

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

12 COMMITTEE NAME Texas Farm Bureau AGFUND	13 Filer ID (Ethics Commission Filers) 00016623
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported BRYAN HUGHES State Senator
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 23,979.14
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 81,559.22
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 376,865.51
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,352,486.03
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

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

Mr. Si E. Cook

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

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12 COMMITTEE NAME Texas Farm Bureau AGFUND		13 Filer ID (Ethics Commission Filers) 00016623
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported BOB HALL State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported TRENT ASHBY State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported CHARLES SCHWERTNER State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported CHARLES SCHWERTNER State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Texas Farm Bureau AGFUND		13 Filer ID (Ethics Commission Filers) 00016623
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported LEIGH WAMBSGANSS State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported BORRIS MILES State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported ROLAND GUTIERREZ State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported JUDITH ZAFFIRINI State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported DAVID COOK State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported PETE FLORES State Senator B. Opposed
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed	
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported JOSE MENENDEZ State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported CHALRES PERRY State Senator B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported KEVIN SPARKS State Senator B. Opposed
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed	
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported CHRIS SPENCER State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported BRENT MONEY State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported CECIL BELL Jr. State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported KEITH BELL State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported COLE HEFNER State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported DANIEL ALDERS State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported DANIEL ALDERS State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported JAY DEAN State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported CODY HARRIS State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported BRIAN E. HARRISION State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported JOANNE SHOFNER State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported TREY WHARTON State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported ANGELIA ORR State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported PAUL DYSON State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported WILL METCALF State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported STAN GERDES State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported JANIS HOLT State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported ELLEN TROXCLAIR State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported TERRY M. WILSON State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported CHRISTIAN MANUEL State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported TERRI LEO-WILSON State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported GREG BONNEN State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Texas Farm Bureau AGFUND		13 Filer ID (Ethics Commission Filers) 00016623
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small>	A. Supported CODY T. VASUT State Representative B. Opposed
	2. Measures <small>(Describe by date and location of election and nature of issue.)</small>	A. Supported B. Opposed
	3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small>	
	1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small>	A. Supported MATTHEW MORGAN State Representative B. Opposed
	2. Measures <small>(Describe by date and location of election and nature of issue.)</small>	A. Supported B. Opposed
	3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small>	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small>	A. Supported GARY GATES State Representative B. Opposed
	2. Measures <small>(Describe by date and location of election and nature of issue.)</small>	A. Supported B. Opposed
	3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small>	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported JEFFREY BARRY State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported AJ LOUDERBACK State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported RYAN GUILLEN State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported RYAN GUILLEN State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported TODD HUNTER State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported KATRINA PIERSON State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported DENISE VILLALOBOS State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported OSCAR LONGORIA State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
		B. Opposed

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported SERGIO MUNOZ State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
		B. Opposed

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported JANIE LOPEZ State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
		B. Opposed

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported ERIN E. GAMEZ State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported ARMANDO MARTINEZ State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported TERRY CANALES State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported RICHARD PENA RAYMOND State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported J.M. LOZANO State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported ALAN SCHOOLCRAFT State Representative B. Opposed	
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed	
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported SHERYL COLE State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported DONNA HOWARD State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported CAROLINE HARRIS DAVILA State Representative B. Opposed
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed	
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported WES VIRDELL State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported BRAD BUCKLEY State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported HILLARY HICKLAND State Representative B. Opposed
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed	
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported PAT CURRY State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported RICHARD HAYES State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported HELEN KERWIN State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Texas Farm Bureau AGFUND		13 Filer ID (Ethics Commission Filers) 00016623
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported SHELBY SLAWSON State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported MIKE OLCOTT State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported KERESA RICHARDSON State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported SHELLEY LUTHER State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported BEN BUMGARNER State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported ANDY HOPPER State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported MITCH LITTLE State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported MATT SHAHEEN State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported JEFF LEACH State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported DAVID SPILLER State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported JAMES FRANK State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported MIHAELA E. PLESA State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported JAY HARDAWAY State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported DREW DARBY State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported CARRIE ISAAC State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported EDDIE MORALES State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
		B. Opposed

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported MARY E. GANZALEZ State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
		B. Opposed
		B. Opposed

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported SULEMAN LALANI State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
		B. Opposed
		B. Opposed

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported VINCE PEREZ State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported JOE MOODY State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported CLAUDIA ORDAZ State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported DON MCLAUGHLIN Jr. State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
		B. Opposed

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported BROOKS LANDGRAF State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
		B. Opposed

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported TOM CRADDICK State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
		B. Opposed

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small>	A. Supported DUSTIN BURROWS State Representative B. Opposed
	2. Measures <small>(Describe by date and location of election and nature of issue.)</small>	A. Supported B. Opposed
	3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small>	
	1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small>	A. Supported CARL TEPPER State Representative B. Opposed
	2. Measures <small>(Describe by date and location of election and nature of issue.)</small>	A. Supported B. Opposed
	3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small>	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small>	A. Supported STAN KITZMAN State Representative B. Opposed
	2. Measures <small>(Describe by date and location of election and nature of issue.)</small>	A. Supported B. Opposed
	3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small>	
	1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small>	A. Supported B. Opposed
	2. Measures <small>(Describe by date and location of election and nature of issue.)</small>	A. Supported B. Opposed
	3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small>	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small>	A. Supported CAROLINE FAIRLY State Representative B. Opposed
	2. Measures <small>(Describe by date and location of election and nature of issue.)</small>	A. Supported B. Opposed
	3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small>	
	1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small>	A. Supported KEN KING State Representative B. Opposed
	2. Measures <small>(Describe by date and location of election and nature of issue.)</small>	A. Supported B. Opposed
	3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small>	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small>	A. Supported CANDY NOBLE State Representative B. Opposed
	2. Measures <small>(Describe by date and location of election and nature of issue.)</small>	A. Supported B. Opposed
	3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small>	
	1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small>	A. Supported B. Opposed
	2. Measures <small>(Describe by date and location of election and nature of issue.)</small>	A. Supported B. Opposed
	3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small>	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported SALMAN BHOJANI State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported NICOLE COLLIER State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported JOHN MCQUEENEY State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported CHARLIE L. GEREN State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported VENTON JONES State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported CHRIS TURNER State Representative B. Opposed
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed	
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported RAFAEL ANCHIA State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported JARED PATTERSON State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported LINDA GARCIA State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported MORGAN MEYER State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported AICHA DAVIS State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported TONI ROSE State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported YVONNE DAVIS State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported ANGIE CHEN BUTTON State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported RHETTA A. BOWERS State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported CASSANDRA GARCIA HERNANDEZ State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported TREY MARTINEZ FISCHER State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported PHILIP CORTEZ State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported ELIZABETH "LIZ" CAMPOS State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported MARC LAHOOD State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported MARK DORAZIO State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported JOSEY GARCIA State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported CHARLES CUNNINGHAM State Representative B. Opposed
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed	
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

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12 COMMITTEE NAME Texas Farm Bureau AGFUND		13 Filer ID (Ethics Commission Filers) 00016623
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported MIKE SCHOFIELD State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported MANO DEAYALA State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported ANN JOHNSON State Representative B. Opposed
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed	
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

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12 COMMITTEE NAME Texas Farm Bureau AGFUND		13 Filer ID (Ethics Commission Filers) 00016623
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported JOHN H. BUCY State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported GENE WU State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported CHARLENE WARD JOHNSON State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Texas Farm Bureau AGFUND		13 Filer ID (Ethics Commission Filers) 00016623
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported ARMANDO WALLE State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported SENFRONIA THOMPSON State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported HAROLD V. DUTTON State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Texas Farm Bureau AGFUND	13 Filer ID (Ethics Commission Filers) 00016623
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported ANA HERNANDEZ State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported MARY ANN PEREZ State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported JOLANDA "JO" JONES State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Texas Farm Bureau AGFUND		13 Filer ID (Ethics Commission Filers) 00016623
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported PENNY MORALES SHAW State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported HUBERT VO State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported VALOREE SWANSON State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported VALOREE SWANSON State Representative B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Texas Farm Bureau AGFUND		13 Filer ID (Ethics Commission Filers) 00016623
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported GREG ABBOTT Governor B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported DAN PATRICK Lieutenant Governor B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported KELLY HANCOCK Comptroller B. Opposed
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed	
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

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12 COMMITTEE NAME Texas Farm Bureau AGFUND		13 Filer ID (Ethics Commission Filers) 00016623
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported NATE SHEETS Agriculture Commissioner B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported DAWN BUCKINGHAM Land Commissioner B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported JIMMY BLACKLOCK Supreme Court Chief Justice B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Texas Farm Bureau AGFUND		13 Filer ID (Ethics Commission Filers) 00016623
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported BRETT BUSBY Supreme Court Justice B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported JOHN CORNYN B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported NATHANIEL MORAN B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Texas Farm Bureau AGFUND	13 Filer ID (Ethics Commission Filers) 00016623
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported DAN CRENSHAW
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported KEITH SELF
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported PAT FALLON
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Texas Farm Bureau AGFUND		13 Filer ID (Ethics Commission Filers) 00016623
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported LANCE GOODEN B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported JAKE ELLZEY B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported LIZZIE FLETCHER B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported LIZZIE FLETCHER B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Texas Farm Bureau AGFUND		13 Filer ID (Ethics Commission Filers) 00016623
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported AUGUST PFLUGER B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported CRAIG GOLDMAN B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported RONNY JACKSON B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Texas Farm Bureau AGFUND		13 Filer ID (Ethics Commission Filers) 00016623
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported RANDY WEBER B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported MONICA DE LA CRUZ B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported VERONICA ESCOBAR B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

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12 COMMITTEE NAME Texas Farm Bureau AGFUND		13 Filer ID (Ethics Commission Filers) 00016623
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported PETE SESSIONS B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported TOM SELL B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported MARK TEIXEIRA B. Opposed
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed	
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

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12 COMMITTEE NAME Texas Farm Bureau AGFUND		13 Filer ID (Ethics Commission Filers) 00016623
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported TONY GONZALES B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported BETH VAN DUYNNE B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported ROGER WILLIAMS B. Opposed
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed	
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

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12 COMMITTEE NAME Texas Farm Bureau AGFUND		13 Filer ID (Ethics Commission Filers) 00016623
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported BRANDON GILL B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported MICHAEL CLOUD B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported HENRY CUELLAR B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

MONTHLY FILING GPAC REPORT: PURPOSE

12 COMMITTEE NAME Texas Farm Bureau AGFUND		13 Filer ID (Ethics Commission Filers) 00016623
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported SYLVIA GARCIA B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported JOHN CARTER B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported JULIE JOHNSON B. Opposed
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed	
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

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12 COMMITTEE NAME Texas Farm Bureau AGFUND	13 Filer ID (Ethics Commission Filers) 00016623
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported VICENTE GONZALEZ
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported BRIAN BABIN
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

