Group PLLC | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 01/29/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Ana | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77251-1287 | |
| Contributor's Principal Occupation State Representative | | Contributor's Job Title State Representative |
| Contributor's employer/law firm State Representative | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 01/29/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Higdon, Stephen | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75218-1221 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Lyons & Simmons LLP | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 8/16 Rpt: 11/30 |
| 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080005 |
| 4 Date 01/29/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horowitz III, Daniel D. | 7 Amount of Contribution (\$) \$500.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77002-8769 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm The Law Office of Daniel D. Horowitz III PC | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/05/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Frederick | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77008-6468 | |
| Contributor's Principal Occupation lawyer | | Contributor's Job Title lawyer |
| Contributor's employer/law firm spencer fane llp | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/05/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Frederick | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77008-6468 | |
| Contributor's Principal Occupation lawyer | | Contributor's Job Title lawyer |
| Contributor's employer/law firm spencer fane llp | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 9/16 Rpt: 12/30 |
| 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080005 |
| 4 Date 02/11/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kastl, Krisi | 7 Amount of Contribution (\$) \$500.00 |
| | 6 Contributor address; City; State; Zip Code Dallas, TX 75204-3289 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm KASTL LAW P.C. | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 01/23/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kherkher Garcia LLP | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77098-3145 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 01/29/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim, Denise and John | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77006-5856 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm The Kim Law Firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 10/16 Rpt: 13/30 |
| 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080005 |
| 4 Date 02/12/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manor, Jeralynn | 7 Amount of Contribution (\$) \$250.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77019-7123 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm The Manor Law Firm PC | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/03/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews & Associates | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77098-1127 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 01/29/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCathern Houston | Amount of Contribution (\$) \$2,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77027-3744 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 11/16 Rpt: 14/30 |
| 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080005 |
| 4 Date 01/30/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merwin, Rodney | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77008-3401 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Self Employed; also Of Counsel to Perdue and Kidd | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/10/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyn, Anne | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77005-2735 | |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/05/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mithoff, Richard | Amount of Contribution (\$) \$2,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77002 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Mithoff Law Firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 12/16 Rpt: 15/30 |
| 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080005 |
| 4 Date 02/10/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ownby, Kathleen | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77005-2854 | |
| 8 Contributor's Principal Occupation Retired | | 9 Contributor's Job Title Retired |
| 10 Contributor's employer/law firm Retired | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/19/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Kathleen | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77065 | |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/19/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potthoff, Richard | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code New Braunfels, TX 78130 | |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 13/16 Rpt: 16/30 |
| 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080005 |
| 4 Date 01/27/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rapp & Krock PC | 7 Amount of Contribution (\$) \$250.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77056-3970 | |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/10/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaffer, Jo Ann | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77027 | |
| Contributor's Principal Occupation Lawyer | | Contributor's Job Title Lawyer |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/10/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seerden, Andrew | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77009-6204 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Seerden Law Firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 14/16 Rpt: 17/30 |
| 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080005 |
| 4 Date 01/27/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sorrel Law <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77007-7026 | 7 Amount of Contribution (\$) \$1,500.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/04/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spagnoletti, Marcus <hr/> Contributor address; City; State; Zip Code Houston, TX 77002-1629 | Amount of Contribution (\$) \$5,000.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Spagnoletti Law Firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 01/27/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) St. Leger, Andi <hr/> Contributor address; City; State; Zip Code Austin, TX 78746-7992 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Noelke Maples St. Leger Bryant LLP | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 15/16 Rpt: 18/30 |
| 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080005 |
| 4 Date 02/02/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steinbomer, Robert | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code Lockhart, TX 78644-2433 | |
| 8 Contributor's Principal Occupation Retired | | 9 Contributor's Job Title Retired |
| 10 Contributor's employer/law firm Retired | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/12/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumner, Linda | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77005-2245 | |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/05/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Goldberg Law Office PLLC | Amount of Contribution (\$) \$180.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77006-1804 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 16/16 Rpt: 19/30 |
| 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080005 |
| 4 Date 01/27/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Utzinger, Christa | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code Lockhart, TX 78644-2920 | |
| 8 Contributor's Principal Occupation Teacher | | 9 Contributor's Job Title Teacher |
| 10 Contributor's employer/law firm Lockhart ISD | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/02/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vonder Haar, Tory | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77018-4305 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 02/02/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Winfield | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77007-5216 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Mukerji Law Firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

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: 1/10 Rpt: 20/30 | 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080005 |
|---|--|--|

| | |
|-----------------------------|---|
| 4 Date 02/09/2026 | 5 Payee name AT&T Conference Center |
|-----------------------------|---|

| | |
|----------------------------------|---|
| 6 Amount (\$) \$335.14 | 7 Payee address; City; State; Zip Code 1900 University Ave. Austin, TX 78705 |
|----------------------------------|---|