SUBTOTALS - MPAC

17 COMMITTEE NAME Texas Farm Bureau AGFUND		18 Filer ID 00016623	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	53,219.14
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$	
7.	<input checked="" type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$	28,340.08
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	376,865.51
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/230 Rpt: 59/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABBOTT, STACY	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code PILOT POINT, TX 76258-6915		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABEL, MELANIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TUSKAHOMA, OK 74574-0000		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABSHIRE, CARLOS	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN MARCOS, TX 78666-1729		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, GAIL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78415-4904		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, JEFF	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PADUCAH, TX 79248-0922		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/230 Rpt: 60/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/24/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADKINS, KURT <hr/> 6 Contributor address; City; State; Zip Code LONGVIEW, TX 75602-5134	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGUILAR, ALMA <hr/> Contributor address; City; State; Zip Code FRANKLIN, TX 77856-1492	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGUILERA, VENTURA <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610-3249	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AHMADI, KAYHAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705-2106	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AKIN, DINAH <hr/> Contributor address; City; State; Zip Code GIDDINGS, TX 78942-2701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/230 Rpt: 61/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AKIN, JARROD	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code WHITEWRIGHT, TX 75491-3023	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALBARADO, SUSAN	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code KATY, TX 77493-3086	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALCORN, AARON	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code GILMER, TX 75645-6966	
Principal occupation / Job title (See Instructions) HVAC		Employer (See Instructions) BEN MAINES
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALDERMAN, BILLIE	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code ABILENE, TX 79608-6899	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEJO, ERIC	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code WACO, TX 76705-5207	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/230 Rpt: 62/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEJOS, MARIBEL <hr/> 6 Contributor address; City; State; Zip Code CELINA, TX 75009-7115	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, JAMES <hr/> Contributor address; City; State; Zip Code BURNET, TX 78611-7566	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, MARGARET <hr/> Contributor address; City; State; Zip Code GLEN ROSE, TX 76043-1209	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, TODD <hr/> Contributor address; City; State; Zip Code SCHERTZ, TX 78154-2681	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLRED, PARVIN <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701-9314	Amount of Contribution (\$) \$5.00
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: 5/230 Rpt: 63/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/25/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALTMAN, ZACK <hr/> 6 Contributor address; City; State; Zip Code MEMPHIS, TX 79245-3749	7 Amount of Contribution (\$) \$600.00
8 Principal occupation / Job title (See Instructions) FARMER		9 Employer (See Instructions) SELF EMPLOYED
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALVAREZ, ALYSA <hr/> Contributor address; City; State; Zip Code EAGLE PASS, TX 78852-3517	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALVAREZ, SANDRA <hr/> Contributor address; City; State; Zip Code SPRING, TX 77373-6459	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERLE, CALEB <hr/> Contributor address; City; State; Zip Code LINDSAY, TX 76250-0588	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, GARY <hr/> Contributor address; City; State; Zip Code FARMERSVILLE, TX 75442-7808	Amount of Contribution (\$) \$5.00
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: 6/230 Rpt: 64/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/23/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, JD <hr/> 6 Contributor address; City; State; Zip Code JACKSBORO, TX 76458-3217	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, JEFFREY <hr/> Contributor address; City; State; Zip Code WEIMAR, TX 78962-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, LYNDA <hr/> Contributor address; City; State; Zip Code EDGEWOOD, TX 75117-5189	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, MELVIN <hr/> Contributor address; City; State; Zip Code BRASHEAR, TX 75420-6383	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARIF, MOHAMMAD <hr/> Contributor address; City; State; Zip Code KATONAH, NY 10536-1408	Amount of Contribution (\$) \$5.00
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: 7/230 Rpt: 65/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/22/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNETTE, SHELLEY <hr/> 6 Contributor address; City; State; Zip Code DECATUR, TX 76234-4965	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, JAMES <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79765-2389	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, VICKI <hr/> Contributor address; City; State; Zip Code CHANDLER, TX 75758-8563	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARROYOS, STACI <hr/> Contributor address; City; State; Zip Code ANGLETON, TX 77515-7485	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASAF, JANET <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77042-3507	Amount of Contribution (\$) \$5.00
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: 8/230 Rpt: 66/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHPAUGH, JON <hr/> 6 Contributor address; City; State; Zip Code FOLLETT, TX 79034-2111	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ATKINS, NANCY <hr/> Contributor address; City; State; Zip Code DENTON, TX 76207-5733	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUGERI, RICHARD <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071-0616	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AZAZIL, HAMID <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78250-2129	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAILEY, JIMMY <hr/> Contributor address; City; State; Zip Code VICTORIA, TX 77905-3119	Amount of Contribution (\$) \$5.00
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: 9/230 Rpt: 67/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAITER, STEPHANIE	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code SEALY, TX 77474-9851		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, KENDELLA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SEALY, TX 77474-8632		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALFANTZ, CHADWICK	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BEN WHEELER, TX 75060-5515		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANCROFT, CHARLES	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code STREETMAN, TX 75859-0326		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANNOWSKY, JASON	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MENARD, TX 76859-0313		
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: 10/230 Rpt: 68/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/17/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARBOUR, KAREN <hr/> 6 Contributor address; City; State; Zip Code ABILENE, TX 79606-5600	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARIANTOS, NANCY <hr/> Contributor address; City; State; Zip Code EMORY, TX 75440-7098	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNES, SANDRA <hr/> Contributor address; City; State; Zip Code SILSBEE, TX 77656-3217	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRETT, JONATHAN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76179-4291	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTOSCH, BRIAN <hr/> Contributor address; City; State; Zip Code SCHULENBURG, TX 78956-5007	Amount of Contribution (\$) \$5.00
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: 11/230 Rpt: 69/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/08/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTSCH, CLIFFORD	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77039-3915		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASKIN, DAVID	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WINNSBORO, TX 75494-3321		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATEMAN, CHARLIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LONGVIEW, TX 75602-6617		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATEMAN, Rich	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SANGER, TX 76266-7971		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUER, BRANDON	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ARGYLE, TX 76226-2033		
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: 12/230 Rpt: 70/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUMAN, RICKY <hr/> 6 Contributor address; City; State; Zip Code LLANO, TX 78643-5751	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEATY, TED <hr/> Contributor address; City; State; Zip Code MINEOLA, TX 75773-2944	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAUDO, LISA <hr/> Contributor address; City; State; Zip Code ALBA, TX 75410-4800	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAVER, ZACHERY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110-3236	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECK, REGAN E. <hr/> Contributor address; City; State; Zip Code WACO, TX 76710-1621	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DIRECTOR OF GOVERNMENT AFFAIRS		Employer (See Instructions) TEXAS FARM BUREAU BUSINESS CORPORATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/230 Rpt: 71/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/18/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECK, REGAN E. <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76710-1621	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) DIRECTOR OF GOVERNMENT AFFAIRS		9 Employer (See Instructions) TEXAS FARM BUREAU BUSINESS CORPORATION
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEDELL, SANDY <hr/> Contributor address; City; State; Zip Code LUCAS, TX 75002-8210	Amount of Contribution (\$) \$605.00
Principal occupation / Job title (See Instructions) FARMER/RANCHER		Employer (See Instructions) SELF EMPLOYED
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEEBE, SAM <hr/> Contributor address; City; State; Zip Code CLIFTON, TX 76634-4562	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, JACQUELINE <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130-6514	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, MARY <hr/> Contributor address; City; State; Zip Code MELISSA, TX 75454-2325	Amount of Contribution (\$) \$5.00
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: 14/230 Rpt: 72/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/29/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENSON, JAMES <hr/> 6 Contributor address; City; State; Zip Code BANDERA, TX 78003-6666	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGLUND, DILLON <hr/> Contributor address; City; State; Zip Code EL CAMPO, TX 77437-3209	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERMEA, RUDY <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407-1229	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNHARDT, JAMES <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78263-2338	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEVERDING, STEPHEN <hr/> Contributor address; City; State; Zip Code MARQUEZ, TX 77865-0000	Amount of Contribution (\$) \$5.00
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: 15/230 Rpt: 73/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/23/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIEDERMANN, RANDY <hr/> 6 Contributor address; City; State; Zip Code SAN ANGELO, TX 76905-7919	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BISHOP, TERRI <hr/> Contributor address; City; State; Zip Code EAGLE LAKE, TX 77434-7046	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKFORD, JAMES <hr/> Contributor address; City; State; Zip Code VALLEY MILLS, TX 76689-3137	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) VICE PRESIDENT CLAIMS		Employer (See Instructions) TEXAS FARM BUREAU CASUALTY INSURANCE CO
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKWELDER, WELDON <hr/> Contributor address; City; State; Zip Code MC CAMEY, TX 79752-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/01/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKWELL, JOHNNY <hr/> Contributor address; City; State; Zip Code SEABROOK, TX 77586-3317	Amount of Contribution (\$) \$5.00
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: 16/230 Rpt: 74/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/17/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKWELL, RUTH <hr/> 6 Contributor address; City; State; Zip Code LEANDER, TX 78641-3151	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANCHARD, STACY <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070-3124	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLUNTZER, JOHN <hr/> Contributor address; City; State; Zip Code ORANGE GROVE, TX 78372-0633	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF EMPLOYED
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOATRIGHT, BOB <hr/> Contributor address; City; State; Zip Code CEDAR CREEK, TX 78612-3448	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOEHNEMANN, KATHIE <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833-2748	Amount of Contribution (\$) \$5.00
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: 17/230 Rpt: 75/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOENIG, DAN <hr/> 6 Contributor address; City; State; Zip Code INEZ, TX 77968-4304	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOENING, MARGIE <hr/> Contributor address; City; State; Zip Code FLORESVILLE, TX 78114-5014	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) SECRETARY		Employer (See Instructions) BOENING BROS. DAIRY INC.
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOERNER, MATTHEW <hr/> Contributor address; City; State; Zip Code PILOT POINT, TX 76258-3038	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF EMPLOYED
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOLAND, PAUL <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76048-4163	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONNER, BROCK <hr/> Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636-2001	Amount of Contribution (\$) \$5.00
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: 18/230 Rpt: 76/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOOTH, CALLIOPE <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76108-6909	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOOTH, MIKE <hr/> Contributor address; City; State; Zip Code Poteet, TX 78065-5081	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BORN, KENNETH <hr/> Contributor address; City; State; Zip Code LAGO VISTA, TX 78645-8713	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOROM, RYAN <hr/> Contributor address; City; State; Zip Code VALLEY MILLS, TX 76689-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSQUEZ, ROCKY <hr/> Contributor address; City; State; Zip Code Crystal City, TX 78839-2837	Amount of Contribution (\$) \$5.00
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: 19/230 Rpt: 77/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOULTON, BRAD <hr/> 6 Contributor address; City; State; Zip Code HAMILTON, TX 76531-0509	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOURN, STEVEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214-4635	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOX, FAON <hr/> Contributor address; City; State; Zip Code STOCKDALE, TX 78160-6183	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYD, KATHRYN <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833-8136	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYD, STEPHEN <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77339-6217	Amount of Contribution (\$) \$5.00
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: 20/230 Rpt: 78/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/05/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADEN, DENNIS <hr/> 6 Contributor address; City; State; Zip Code COYANOSA, TX 79730	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) FARMER		9 Employer (See Instructions) SELF EMPLOYED
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADEN, SANDRA <hr/> Contributor address; City; State; Zip Code COYANOSA, TX 79730	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF EMPLOYED
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADLEY, JEANIE <hr/> Contributor address; City; State; Zip Code CORSICANA, TX 75109-0548	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAM, CRAIG <hr/> Contributor address; City; State; Zip Code LOUISE, TX 77455-0104	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREHM, REBECCA <hr/> Contributor address; City; State; Zip Code MCGREGOR, TX 76657-0121	Amount of Contribution (\$) \$5.00
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: 21/230 Rpt: 79/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/18/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRETT, KORY <hr/> 6 Contributor address; City; State; Zip Code HULL, TX 77564-0387	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREWER, BENJAMIN <hr/> Contributor address; City; State; Zip Code PETTUS, TX 78146-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIDGES, RAMONA <hr/> Contributor address; City; State; Zip Code LONGVIEW, TX 75604-1549	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIGGS, BRENDA <hr/> Contributor address; City; State; Zip Code SMITHVILLE, TX 78957-5010	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIGGS, JAMES <hr/> Contributor address; City; State; Zip Code FLORESVILLE, TX 78114-0000	Amount of Contribution (\$) \$5.00
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: 22/230 Rpt: 80/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/29/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIGGS, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code LONGVIEW, TX 75603-9420	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRILL, F <hr/> Contributor address; City; State; Zip Code HONDO, TX 78861-7018	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIM, RANDY <hr/> Contributor address; City; State; Zip Code Huntsville, TX 77340-8827	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRITTON, TEDDIE M. <hr/> Contributor address; City; State; Zip Code PALESTINE, TX 75803-1226	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) RAFTER B FARM & RANCH
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROCK, SAM <hr/> Contributor address; City; State; Zip Code BANDERA, TX 78003-1474	Amount of Contribution (\$) \$5.00
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: 23/230 Rpt: 81/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/07/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, SHARON <hr/> 6 Contributor address; City; State; Zip Code BRYAN, TX 77808-8749	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, BRANDI <hr/> Contributor address; City; State; Zip Code CLEBURNE, TX 76031-0350	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, BRIAN <hr/> Contributor address; City; State; Zip Code CADDO MILLS, TX 75135-6609	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, COURTNEY <hr/> Contributor address; City; State; Zip Code LAMPASAS, TX 76550-4053	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, TERRI <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610-2905	Amount of Contribution (\$) \$5.00
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: 24/230 Rpt: 82/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/26/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, THOMAS <hr/> 6 Contributor address; City; State; Zip Code HUGHES SPRINGS, TX 75656-5728	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, WESLEY SLOAN <hr/> Contributor address; City; State; Zip Code PROSPER, TX 75078-2008	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) AGENCY MANAGER		Employer (See Instructions) SELF EMPLOYED
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUMLEY, JENNIFER <hr/> Contributor address; City; State; Zip Code HEREFORD, TX 79045-2293	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUNSON, DARRYL <hr/> Contributor address; City; State; Zip Code HARKER HTS, TX 76548-1739	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, JEFFREY <hr/> Contributor address; City; State; Zip Code TERRELL, TX 75160-0848	Amount of Contribution (\$) \$5.00
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: 25/230 Rpt: 83/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/17/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRZOWSKI, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code GONZALES, TX 78629-2105	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) GONZALES LIVESTOCK MARKET
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCK, ANNE <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132-4777	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCK, EMMETT <hr/> Contributor address; City; State; Zip Code PARADISE, TX 76073-3228	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BULGERIN, ALICE GRACE <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574-1815	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURCH, SHAWN <hr/> Contributor address; City; State; Zip Code WOLFE CITY, TX 75496-3233	Amount of Contribution (\$) \$5.00
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: 26/230 Rpt: 84/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/01/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURCHFIELD, DANIEL <hr/> 6 Contributor address; City; State; Zip Code WEIMAR, TX 78962-4402	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURLESON, Robert <hr/> Contributor address; City; State; Zip Code ROUND MTN, TX 78663-6041	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNEY, NANCY <hr/> Contributor address; City; State; Zip Code EMORY, TX 75440-4808	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS, JAMES <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664-9620	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURPO, DANIEL <hr/> Contributor address; City; State; Zip Code PARIS, TX 75460-7519	Amount of Contribution (\$) \$5.00
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: 27/230 Rpt: 85/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/23/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURTNER, NICHOLAS <hr/> 6 Contributor address; City; State; Zip Code IRVING, TX 75038-0000	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURTON, RANDIE <hr/> Contributor address; City; State; Zip Code SAINT JO, TX 76265-1626	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broyles, Brenlea <hr/> Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burks, EDWARD <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76016-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CABLE, DIANE <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028-8303	Amount of Contribution (\$) \$5.00
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: 28/230 Rpt: 86/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/02/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALABRIA HARVEY, KATHY <hr/> 6 Contributor address; City; State; Zip Code PARKER, TX 75002-6708	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALVERT, TOMMY <hr/> Contributor address; City; State; Zip Code DENTON, TX 76210-3216	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) FARMER/RANCHER		Employer (See Instructions) SELF EMPLOYED
Date 02/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMERON, VIRGINIA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79924-5421	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, HEATHER <hr/> Contributor address; City; State; Zip Code QUINLAN, TX 75474-5479	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, JIM BRET <hr/> Contributor address; City; State; Zip Code IDALOU, TX 79329-1406	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) TEXAS TECH UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/230 Rpt: 87/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/24/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, Linda <hr/> 6 Contributor address; City; State; Zip Code AVINGER, TX 75630-1418	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANION, MINDY <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833-7174	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANNING, BARI <hr/> Contributor address; City; State; Zip Code Pottsboro, TX 75076-5204	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANUTESON, WESTON <hr/> Contributor address; City; State; Zip Code AXTELL, TX 76624-1676	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAREW, MARJA <hr/> Contributor address; City; State; Zip Code FRANKLIN, TX 77856-4311	Amount of Contribution (\$) \$5.00
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: 30/230 Rpt: 88/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLO, ANTHONY <hr/> 6 Contributor address; City; State; Zip Code ONALASKA, TX 77360-7737	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARNES, KENNETH <hr/> Contributor address; City; State; Zip Code AMARILLO, TX 79118-9300	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARNES, KEVIN <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75069-4760	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARPENTER, JOHN T. <hr/> Contributor address; City; State; Zip Code WACO, TX 76712-4097	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TEXAS FARM BUREAU BUSINESS CORPORATION
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARR, JEFFREY <hr/> Contributor address; City; State; Zip Code BUFFALO, TX 75831-0618	Amount of Contribution (\$) \$5.00
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: 31/230 Rpt: 89/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/25/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARR, Robert <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76712-2602	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRIZALES, SHANNON <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78550-8024	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLL, BRYAN <hr/> Contributor address; City; State; Zip Code Athens, TX 75751-3337	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLL, CLIFTON <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624-7961	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARSON, KODY <hr/> Contributor address; City; State; Zip Code OLTON, TX 79064	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/230 Rpt: 90/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/22/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARSON, LISA <hr/> 6 Contributor address; City; State; Zip Code LAMPASAS, TX 76550-2412	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CATCHING, DAVID <hr/> Contributor address; City; State; Zip Code SANTA FE, TX 77510-8420	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAUDILL, RICHARD <hr/> Contributor address; City; State; Zip Code Benbrook, TX 76126-2702	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CEARLEY, STEPHANIE <hr/> Contributor address; City; State; Zip Code DALHART, TX 79022-7861	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CERNOCH, EDWIN <hr/> Contributor address; City; State; Zip Code ROSENBERG, TX 77471-8935	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/230 Rpt: 91/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/17/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CERNY, CRAIG <hr/> 6 Contributor address; City; State; Zip Code EL CAMPO, TX 77437-6207	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CERNY, DIANNE <hr/> Contributor address; City; State; Zip Code EL CAMPO, TX 77437-1800	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANCEY, VALEDA <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77355-3459	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANDLER, CHIP <hr/> Contributor address; City; State; Zip Code FAIR OAKS, TX 78015-8349	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, KENTON <hr/> Contributor address; City; State; Zip Code GROESBECK, TX 76642-2139	Amount of Contribution (\$) \$5.00
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: 34/230 Rpt: 92/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/29/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHILEK, Albert	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code BRYAN, TX 77802-5713		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHISUM, CARRIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LEAKEY, TX 78873-0266		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHOPELAS, COLIN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code CORP CHRISTI, TX 78414-5004		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHOVANETZ, BARRY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SPRING, TX 77386-1799		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTIE, DOROTHY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANGELO, TX 76904-5410		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/230 Rpt: 93/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/03/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CIGARROA, JAIME <hr/> 6 Contributor address; City; State; Zip Code AMARILLO, TX 79118-6730	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CISNEROS, JOHN <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640-4009	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLACK, BARBARA <hr/> Contributor address; City; State; Zip Code BUCHANAN DAM, TX 78609-4312	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, DOUGLAS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77064-7181	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARKE, STEPHEN <hr/> Contributor address; City; State; Zip Code SALADO, TX 76571-5023	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/230 Rpt: 94/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/03/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAYBOURN, JON <hr/> 6 Contributor address; City; State; Zip Code BAY CITY, TX 77414-2134	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAYTON, BENJAMIN <hr/> Contributor address; City; State; Zip Code CHANDLER, TX 75758-2245	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEGG, KENT <hr/> Contributor address; City; State; Zip Code Huntsville, TX 77320-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLONINGER, CHARLOTTE <hr/> Contributor address; City; State; Zip Code MARSHALL, TX 75672-1485	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COATS, JIM <hr/> Contributor address; City; State; Zip Code NACOGDOCHES, TX 75965-8124	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/230 Rpt: 95/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/11/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COCHRAN, ALMA <hr/> 6 Contributor address; City; State; Zip Code CORP CHRISTI, TX 78414-3619	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COCHRAN, JILL <hr/> Contributor address; City; State; Zip Code ROPESVILLE, TX 79358-1553	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COE, JEREMY <hr/> Contributor address; City; State; Zip Code CADDO MILLS, TX 75135-6757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COE, SHIRLEY <hr/> Contributor address; City; State; Zip Code BULLARD, TX 75757-5148	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFFMAN, PRISCILLA <hr/> Contributor address; City; State; Zip Code COPPERAS COVE, TX 76522-3890	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/230 Rpt: 96/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/26/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COGBURN, COLTON <hr/> 6 Contributor address; City; State; Zip Code HAPPY, TX 79042-3007	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, CHARLES <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681-5620	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, RANDY <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-2165	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, RONNIE <hr/> Contributor address; City; State; Zip Code GATESVILLE, TX 76528-2572	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLIER, PATRICIA <hr/> Contributor address; City; State; Zip Code HILLSBORO, TX 76645-0797	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/230 Rpt: 97/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLINS, ALICE <hr/> 6 Contributor address; City; State; Zip Code China Spring, TX 76633-3253	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONDRY, DIANNA <hr/> Contributor address; City; State; Zip Code BANDERA, TX 78003-3303	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONN, LARRY <hr/> Contributor address; City; State; Zip Code FRANKLIN, TX 77856-1433	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRING, LANE <hr/> Contributor address; City; State; Zip Code HARPER, TX 78631-5299	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, JAMES <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024-3323	Amount of Contribution (\$) \$5.00
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: 40/230 Rpt: 98/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, KENNETH <hr/> 6 Contributor address; City; State; Zip Code Athens, TX 75752-5131	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOKE, NELSON <hr/> Contributor address; City; State; Zip Code BULVERDE, TX 78163-2186	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, Linda <hr/> Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619-8800	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPPOCK, KENNETH <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049-4223	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORDOVA, JOHN <hr/> Contributor address; City; State; Zip Code PASADENA, TX 77505-3208	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) ALL.INSTALLS.MECHANICAL