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel for Texas Democratic Women Convention |
|---------------------------------|---|---|

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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 02/05/2026 | Payee name AT&T Conference Center |
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|-------------------------|--|
| Amount (\$) \$381.05 | Payee address; City; State; Zip Code 1900 University Ave. Austin, TX 78705 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel for Austin Minority Bar Association Event |
|-------------------------------|---|---|

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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 01/28/2026 | Payee name Best Western |
|--------------------|----------------------------|

| | |
|-------------------------|---|
| Amount (\$) \$135.59 | Payee address; City; State; Zip Code 1811 S Colorado St US HIGHWAY 183 Lockhart, TX 78644 |
|-------------------------|---|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel for Caldwell County Democrats Event |
|-------------------------------|---|---|

| | | | |
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| 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: 2/10 Rpt: 21/30 | 2 | FILER NAME Hawkins, Kristen Brauchle (The Honorable) | 3 | Filer ID (Ethics Commission Filers) 00080005 |
| 4 | Date 02/06/2026 | 5 | Payee name BlueHost | | |
| 6 | Amount (\$) \$3.99 | 7 | Payee address; City; State; Zip Code 10 Corporate Drive Burlington, MA 01803-4200 | | |
| 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 Website hosting | | |
| 9 | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | Date 02/02/2026 | | Payee name Brooks IT Services | | |
| | Amount (\$) \$575.60 | | Payee address; City; State; Zip Code PO Box 926202 Houston, TX 77292 | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign IT | | |
| | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | Date 02/03/2026 | | Payee name Cardona, James | | |
| | Amount (\$) \$3,500.00 | | Payee address; City; State; Zip Code <div style="background-color: black; color: white; text-align: center; padding: 2px;">REDACTED PER 254.0401, ELEC. CODE</div> Houston, TX 77023 | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting 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: 3/10 Rpt: 22/30 | 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080005 |
| 4 Date 02/17/2026 | 5 Payee name Carroll Printing | |
| 6 Amount (\$) \$2,500.00 | 7 Payee address; City; State; Zip Code 2907 Canal St Houston, TX 77003 | |
| 8 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 Campaign materials |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/23/2026 | Payee name Common Bond Bistro | |
| Amount (\$) \$25.33 | Payee address; City; State; Zip Code 1706 Westheimer Rd Houston, TX 77006 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Meeting |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/26/2026 | Payee name Dallas Marriott | |
| Amount (\$) \$357.01 | Payee address; City; State; Zip Code 650 N Pearl St Dallas, TX 75201 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel while campaigning in Dallas |
| 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: 4/10 Rpt: 23/30 | 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080005 |
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|-----------------------------|---|
| 4 Date 01/29/2026 | 5 Payee name El Paso Democratic Party |
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|----------------------------------|---|
| 6 Amount (\$) \$250.00 | 7 Payee address; City; State; Zip Code 1401 Montana, Suite E El Paso, TX 79902 |
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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 Donation |
|---------------------------------|---|--|

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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 02/02/2026 | Payee name Frost Bank |
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|------------------------|---|
| Amount (\$) \$42.50 | Payee address; City; State; Zip Code P.O. Box 1315 Houston, TX 77251-1315 |
|------------------------|---|

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| 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 Processing 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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|--------------------|-------------------------------|
| Date 02/04/2026 | Payee name Hall Arts Hotel |
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|-------------------------|--|
| Amount (\$) \$538.21 | Payee address; City; State; Zip Code 1717 Leonard St, Dallas, TX 75201 |
|-------------------------|--|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel for Screening with Dallas Morning News |
|-------------------------------|---|--|

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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: 5/10 Rpt: 24/30 | 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080005 |
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|-----------------------------|--|
| 4 Date 02/04/2026 | 5 Payee name Hilton Americas |
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|---------------------------------|--|
| 6 Amount (\$) \$27.00 | 7 Payee address; City; State; Zip Code 1600 Lamar St, Houston, TX 77010 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event parking |
|---------------------------------|---|---|

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

| | |
|--------------------|---------------------------------|
| Date 01/26/2026 | Payee name Houston Chronicle |
|--------------------|---------------------------------|

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|-------------------------|---|
| Amount (\$) \$127.95 | Payee address; City; State; Zip Code 4747 Southwest Fwy Houston, TX 77027 |
|-------------------------|---|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Subscription |
|------------------------|--|---|

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

| | |
|--------------------|---------------------------------------|
| Date 01/29/2026 | Payee name Houston LGBT Caucus PAC |
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|-------------------------|--|
| Amount (\$) \$250.00 | Payee address; City; State; Zip Code P.O. Box 66664 Houston, TX 77266-6664 |
|-------------------------|--|