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/230 Rpt: 99/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/24/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORZINE, DONNA <hr/> 6 Contributor address; City; State; Zip Code PARIS, TX 75460-7519	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COSTABILE, AMANDA <hr/> Contributor address; City; State; Zip Code SNYDER, TX 79549-6167	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COULOMBE, Robert <hr/> Contributor address; City; State; Zip Code ALBA, TX 75410-2627	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COUNTRYMAN, TERRY <hr/> Contributor address; City; State; Zip Code Cleveland, TX 77328-5582	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COURVELLE, MICHAEL <hr/> Contributor address; City; State; Zip Code SHEPHERD, TX 77371-1615	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/230 Rpt: 100/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/27/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COVINGTON, PAUL <hr/> 6 Contributor address; City; State; Zip Code WYLIE, TX 75098-8053	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWAN, DANIEL <hr/> Contributor address; City; State; Zip Code BARTLETT, TX 76511-4454	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWAN, PHYLLIS <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75032-9128	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWART, KYLE <hr/> Contributor address; City; State; Zip Code Woodville, TX 77338-1985	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, JOEY <hr/> Contributor address; City; State; Zip Code PORT LAVACA, TX 77979-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/230 Rpt: 101/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/17/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, TAMMY <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259-2350	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRADDOCK, RONNY <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049-1701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, RYAN <hr/> Contributor address; City; State; Zip Code GATESVILLE, TX 76528-3387	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROSBY, LARRY <hr/> Contributor address; City; State; Zip Code ALTO, TX 75925-0833	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROSS, SHERRY <hr/> Contributor address; City; State; Zip Code CHEROKEE, TX 76832-2111	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/230 Rpt: 102/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/21/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUMP, DAVID <hr/> 6 Contributor address; City; State; Zip Code LIBERTY, TX 77575-6586	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUZ, JACQUELINE <hr/> Contributor address; City; State; Zip Code TROY, TX 76579-3729	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUMBIE, JAY <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423-1266	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUMBY, JOY <hr/> Contributor address; City; State; Zip Code Athens, TX 75751-9092	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUNNINGHAM, DONNA <hr/> Contributor address; City; State; Zip Code RUSK, TX 75785-4743	Amount of Contribution (\$) \$360.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/230 Rpt: 103/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUTAIA, JASON <hr/> 6 Contributor address; City; State; Zip Code SHEPHERD, TX 77371-6444	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Claussen, Savanna <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76126-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coggins, Rachael <hr/> Contributor address; City; State; Zip Code Batesville, TX 78829-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Culpepper, JASON <hr/> Contributor address; City; State; Zip Code DECATUR, TX 76234-0803	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Cornell <hr/> Contributor address; City; State; Zip Code VERNON, TX 76384-0000	Amount of Contribution (\$) \$5.00
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: 46/230 Rpt: 104/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAKE, TIFFANY <hr/> 6 Contributor address; City; State; Zip Code SINTON, TX 78387-2437	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DALE, BEVERLY <hr/> Contributor address; City; State; Zip Code LOS ALTOS, CA 94022-1206	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIEL, JERRY <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75402-7422	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS, RONALD <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75052-8596	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVEY, BRANDICE <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610-3199	Amount of Contribution (\$) \$5.00
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: 47/230 Rpt: 105/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVID, ROGER <hr/> 6 Contributor address; City; State; Zip Code ROSENBERG, TX 77471-2206	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIDSON, SHARON <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, AMME <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006-7923	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, DONITA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76120-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, GRANT <hr/> Contributor address; City; State; Zip Code HENDERSON, TX 75652-9625	Amount of Contribution (\$) \$5.00
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: 48/230 Rpt: 106/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/25/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, KEYEN <hr/> 6 Contributor address; City; State; Zip Code CUERO, TX 77954-6671	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, LANE <hr/> Contributor address; City; State; Zip Code IREDELL, TX 76649-4552	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, RANDY <hr/> Contributor address; City; State; Zip Code MANSFIELD, TX 76063-5907	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, SANDRA <hr/> Contributor address; City; State; Zip Code TOLAR, TX 76476-5020	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, SCOTT <hr/> Contributor address; City; State; Zip Code MORSE, TX 79062-0096	Amount of Contribution (\$) \$5.00
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: 49/230 Rpt: 107/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, SHANIQUA <hr/> 6 Contributor address; City; State; Zip Code GILMER, TX 75645-7040	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAZET, SUSAN <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76502-7236	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE LOS SANTOS, RIKKI <hr/> Contributor address; City; State; Zip Code INGRAM, TX 78025-5050	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEASON, LOY <hr/> Contributor address; City; State; Zip Code LIVINGSTON, TX 77351-3120	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DECKER, NORMAN <hr/> Contributor address; City; State; Zip Code EDGEWOOD, TX 75117-0961	Amount of Contribution (\$) \$5.00
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: 50/230 Rpt: 108/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/02/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEFEE, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code HEMPHILL, TX 75948-6699	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELARM, DONNA <hr/> Contributor address; City; State; Zip Code FLORESVILLE, TX 78114-4089	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELGADO, BLAS <hr/> Contributor address; City; State; Zip Code Helotes, TX 78023-2046	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEMAY, PATRICE <hr/> Contributor address; City; State; Zip Code LK JUNALUSKA, NC 28745-9714	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEMEL, MICHAEL <hr/> Contributor address; City; State; Zip Code SCHULENBURG, TX 78956-5263	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/230 Rpt: 109/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/07/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENNIS, Linda <hr/> 6 Contributor address; City; State; Zip Code GORDON, TX 76453-3844	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENNIS, MARK <hr/> Contributor address; City; State; Zip Code LA GRANGE, TX 78945-5787	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIEZI, MICHAEL <hr/> Contributor address; City; State; Zip Code BROOKSHIRE, TX 77423-2258	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DILLON, WAYNE <hr/> Contributor address; City; State; Zip Code MARSHALL, TX 75672-9511	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DINKINS, JOSEPH <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249-4722	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/230 Rpt: 110/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DITTMAR, Robert <hr/> 6 Contributor address; City; State; Zip Code KERRVILLE, TX 78028-8865	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOEGE, DORIS <hr/> Contributor address; City; State; Zip Code ADKINS, TX 78101-2303	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOGGETT, SCOTT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238-3469	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOMINGUEZ, AMY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78264-3740	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DORSETT, JOANNE <hr/> Contributor address; City; State; Zip Code DE LEON, TX 76444-1330	Amount of Contribution (\$) \$5.00
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: 53/230 Rpt: 111/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOTY, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75218-4122	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWELL, TAMMIE <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401-8839	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRANE, KYLIE <hr/> Contributor address; City; State; Zip Code Huntsville, TX 77320-0462	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRIGGERS, LUCY <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75034-4485	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUBE, CATHERINE <hr/> Contributor address; City; State; Zip Code KERENS, TX 75144-0000	Amount of Contribution (\$) \$5.00
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: 54/230 Rpt: 112/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/27/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUCHAMP, LOIS <hr/> 6 Contributor address; City; State; Zip Code ANDERSON, TX 77830-0129	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUCK, DENNEAU <hr/> Contributor address; City; State; Zip Code CENTERVILLE, TX 75833-0051	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUDLEY, Robert <hr/> Contributor address; City; State; Zip Code MIDLOTHIAN, TX 76065-6208	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUGGAN, DANNY <hr/> Contributor address; City; State; Zip Code INGRAM, TX 78025-5055	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNAVANT, DON <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76901-6715	Amount of Contribution (\$) \$5.00
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: 55/230 Rpt: 113/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/05/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, DIANA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code JACKSBORO, TX 76458-2033		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, PATRICK	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240-0000		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNNING, JENINE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Windom, TX 75492-4809		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNSWORTH, MARY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code GRANBURY, TX 76049-2020		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DURDIN, CARL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DAYTON, TX 77535-5761		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/230 Rpt: 114/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DYKES, CHARLES <hr/> 6 Contributor address; City; State; Zip Code BIG SPRING, TX 79720-4702	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DZIUK, JEROME <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78266-2955	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deveraux, WANDA <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356-4538	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dombrowski, DOUGLAS <hr/> Contributor address; City; State; Zip Code JONESBORO, TX 76538-1392	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EBBS, GARLAND <hr/> Contributor address; City; State; Zip Code BLOSSOM, TX 75416-4158	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/230 Rpt: 115/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/24/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EBEL, K <hr/> 6 Contributor address; City; State; Zip Code MAGNOLIA, TX 77354-4857	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EBEY, RICHARD <hr/> Contributor address; City; State; Zip Code KATY, TX 77493-3314	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDGE, ROGER <hr/> Contributor address; City; State; Zip Code KINGSVILLE, TX 78363-2667	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, JAMES <hr/> Contributor address; City; State; Zip Code KOSSE, TX 76653-0223	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) DISABLED		Employer (See Instructions) UNEMPLOYED
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EKPO, PATRICIA <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660-1724	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/230 Rpt: 116/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELAM, DAWN <hr/> 6 Contributor address; City; State; Zip Code SAN MARCOS, TX 78666-2167	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLER, ROYCE <hr/> Contributor address; City; State; Zip Code CEDAR HILL, TX 75104-3009	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLEY, ALISSA <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155-0292	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, LINDLEY F. <hr/> Contributor address; City; State; Zip Code WACO, TX 76708-9603	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) INVESTMENT MANAGER		Employer (See Instructions) TEXAS FARM BUREAU BUSINESS CORPORATION
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, LINDLEY F. <hr/> Contributor address; City; State; Zip Code WACO, TX 76708-9603	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) INVESTMENT MANAGER		Employer (See Instructions) TEXAS FARM BUREAU BUSINESS CORPORATION