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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 Donation |
|------------------------|---|---|

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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: 6/10 Rpt: 25/30 | 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080005 |
|---|--|--|

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|-----------------------------|--|
| 4 Date 02/11/2026 | 5 Payee name Houston Young Lawyer Foundation |
|-----------------------------|--|

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|---------------------------------|--|
| 6 Amount (\$) \$25.00 | 7 Payee address; City; State; Zip Code P.O. Box 61208 Houston, TX 77208 |
|---------------------------------|--|

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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 Donation |
|---------------------------------|---|--|

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

| | |
|--------------------|---|
| Date 02/06/2026 | Payee name Houston Young Lawyer Foundation |
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| | |
|-------------------------|---|
| Amount (\$) \$215.00 | Payee address; City; State; Zip Code P.O. Box 61208 Houston, TX 77208 |
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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 Donation |
|-------------------------------|---|--|

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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 02/11/2026 | Payee name Human Age Digital |
|--------------------|---------------------------------|

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|----------------------------|---|
| Amount (\$) \$50,000.00 | Payee address; City; State; Zip Code 2700 Post Oak Blvd, 21st Floor Houston, TX 77056 |
|----------------------------|---|

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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 Digital Advertising |
|-------------------------------|--|---|

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|--|-----------------------------|---------------|-------------|
| 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: 7/10 Rpt: 26/30 | 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080005 |
| 4 Date 02/04/2026 | 5 Payee name Human Age Digital | |
| 6 Amount (\$) \$50,000.00 | 7 Payee address; City; State; Zip Code 2700 Post Oak Blvd, 21st Floor Houston, TX 77056 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Advertising |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/02/2026 | Payee name J&N Enterprises | |
| Amount (\$) \$335.93 | Payee address; City; State; Zip Code 2519 Fairway Park Dr. Houston, TX 77092 | |
| 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 materials |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/04/2026 | Payee name Johnston Campaigns | |
| Amount (\$) \$500.00 | Payee address; City; State; Zip Code 601 Enterprise Ave. #8110 League City, TX 77573 | |
| 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 Portion of a direct mail piece |
| 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.

| | | |
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| 1 Total pages Schedule F1: Sch: 8/10 Rpt: 27/30 | 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080005 |
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| 4 Date 01/26/2026 | 5 Payee name La Stella Italian |
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| 6 Amount (\$) \$96.11 | 7 Payee address; City; State; Zip Code 2550 Pacific Ave Dallas, TX 75226 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Meal while in Dallas |
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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 02/02/2026 | Payee name NGPVAN |
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| Amount (\$) \$279.83 | Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database |
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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 02/09/2026 | Payee name New York Times |
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| Amount (\$) \$84.24 | Payee address; City; State; Zip Code 620 Eighth Avenue. New York, NY 10018 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense subscription |
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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: 9/10 Rpt: 28/30 | 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080005 |
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| 4 Date 02/02/2026 | 5 Payee name Paragon Payment Solutions |
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| 6 Amount (\$) \$1,966.95 | 7 Payee address; City; State; Zip Code 1505 N Hydin Rd. Suite 110 Pittsburgh, PA 15257-0001 |
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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 Processing 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 02/09/2026 | Payee name Slattery, Ryan |
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| Amount (\$) \$500.00 | Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Houston, TX 77008 |
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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 Campaign material design. |
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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 02/06/2026 | Payee name Tony's |
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| Amount (\$) \$2,398.28 | Payee address; City; State; Zip Code 3755 Richmond Ave. Houston, TX 77046 |
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| 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 Fundraising event |
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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)

- | | | | |
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| 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.

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| 1 Total pages Schedule F1: Sch: 10/10 Rpt: 29/30 | 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080005 |
| 4 Date 02/02/2026 | 5 Payee name Treebeard's | |
| 6 Amount (\$) \$213.15 | 7 Payee address; City; State; Zip Code 315 Travis St Houston, TX 77002 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Retirement lunch for court reporter |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | |
| | Candidate/Officeholder name | Office sought |
| | | Office held |

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule K: Sch: 1/1 Rpt: 30/30 |
| 2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080005 |
| 4 Date 01/26/2026 | 5 Name of person from whom amount is received Frost Bank | 8 Amount (\$) \$2.95 |
| | 6 Address of person from whom amount is received; City; State; Zip Code Houston , TX 77251-1315 | |
| | 7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Monthly interest | |
| Date 02/12/2026 | 5 Name of person from whom amount is received St. Agnes Academy | 8 Amount (\$) \$526.59 |
| | 6 Address of person from whom amount is received; City; State; Zip Code Houston, TX 77036 | |
| | 7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Reimbursement for lunch for St. Agnes mock trial students | |