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/230 Rpt: 117/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/03/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, JOHNNY <hr/> 6 Contributor address; City; State; Zip Code China Spring, TX 76633-4807	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EMEIGH, CHARLES <hr/> Contributor address; City; State; Zip Code CROWLEY, TX 76036-9156	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EMERY, LORA <hr/> Contributor address; City; State; Zip Code SHEPHERD, TX 77371-3529	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENSTROM, KEITH <hr/> Contributor address; City; State; Zip Code HILLSBORO, TX 76645-9524	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EPPS, CARRIE <hr/> Contributor address; City; State; Zip Code JACKSBORO, TX 76458-2411	Amount of Contribution (\$) \$5.00
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: 60/230 Rpt: 118/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/05/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERNSTES, DAVID	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845-6188		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ETHRIDGE, DENNIS	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code COLLEGE STATION, TX 77842-9242		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ETTER, MICHAEL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code GAINESVILLE, TX 76240-1040		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, JAMES	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SALADO, TX 76571-5300		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, KALYN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TEMPLE, TX 76502-6857		
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: 61/230 Rpt: 119/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, MANUEL <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78404-3945	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, STEVEN <hr/> Contributor address; City; State; Zip Code WHITNEY, TX 76692-3012	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVERHART, JENNIFER <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217-5857	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EWING, Robert <hr/> Contributor address; City; State; Zip Code DUNCANVILLE, TX 75137-3839	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/01/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAIRFIELD, ANELIA <hr/> Contributor address; City; State; Zip Code COPPERAS COVE, TX 76522-8428	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/230 Rpt: 120/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FALCON, CHRISTOPHER <hr/> 6 Contributor address; City; State; Zip Code ROSENBERG, TX 77471-6131	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAZEN, Robert <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243-7027	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FELAN, LEAH <hr/> Contributor address; City; State; Zip Code WACO, TX 76708-7289	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FELDMANN, JULIE <hr/> Contributor address; City; State; Zip Code DAWSON, TX 76639-0565	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEOKTISTOV, JOHN <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76543-5243	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/230 Rpt: 121/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERLET, MARLA <hr/> 6 Contributor address; City; State; Zip Code KINGSBURY, TX 78638-0232	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRELL, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code LA VERNIA, TX 78121-4721	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FICHERA, MARIANNE <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020-2780	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINKE, BENJAMIN <hr/> Contributor address; City; State; Zip Code ROUND TOP, TX 78954-5409	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, MICHELE <hr/> Contributor address; City; State; Zip Code HUNT, TX 78024-3447	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/230 Rpt: 122/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/07/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISK, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code MOUNT VERNON, TX 75457-4314	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLEMING, WILLIAM <hr/> Contributor address; City; State; Zip Code HERMLEIGH, TX 79526-3515	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, JOSE <hr/> Contributor address; City; State; Zip Code ROSEBUD, TX 76570-3130	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORBES, KAYCE <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613-4165	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, GREGORY <hr/> Contributor address; City; State; Zip Code HARTLEY, TX 79044-0390	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/230 Rpt: 123/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/04/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, RYAN <hr/> 6 Contributor address; City; State; Zip Code KRUGERVILLE, TX 75082-0000	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOX, SARAH <hr/> Contributor address; City; State; Zip Code LA VERNIA, TX 78121-5836	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOYT, DONALD <hr/> Contributor address; City; State; Zip Code ROSENBERG, TX 77471-6062	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKE, KODY <hr/> Contributor address; City; State; Zip Code BLOOMINGTON, TX 77951-0111	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRASIER, DEBORAH <hr/> Contributor address; City; State; Zip Code REFUGIO, TX 78377-4501	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/230 Rpt: 124/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREDERICKSEN, DALE <hr/> 6 Contributor address; City; State; Zip Code SIERRA BLANCA, TX 79851-0193	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, GREGORY <hr/> Contributor address; City; State; Zip Code VICTORIA, TX 77904-1133	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRENCH, SAVANNAH <hr/> Contributor address; City; State; Zip Code ENNIS, TX 75119-7749	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREY, DAVID <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76022-6771	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDMAN, DANIEL <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19103-6410	Amount of Contribution (\$) \$5.00
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: 67/230 Rpt: 125/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/22/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRYAR, HOLLIE <hr/> 6 Contributor address; City; State; Zip Code MONTALBA, TX 75853-3844	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULLER, WILLIAM <hr/> Contributor address; City; State; Zip Code COLDSRING, TX 77331-4657	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FURRY, EARL <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019-3712	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freedman, STEVE <hr/> Contributor address; City; State; Zip Code Lantana, TX 76226-2656	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fry, BRIAN <hr/> Contributor address; City; State; Zip Code CELINA, TX 75009-6323	Amount of Contribution (\$) \$5.00
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: 68/230 Rpt: 126/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/18/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLOWAY, JAMES	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code EULESS, TX 76040-1110		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAMBOA, Robert	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LORENA, TX 76655-3836		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANT, DOLORES	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SHERMAN, TX 75091-1376		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, JENNIFER	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845-3986		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, PATSY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78264-3740		
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: 69/230 Rpt: 127/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, ROSALINA <hr/> 6 Contributor address; City; State; Zip Code BEASLEY, TX 77417-9497	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, THOMAS <hr/> Contributor address; City; State; Zip Code INGLESIDE, TX 78362-6518	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, ZACHARY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230-6051	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARNER, RANDA <hr/> Contributor address; City; State; Zip Code BELLEVUE, TX 76228-2340	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, DAVID <hr/> Contributor address; City; State; Zip Code GONZALES, TX 78629-0896	Amount of Contribution (\$) \$5.00
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: 70/230 Rpt: 128/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, JOE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78748-2527	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, SILVERIO <hr/> Contributor address; City; State; Zip Code VICTORIA, TX 77905-0698	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GASS, RAYMOND <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77574-1885	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEORGE, LYNETTE <hr/> Contributor address; City; State; Zip Code DENISON, TX 75021-5971	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERICK, SANDRA <hr/> Contributor address; City; State; Zip Code LOVELADY, TX 75851-4416	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/230 Rpt: 129/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIBLER, DAWN <hr/> 6 Contributor address; City; State; Zip Code WILLOW CITY, TX 78675-2016	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBERT, THERESA <hr/> Contributor address; City; State; Zip Code WOODLAKE, TX 75865-0101	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILES, JOHN <hr/> Contributor address; City; State; Zip Code LEONARD, TX 75452-3666	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLIAM, LITA <hr/> Contributor address; City; State; Zip Code WACO, TX 76708-6161	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GING, PATRICIA <hr/> Contributor address; City; State; Zip Code THRALL, TX 76578-8525	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/230 Rpt: 130/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIPE, JAMES <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76712-4101	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIST, GARY <hr/> Contributor address; City; State; Zip Code Pottsboro, TX 75076-5257	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLASS, BRYAN <hr/> Contributor address; City; State; Zip Code GONZALES, TX 78629-5305	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) GUADALUPE VALLEY VETERINARY CLINIC
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLASS, CELIA <hr/> Contributor address; City; State; Zip Code GONZALES, TX 78629-5305	Amount of Contribution (\$) \$300.00
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#: _____) GLAWSON, LOYD <hr/> Contributor address; City; State; Zip Code LANEVILLE, TX 75667-9655	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/230 Rpt: 131/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/01/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLEBOFF, JOHN <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76094-0479	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLEITZ, HILARY <hr/> Contributor address; City; State; Zip Code WALLER, TX 77484-5276	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) RANCHER		Employer (See Instructions) SELF EMPLOYED
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLENN, DALE <hr/> Contributor address; City; State; Zip Code MILLSAP, TX 76066-2716	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLIDEWELL, ERROL <hr/> Contributor address; City; State; Zip Code ROSANKY, TX 78953-0334	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOEHMANN, LISA <hr/> Contributor address; City; State; Zip Code MASON, TX 76856-6710	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/230 Rpt: 132/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/24/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOETZKE, RICHARD <hr/> 6 Contributor address; City; State; Zip Code VON ORMY, TX 78073-3018	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOFORTH, PAUL <hr/> Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165-2403	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLD, DON <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028-9496	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDEN, JEFF <hr/> Contributor address; City; State; Zip Code WACO, TX 76708-7622	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALES, ERLINDA <hr/> Contributor address; City; State; Zip Code SINTON, TX 78387-5213	Amount of Contribution (\$) \$5.00
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: 75/230 Rpt: 133/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/26/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALES, JESSE <hr/> 6 Contributor address; City; State; Zip Code SEALY, TX 77474-0000	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALES, TONI <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78627-1563	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOOCH, JUDY <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAHMANN, JAMES <hr/> Contributor address; City; State; Zip Code HALLETTSVILLE, TX 77964-5860	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, D ANNA <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401-6832	Amount of Contribution (\$) \$5.00
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: 76/230 Rpt: 134/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/24/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, STEVE	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code NACOGDOCHES, TX 75965-1091		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENWOOD, AMY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code GRAHAM, TX 76450-6646		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFIN, LISA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code JEWETT, TX 75846-5664		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFITH, LAWRENCE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MUENSTER, TX 76252-2706		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIMM, DANNY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BELTON, TX 76513-2842		
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: 77/230 Rpt: 135/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRISSOM, GAYE <hr/> 6 Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165-1247	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRONES, MELVIN J. <hr/> Contributor address; City; State; Zip Code SEGUIN , TX 78155-7784	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) RANCHER		Employer (See Instructions) SELF EMPLOYED
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRONEWALD, KYLE <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75402-6213	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROPPE, SHERYL <hr/> Contributor address; City; State; Zip Code CRAWFORD, TX 76638-2898	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUMBLES, ADAM <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130-3502	Amount of Contribution (\$) \$5.00
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: 78/230 Rpt: 136/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERRERO, JAVIER <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75220-1607	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUIDRY, VERONICA <hr/> Contributor address; City; State; Zip Code IOLA, TX 77861-4282	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULLY, BRANDON <hr/> Contributor address; City; State; Zip Code MERETA, TX 76940-9722	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUYTON, PHILIP <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027-6323	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUZMAN, ANDRES <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833-3244	Amount of Contribution (\$) \$5.00
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: 79/230 Rpt: 137/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/27/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, RAUL <hr/> 6 Contributor address; City; State; Zip Code LA BLANCA, TX 78558-1198	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAAG, HEATHER <hr/> Contributor address; City; State; Zip Code LA VERNIA, TX 78121-5857	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HACKER, RONNIE <hr/> Contributor address; City; State; Zip Code CASTROVILLE, TX 78009-1019	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HADDON, KAREN <hr/> Contributor address; City; State; Zip Code Lantana, TX 76226-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAIL, JUDY <hr/> Contributor address; City; State; Zip Code LAMPASAS, TX 76550-3712	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) LAMPASAS ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/230 Rpt: 138/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/17/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAIL, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code LAMPASAS, TX 76550-3712	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) CONSTRUCTION		9 Employer (See Instructions) SELF EMPLOYED
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAINES, LAURA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77037-1737	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALEPESKA, PHILLIP RYAN <hr/> Contributor address; City; State; Zip Code VICTORIA, TX 77904-2266	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALFMANN, AMY <hr/> Contributor address; City; State; Zip Code SUNRAY, TX 79086-0783	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
FARMER		SELF EMPLOYED
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALFMANN, BRENT <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76904-4371	Amount of Contribution (\$) \$5.00
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: 81/230 Rpt: 139/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/11/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALFMANN, CODY F. <hr/> 6 Contributor address; City; State; Zip Code MILES, TX 76861-6404	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) FARMER		9 Employer (See Instructions) SELF EMPLOYED
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALFMANN, JAIME <hr/> Contributor address; City; State; Zip Code NEW ULM, TX 78950-5236	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF EMPLOYED
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALFMANN, MARCUS <hr/> Contributor address; City; State; Zip Code SUNRAY, TX 79086-0783	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF EMPLOYED
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, HOWARD <hr/> Contributor address; City; State; Zip Code TOMBALL, TX 77377-8128	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, ROGER <hr/> Contributor address; City; State; Zip Code LORENA, TX 76655-3881	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) YOUNG FARMER & RANCHER COORDINATOR		Employer (See Instructions) TEXAS FARM BUREAU

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/230 Rpt: 140/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/18/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, ROGER <hr/> 6 Contributor address; City; State; Zip Code LORENA, TX 76655-3881	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) YOUNG FARMER & RANCHER COORDINATOR		9 Employer (See Instructions) TEXAS FARM BUREAU
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, STUART <hr/> Contributor address; City; State; Zip Code IVANHOE, TX 75447-0074	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANNUM, SHELBBIE <hr/> Contributor address; City; State; Zip Code ODONNELL, TX 79351-3112	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) FIELD REPRESENTATIVE		Employer (See Instructions) TEXAS FARM BUREAU
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANNUM, SHELBBIE <hr/> Contributor address; City; State; Zip Code ODONNELL, TX 79351-3112	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) FIELD REPRESENTATIVE		Employer (See Instructions) TEXAS FARM BUREAU
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSEN, JOHN <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133-5723	Amount of Contribution (\$) \$5.00
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: 83/230 Rpt: 141/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDY, MARK <hr/> 6 Contributor address; City; State; Zip Code JACKSONVILLE, TX 75766-6239	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARGROVE, ALEXIS <hr/> Contributor address; City; State; Zip Code CLIFTON, TX 76634-3421	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) AG LENDER/FARMER		Employer (See Instructions) CAPITAL FARM CREDIT/SELF EMPLOYED
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARGROVE, ALEXIS <hr/> Contributor address; City; State; Zip Code CLIFTON, TX 76634-3421	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARGROVE, Robert <hr/> Contributor address; City; State; Zip Code CUERO, TX 77954-5514	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARKINS, HAL <hr/> Contributor address; City; State; Zip Code LOMETA, TX 76853-0452	Amount of Contribution (\$) \$5.00
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: 84/230 Rpt: 142/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARLOW, SUZANNE <hr/> 6 Contributor address; City; State; Zip Code Anna, TX 75409-3425	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARMUTH, RHONDA <hr/> Contributor address; City; State; Zip Code PILOT POINT, TX 76258-6754	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARNESS, JERRY <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479-5534	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, JAMES <hr/> Contributor address; City; State; Zip Code BEN FRANKLIN, TX 75415-3877	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, PATRICIA <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459-4315	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/230 Rpt: 143/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, DALE <hr/> 6 Contributor address; City; State; Zip Code ROYSE CITY, TX 75189-8576	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTMAN, Fran <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76013-1459	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTMAN, Robert <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028-8750	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTSFIELD, JEANNIE <hr/> Contributor address; City; State; Zip Code MIDWAY, TX 75852-4185	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASCHKE, BRIAN <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624-3481	Amount of Contribution (\$) \$5.00
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: 86/230 Rpt: 144/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/08/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HATLEY, GLORIA <hr/> 6 Contributor address; City; State; Zip Code GARLAND, TX 75044-5430	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HATLEY, JERRY <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424-3000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAUGHEY, DANIEL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76102-0525	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAVERLAH, DANIEL <hr/> Contributor address; City; State; Zip Code MOUNTAIN HOME, TX 78058-0459	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWLEY, DARIN <hr/> Contributor address; City; State; Zip Code ELGIN, TX 78621-6470	Amount of Contribution (\$) \$5.00
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: 87/230 Rpt: 145/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/23/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYES, LEA ANN <hr/> 6 Contributor address; City; State; Zip Code GRANBURY, TX 76048-7865	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) RANCHER/AG TEACHER		9 Employer (See Instructions) SELF EMPLOYED/GLEN ROSE ISD
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYES IV, PAUL <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76048-7865	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) RANCHER/FIRE FIGHTER		Employer (See Instructions) SELF EMPLOYED/CITY OF FORT WORTH
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYNES, JAMIE <hr/> Contributor address; City; State; Zip Code CANYON, TX 79015-7160	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) TRIANGLE REALTY
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYNES, JOHN <hr/> Contributor address; City; State; Zip Code CANYON, TX 79015-7160	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) BROKER		Employer (See Instructions) TRIANGLE REALTY
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYNIE, LESLIE <hr/> Contributor address; City; State; Zip Code RICHARDS, TX 77873-0314	Amount of Contribution (\$) \$5.00
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: 88/230 Rpt: 146/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEARNSBERGER, BILLY <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76087-2170	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBARD, Robert <hr/> Contributor address; City; State; Zip Code BORGER, TX 79007-2412	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEDGES, IVA <hr/> Contributor address; City; State; Zip Code RAVENNA, TX 75476-7816	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEICHET, LYNN <hr/> Contributor address; City; State; Zip Code MARQUETTE, MI 49855-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEINSOHN, DEBRA <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666-3748	Amount of Contribution (\$) \$5.00
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: 89/230 Rpt: 147/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/21/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, GILBERT <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78416-2229	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERRMANN, Linda <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76549-2128	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERSCHAP, RONALD <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78041-7103	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HESS, SHELLEY <hr/> Contributor address; City; State; Zip Code ITALY, TX 76651-3543	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKEY, VIVIAN <hr/> Contributor address; City; State; Zip Code SEAGOVILLE, TX 75159-2963	Amount of Contribution (\$) \$5.00
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: 90/230 Rpt: 148/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKS, MARK <hr/> 6 Contributor address; City; State; Zip Code Quitman, TX 75783-5116	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGHT, KENNETH <hr/> Contributor address; City; State; Zip Code ELDORADO, TX 76936-0379	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILBURN, PATRICIA <hr/> Contributor address; City; State; Zip Code CUERO, TX 77954-3428	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, ANNE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109-3410	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, DELORES <hr/> Contributor address; City; State; Zip Code BOLING, TX 77420-9624	Amount of Contribution (\$) \$5.00
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: 91/230 Rpt: 149/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, DONNA 6 Contributor address; City; State; Zip Code GRANBURY, TX 76048-1229	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, JESSE Contributor address; City; State; Zip Code QUINLAN, TX 75474-8848	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, PAT Contributor address; City; State; Zip Code DALLAS, TX 75219-1626	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, RHEALENE Contributor address; City; State; Zip Code CANADIAN, TX 79014-3602	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, THOMAS Contributor address; City; State; Zip Code SHREVEPORT, LA 71129-4624	Amount of Contribution (\$) \$5.00
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: 92/230 Rpt: 150/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLGER, WINETTE <hr/> 6 Contributor address; City; State; Zip Code STANTON, TX 79782-0817	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIME, MICHAEL <hr/> Contributor address; City; State; Zip Code Crystal City, TX 78839-2225	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINDMAN, JOHN <hr/> Contributor address; City; State; Zip Code ROARING SPRINGS, TX 79256-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINDS, CHAD <hr/> Contributor address; City; State; Zip Code STRATFORD, TX 79084-0781	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINES, MARGARET <hr/> Contributor address; City; State; Zip Code PIQUA, OH 45356-9739	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/230 Rpt: 151/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/27/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINES, MARK <hr/> 6 Contributor address; City; State; Zip Code KAUFMAN, TX 75142-7135	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINNANT, ROB <hr/> Contributor address; City; State; Zip Code MOORE, TX 78057-0099	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINNANT, ROB <hr/> Contributor address; City; State; Zip Code MOORE, TX 78057-0099	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINOJOSA, MONICA <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028-4724	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOBBS, GLEN <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006-4505	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/230 Rpt: 152/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOBDAY, REBECCA <hr/> 6 Contributor address; City; State; Zip Code TEMPLE, TX 76501-1510	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGES, ERIC <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78254-4428	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGES, JOAN <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092-5410	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGES, KADE <hr/> Contributor address; City; State; Zip Code STERLING CITY, TX 76951-0893	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) RANCHER		Employer (See Instructions) SELF EMPLOYED
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGES, TONYA <hr/> Contributor address; City; State; Zip Code DICKINSON, TX 77539-8047	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/230 Rpt: 153/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/21/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOERMANN, JASON	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code JARRELL, TX 76537-0045		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFFERICHTER, WAYNE	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code SCHERTZ, TX 78154-6017		
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF EMPLOYED
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOISINGTON, SETH	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DENTON, TX 76210-0873		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLE, KIMBERLY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MILES, TX 76861-4809		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLM, CHRISTOPHER	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77061-3811		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/230 Rpt: 154/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/25/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLTON, COREY <hr/> 6 Contributor address; City; State; Zip Code BROOKSIDE VL, TX 77581-2603	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLUB, SYDONIA <hr/> Contributor address; City; State; Zip Code NEEDVILLE, TX 77461-1624	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOG, KAELYN <hr/> Contributor address; City; State; Zip Code HONDO, TX 78861-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOPPER, ANDY <hr/> Contributor address; City; State; Zip Code DECATUR, TX 76234-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORTON, CHRISTI <hr/> Contributor address; City; State; Zip Code GOLDTHWAITE, TX 76844-2429	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TARLETON STATE UNIVERSITY

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/230 Rpt: 155/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/15/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORTON, ROBIN <hr/> 6 Contributor address; City; State; Zip Code IOWA PARK, TX 76367-1104	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, PAUL <hr/> Contributor address; City; State; Zip Code SHEPHERD, TX 77371-2620	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, Robert <hr/> Contributor address; City; State; Zip Code VICTORIA, TX 77905-3600	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWE, BILLY <hr/> Contributor address; City; State; Zip Code WACO, TX 76708-7030	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ASSOC DIRECTOR OF GOVERNMENT AFFAIRS		Employer (See Instructions) TEXAS FARM BUREAU
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWE, BILLY <hr/> Contributor address; City; State; Zip Code WACO, TX 76708-7030	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ASSOC DIRECTOR OF GOVERNMENT AFFAIRS		Employer (See Instructions) TEXAS FARM BUREAU

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/230 Rpt: 156/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/24/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWELL, JESSE <hr/> 6 Contributor address; City; State; Zip Code HARWOOD, TX 78632-0000	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HRNCIR, KAREN <hr/> Contributor address; City; State; Zip Code COLLEGE STA, TX 77845-1900	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUDDLESTON, CHANCE <hr/> Contributor address; City; State; Zip Code ERA, TX 76238-0218	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUDLOW, DAVID <hr/> Contributor address; City; State; Zip Code WHARTON, TX 77488-9895	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULSEY, YANCY <hr/> Contributor address; City; State; Zip Code AZLE, TX 76020-4339	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/230 Rpt: 157/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/03/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HURT, CORVIN <hr/> 6 Contributor address; City; State; Zip Code MATADOR, TX 79244-0422	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopper`, AMANDA <hr/> Contributor address; City; State; Zip Code DECATUR, TX 76234-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ILEY, GEORGE <hr/> Contributor address; City; State; Zip Code GONZALES, TX 78629-6233	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INGRAM, JUSTIN <hr/> Contributor address; City; State; Zip Code WACO, TX 76702-0289	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) ASSOCIATE SALES DIRECTOR		Employer (See Instructions) TEXAS FARM BUREAU CASUALTY INSURANCE COMPANY
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INTURI, RAJASEKHAR <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75035-1213	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/230 Rpt: 158/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IVERSON, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76086-4200	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, DALE <hr/> Contributor address; City; State; Zip Code LEAKEY, TX 78873-0340	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, EMILY <hr/> Contributor address; City; State; Zip Code COLLEGE STA, TX 77845-4054	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, LINDSEY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232-3415	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOB, DINELL <hr/> Contributor address; City; State; Zip Code WINTERS, TX 79567-7413	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) SELF EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/230 Rpt: 159/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/18/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOB, GARY <hr/> 6 Contributor address; City; State; Zip Code WINTERS, TX 79567-7413	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) FARMER		9 Employer (See Instructions) SELF EMPLOYED
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOBSEN, KAREN <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021-4664	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAHNEL, KYLE <hr/> Contributor address; City; State; Zip Code WHEELER, TX 79096-0543	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMES, CINDY <hr/> Contributor address; City; State; Zip Code JACKSONVILLE, TX 75766-6178	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMES, PAMELA <hr/> Contributor address; City; State; Zip Code KEMP, TX 75143-8624	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/230 Rpt: 160/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/17/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMISON, JERRY 6 Contributor address; City; State; Zip Code CAMERON, TX 76520-0000	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JANDA, DENNIS Contributor address; City; State; Zip Code Round Rock, TX 78664-6305	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JANSZEN, KAREN Contributor address; City; State; Zip Code FLORESVILLE, TX 78114-4401	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JARZOMBEK, SONDR Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573-2695	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JELSON, MIKE Contributor address; City; State; Zip Code KATY, TX 77450-8780	Amount of Contribution (\$) \$5.00
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: 103/230 Rpt: 161/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/27/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENKINS, KIM <hr/> 6 Contributor address; City; State; Zip Code BONHAM, TX 75418-4624	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENKINS, WINDEE <hr/> Contributor address; City; State; Zip Code ORANGE, TX 77632-5792	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENNINGS, DOROTHY <hr/> Contributor address; City; State; Zip Code Wellborn, TX 77881-0040	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENSCHKE, CHRISTINA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737-9073	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEREMY, PARIZAD <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701-9314	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/230 Rpt: 162/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, BREANA <hr/> 6 Contributor address; City; State; Zip Code MIDLAND, TX 79706-5340	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JOHN <hr/> Contributor address; City; State; Zip Code CADDO MILLS, TX 75135-8311	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, MILLARD <hr/> Contributor address; City; State; Zip Code PORTER, TX 77365-4833	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, RAY <hr/> Contributor address; City; State; Zip Code CLEBURNE, TX 76031-4801	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, RICHARD <hr/> Contributor address; City; State; Zip Code JACKSONVILLE, TX 75766-8757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 105/230 Rpt: 163/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, RITA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77068-2709	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, Sabra <hr/> Contributor address; City; State; Zip Code NEW ULM, TX 78950-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSTON, RANDY <hr/> Contributor address; City; State; Zip Code CONROE, TX 77384-4307	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOINER, GARY <hr/> Contributor address; City; State; Zip Code CHINA SPRING, TX 76633-2874	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) DIRECTOR OF COMMUNICATIONS		Employer (See Instructions) TEXAS FARM BUREAU
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOINER, GARY <hr/> Contributor address; City; State; Zip Code CHINA SPRING, TX 76633-2874	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) DIRECTOR OF COMMUNICATIONS		Employer (See Instructions) TEXAS FARM BUREAU

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 106/230 Rpt: 164/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/07/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOLLY, JOHN 6 Contributor address; City; State; Zip Code GARLAND, TX 75040-8927	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, CLAY Contributor address; City; State; Zip Code NACOGDOCHES, TX 75964-1848	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) FARMER/RANCHER		Employer (See Instructions) SELF EMPLOYED
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, DAVID Contributor address; City; State; Zip Code EVADALE, TX 77615-0926	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, Geraldine Contributor address; City; State; Zip Code San saba, TX 76877-7226	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, MELVIN Contributor address; City; State; Zip Code HOUSTON, TX 77040-5904	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 107/230 Rpt: 165/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, MITCH <hr/> 6 Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165-6711	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, RODNEY <hr/> Contributor address; City; State; Zip Code MILLSAP, TX 76066-3152	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, SALLY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093-6349	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JORDAN, DON <hr/> Contributor address; City; State; Zip Code LONGVIEW, TX 75603-7626	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JULIAN, DAVID <hr/> Contributor address; City; State; Zip Code TYLER, TX 75713-0784	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe, Claudette <hr/> 6 Contributor address; City; State; Zip Code RAYMONDVILLE, TX 78580-0295	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe, ROYSE <hr/> Contributor address; City; State; Zip Code RAYMONDVILLE, TX 78580-0295	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAMINSKI, ALLEN <hr/> Contributor address; City; State; Zip Code SEALY, TX 77474-1736	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) RANCHER		Employer (See Instructions) SELF EMPLOYED
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KASIK, DIANNE <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76502-7321	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, HEIDI <hr/> Contributor address; City; State; Zip Code LIVINGSTON, TX 77351-1529	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/230 Rpt: 167/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEY, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code SHERMAN, TX 75092-5967	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEYES, BRUCE <hr/> Contributor address; City; State; Zip Code FARMERSVILLE, TX 75442-5702	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIEHN, GRADY <hr/> Contributor address; City; State; Zip Code LULING, TX 78648-3550	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIESCHNICK, LORIN <hr/> Contributor address; City; State; Zip Code COLLEGE STA, TX 77845-6561	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILLGORE, PHILLIP <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75402-5346	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 110/230 Rpt: 168/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIM, SAM <hr/> 6 Contributor address; City; State; Zip Code MERIDIAN, TX 76665-4502	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, DWAYNE <hr/> Contributor address; City; State; Zip Code ALTO, TX 75925-4009	Amount of Contribution (\$) \$60.00
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#: _____) KING, JO NELL <hr/> Contributor address; City; State; Zip Code BROWNFIELD , TX 79316-0147	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF EMPLOYED
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, Robert <hr/> Contributor address; City; State; Zip Code VICTORIA, TX 77904-3081	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, WALTER <hr/> Contributor address; City; State; Zip Code BROWNFIELD, TX 79316-0147	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 111/230 Rpt: 169/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/07/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KITE, SALLY <hr/> 6 Contributor address; City; State; Zip Code LAVERNIA, TX 78121-5853	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEPCYK, THOMAS <hr/> Contributor address; City; State; Zip Code NEW CANEY, TX 77357-4719	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) MERCURY SUPPORT
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLOSS, RICK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77069-2205	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, DAVID <hr/> Contributor address; City; State; Zip Code GRAPELAND, TX 75844-4944	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNOTT, JANICE <hr/> Contributor address; City; State; Zip Code EMORY, TX 75440-4673	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 112/230 Rpt: 170/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNOTTS, RONALD <hr/> 6 Contributor address; City; State; Zip Code MULDOON, TX 78949-5120	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOCUREK, DALE <hr/> Contributor address; City; State; Zip Code SEALY, TX 77474-9050	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KORNMESSER, PAUL <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77433-4300	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOZHEV, JENNIFER <hr/> Contributor address; City; State; Zip Code BEN WHEELER, TX 75754-3094	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRENKEK, CAROLINE <hr/> Contributor address; City; State; Zip Code BOLING, TX 77420-9674	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) HORIZON TURF GRASS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 113/230 Rpt: 171/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRUEGER, JACK	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code DENISON, TX 75020-7954		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUBALA, MICHAEL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Georgetown, TX 78628-1916		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUDELKA, SHAWN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WACO, TX 76708-2353		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KYLE, WILLIAM	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PEARLAND, TX 77584-4949		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kautsch, JOHN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Alamo, TX 78516-0000		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 114/230 Rpt: 172/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/17/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANDER, KENNETH <hr/> 6 Contributor address; City; State; Zip Code OVILLA, TX 75154-1610	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANDERS, GARRY <hr/> Contributor address; City; State; Zip Code HILLSBORO, TX 76645-5119	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANTELME, BOBBY <hr/> Contributor address; City; State; Zip Code EAGLE LAKE, TX 77434-1219	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARUE, SHANE <hr/> Contributor address; City; State; Zip Code CADDO MILLS, TX 75135-5674	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LASKOWSKI, BRANDON <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78239-3519	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 115/230 Rpt: 173/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/18/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LATIMER, TRACY <hr/> 6 Contributor address; City; State; Zip Code WOLFE CITY, TX 75496-0534	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWRENCE, CHAD <hr/> Contributor address; City; State; Zip Code ROARING SPRINGS, TX 79256-0271	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAY, PATRICIA <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75402-3313	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAYMAN, JOSEPH <hr/> Contributor address; City; State; Zip Code WACO, TX 76705-5597	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, VICTORIA <hr/> Contributor address; City; State; Zip Code WACO, TX 76705-1032	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEFEVRE, SHANE <hr/> 6 Contributor address; City; State; Zip Code RULE, TX 79547-3214	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEGRAND, Robert <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620-2672	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEHMAN, SANDY <hr/> Contributor address; City; State; Zip Code BROWNWOOD, TX 76801-2103	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEIGH, WILLIAM <hr/> Contributor address; City; State; Zip Code CRAWFORD, TX 76638-2614	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, CINDY <hr/> Contributor address; City; State; Zip Code BELTON, TX 76513-8040	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 117/230 Rpt: 175/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code SPRINGTOWN, TX 76082-5634	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIGHT, JUSTIN <hr/> Contributor address; City; State; Zip Code LORENZO, TX 79343-5253	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIGHT, KINCAID <hr/> Contributor address; City; State; Zip Code UVALDE, TX 78801-4212	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LILLIBRIDGE, GENEVIEVE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209-4521	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LILLIE-LEIFKER, LISA <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020-5921	Amount of Contribution (\$) \$5.00
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: 118/230 Rpt: 176/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LILLIS, KALEB <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75218-4122	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDIG, ELIZABETH <hr/> Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636-0276	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDLEY, BENNY <hr/> Contributor address; City; State; Zip Code YOAKUM, TX 77995-0449	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDSEY, DEBRA <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LLANOS, RICARDO <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247-3815	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 119/230 Rpt: 177/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/08/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOCKWOOD, LOUIS <hr/> 6 Contributor address; City; State; Zip Code BLANCO, TX 78606-1389	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG, CHANCEY <hr/> Contributor address; City; State; Zip Code DICKENS, TX 79229-0346	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPACHIN, PIERCE <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79605-6628	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, LOUIS <hr/> Contributor address; City; State; Zip Code DALHART, TX 79022-4604	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, DAVID <hr/> Contributor address; City; State; Zip Code SONORA, TX 76950-0112	Amount of Contribution (\$) \$5.00
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: 120/230 Rpt: 178/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/26/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOZOYA, CELESTE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78735-5512	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCIEN, RAYMOND <hr/> Contributor address; City; State; Zip Code ELM MOTT, TX 76640-0354	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUKOMSKI, DAVID <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77316-9440	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNSFORD, JOHN <hr/> Contributor address; City; State; Zip Code GRANDVIEW, TX 76050-4038	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LWEH, SAW <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78237-4475	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 121/230 Rpt: 179/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/07/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYDE, HORACE <hr/> 6 Contributor address; City; State; Zip Code PEARLAND, TX 77584-7870	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loftin, KEVIN <hr/> Contributor address; City; State; Zip Code BUNA, TX 77612-4563	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACCONAGHY, SUSAN <hr/> Contributor address; City; State; Zip Code MOODY, TX 76557-3180	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACHEN, JANET <hr/> Contributor address; City; State; Zip Code LAMPASAS, TX 76550-3090	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACHICEK, HENRY <hr/> Contributor address; City; State; Zip Code GRANGER, TX 76530-1059	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 122/230 Rpt: 180/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/25/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACHICEK, KENNETH <hr/> 6 Contributor address; City; State; Zip Code WEST PALM BCH, FL 33410-2089	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACIK, KIRBY <hr/> Contributor address; City; State; Zip Code CALDWELL, TX 77836-8632	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADDOX, RANDI <hr/> Contributor address; City; State; Zip Code HENRIETTA, TX 76365-5303	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) RANCHER		Employer (See Instructions) SELF EMPLOYED
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADISON, BEVERLY <hr/> Contributor address; City; State; Zip Code LA GRANGE, TX 78945-5338	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGEE, RODNEY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258-4547	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 123/230 Rpt: 181/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALCOM, BARNIE <hr/> 6 Contributor address; City; State; Zip Code LORENA, TX 76655-0676	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALDONADO, ROSENDO <hr/> Contributor address; City; State; Zip Code LAMPASAS, TX 76550-3232	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALDONADO, RUBEN <hr/> Contributor address; City; State; Zip Code UVALDE, TX 78801-7605	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALONE, SEDRIC <hr/> Contributor address; City; State; Zip Code SPRING, TX 77373-8579	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANGELSDORF, KEITH <hr/> Contributor address; City; State; Zip Code EARLY, TX 76802-3343	Amount of Contribution (\$) \$5.00
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: 124/230 Rpt: 182/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/23/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANGOLD, MICHAEL 6 Contributor address; City; State; Zip Code CASTROVILLE, TX 78009-5523	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANN, KENNETH Contributor address; City; State; Zip Code NATALIA, TX 78059-0608	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANSKER, MADELAINE Contributor address; City; State; Zip Code ROTAN, TX 79546-2305	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAREK, JOSEPH Contributor address; City; State; Zip Code PALACIOS, TX 77465-1751	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARKOWSKI, MARY JANE Contributor address; City; State; Zip Code WACO, TX 76712-8479	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SENIOR ACCOUNTANT		Employer (See Instructions) TEXAS FARM BUREAU

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 125/230 Rpt: 183/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/18/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARKOWSKI, MARY JANE <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76712-8479	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SENIOR ACCOUNTANT		9 Employer (See Instructions) TEXAS FARM BUREAU
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARR, ANDREW <hr/> Contributor address; City; State; Zip Code Barry, TX 75102-0013	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSCHALL, PIERCE <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76904-8111	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, CAREY <hr/> Contributor address; City; State; Zip Code WOODWAY, TX 76712-3023	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ASSOCIATE DIRECTOR OF COMMUNICATIONS		Employer (See Instructions) TEXAS FARM BUREAU
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, CAREY <hr/> Contributor address; City; State; Zip Code WOODWAY, TX 76712-3023	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ASSOCIATE DIRECTOR OF COMMUNICATIONS		Employer (See Instructions) TEXAS FARM BUREAU

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 126/230 Rpt: 184/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, JAMES <hr/> 6 Contributor address; City; State; Zip Code NACOGDOCHES, TX 75961-1002	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, JUSTIN <hr/> Contributor address; City; State; Zip Code BULLARD, TX 75757-5455	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, AMY <hr/> Contributor address; City; State; Zip Code HEWITT, TX 76643-0028	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, PEDRO <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78552-6659	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, VERONICA <hr/> Contributor address; City; State; Zip Code LIBERTY HILL, TX 78642-2400	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 127/230 Rpt: 185/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/05/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARUSAK, JANNA <hr/> 6 Contributor address; City; State; Zip Code CRAWFORD, TX 76638-2636	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASON, DEBORAH <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76501-2019	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASON, PHILLIP <hr/> Contributor address; City; State; Zip Code Justin, TX 76247-0537	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASSEY, HOWARD <hr/> Contributor address; City; State; Zip Code WILLS POINT, TX 75169-7649	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASTERS, MARK <hr/> Contributor address; City; State; Zip Code DAWSON, GA 39842-4542	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SERVICES		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 128/230 Rpt: 186/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATLOCK, TODD <hr/> 6 Contributor address; City; State; Zip Code BOWIE, TX 76230-0000	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATSCHKEK, GREG <hr/> Contributor address; City; State; Zip Code EOLA, TX 76937-9735	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAUCH, SHERRY <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071-7040	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAXTON, Linda <hr/> Contributor address; City; State; Zip Code PASADENA, TX 77504-3571	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAXWELL, MATT <hr/> Contributor address; City; State; Zip Code TYLER, TX 75707-1841	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 129/230 Rpt: 187/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAY, MELANIE <hr/> 6 Contributor address; City; State; Zip Code LAGO VISTA, TX 78645-0001	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAY, SHAUN <hr/> Contributor address; City; State; Zip Code MINEOLA, TX 75773-4767	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYO, CHRISTINE <hr/> Contributor address; City; State; Zip Code GRAHAM, TX 76450-7871	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCARTHUR, JENNIFER <hr/> Contributor address; City; State; Zip Code BAY CITY, TX 77414-7718	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCBEE, JOE <hr/> Contributor address; City; State; Zip Code COLDSRING, TX 77331-7592	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 130/230 Rpt: 188/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/01/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLAIN, MARK	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code SWEETWATER, TX 79556-2136		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORKLE, JUDY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code COLEMAN, TX 76834-8703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORKLE, Robert	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WHITESBORO, TX 76273-1806		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCUE, JOSEPH	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DIKE, TX 75437-0014		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCULLOUGH, SHANNON	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FORNEY, TX 75126-9747		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 131/230 Rpt: 189/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCURDY, RONNIE <hr/> 6 Contributor address; City; State; Zip Code CENTERVILLE, TX 75833-0929	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGOWAN, ANN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018-3223	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGUYER, KERRY <hr/> Contributor address; City; State; Zip Code WHT SETTLEMT, TX 76108-1617	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCILHANEY, MAKAYLA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030-4707	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCINTIRE, JAMES <hr/> Contributor address; City; State; Zip Code CARBON, TX 76435-0567	Amount of Contribution (\$) \$5.00
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: 132/230 Rpt: 190/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/29/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCMILLIN, FRIEDA <hr/> 6 Contributor address; City; State; Zip Code SUNSET, TX 76270-0107	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCMULLEN, STEPHANIE <hr/> Contributor address; City; State; Zip Code CRAWFORD, TX 76638-3388	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TEXAS FARM BUREAU BUSINESS CORP
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCMULLEN, STEPHANIE <hr/> Contributor address; City; State; Zip Code CRAWFORD, TX 76638-3388	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TEXAS FARM BUREAU BUSINESS CORP
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCQUEEN, THERESA <hr/> Contributor address; City; State; Zip Code WACO, TX 76710-1804	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCWHORTER, JOAN <hr/> Contributor address; City; State; Zip Code ROSANKY, TX 78953-9031	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 133/230 Rpt: 191/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEADOR, GARY <hr/> 6 Contributor address; City; State; Zip Code HEARNE, TX 77859-3876	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEADOR, MARTY <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77316-4904	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEADOWS, MIKE <hr/> Contributor address; City; State; Zip Code BRISCOE, TX 79011-3221	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MECKEL, DAVID <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130-2745	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEEKS, CAROLYN <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79707-5203	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 134/230 Rpt: 192/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/07/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEFFORD, ZACHARY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77008-2380	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELANCON, JOSHUA <hr/> Contributor address; City; State; Zip Code OAK POINT, TX 75068-2102	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELTON, RANDY <hr/> Contributor address; City; State; Zip Code DENTON, TX 76210-8053	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENDOZA, ANTONIO <hr/> Contributor address; City; State; Zip Code DRIPPING SPGS, TX 78620-2362	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENGERS, ZACHARY <hr/> Contributor address; City; State; Zip Code TYNAN, TX 78391-3511	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 135/230 Rpt: 193/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/29/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENTON, EDDIE <hr/> 6 Contributor address; City; State; Zip Code FERRIS, TX 75125-8891	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, AMANDA <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660-1730	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, SHERI <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845-3520	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYERS, ANGELA <hr/> Contributor address; City; State; Zip Code CORSICANA, TX 75110-2022	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYERS, DEBRA <hr/> Contributor address; City; State; Zip Code FAYETTEVILLE, TX 78940-0397	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 136/230 Rpt: 194/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/17/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILES, BRENDA <hr/> 6 Contributor address; City; State; Zip Code GRANITE SHOALS, TX 78654-2729	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILES, Robert <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273-1211	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, DONNA <hr/> Contributor address; City; State; Zip Code CARLSBAD, NM 88220-9699	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, DONNA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75233-4023	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/22/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, JOSHUA <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087-5905	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 137/230 Rpt: 195/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, LAURA <hr/> 6 Contributor address; City; State; Zip Code CLARKSVILLE, TX 75426-8430	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, NANCY <hr/> Contributor address; City; State; Zip Code WHITNEY, TX 76692-5640	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, Robert <hr/> Contributor address; City; State; Zip Code NAVASOTA, TX 77868-2240	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLICAN, VANCE <hr/> Contributor address; City; State; Zip Code MOUNTAIN HOME, TX 78058-5058	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINNICK, JASON <hr/> Contributor address; City; State; Zip Code RAVENNA, TX 75476-8634	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 138/230 Rpt: 196/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINTER, LARRY <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75002-6846	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINTON, BRAD <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77433-5732	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIRANDA, SARAH <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78245-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIRCOVICH, CONNIE <hr/> Contributor address; City; State; Zip Code INGLESIDE, TX 78362-4674	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, KELLY <hr/> Contributor address; City; State; Zip Code ROYSE CITY, TX 75189-8084	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 139/230 Rpt: 197/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, MARK <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76712-8807	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, MARY <hr/> Contributor address; City; State; Zip Code AMARILLO, TX 79106-6402	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, RALPH <hr/> Contributor address; City; State; Zip Code EDGEWOOD, TX 75117-5077	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, WILLIAM <hr/> Contributor address; City; State; Zip Code CRAWFORD, TX 76638-0060	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTAGUE, ANN <hr/> Contributor address; City; State; Zip Code BANDERA, TX 78003-5206	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 140/230 Rpt: 198/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/21/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTALBO, DOMINGO <hr/> 6 Contributor address; City; State; Zip Code LITTLE RIVER ACADEMY, TX 76554-2846	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTALBO, KATIE <hr/> Contributor address; City; State; Zip Code LTL RVR ACAD, TX 76554-2846	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTGOMERY, DAVID <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218-4112	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, BRYCE R. <hr/> Contributor address; City; State; Zip Code WACO, TX 76712-3125	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DIRECTOR OF FIELD OPERATIONS		Employer (See Instructions) TEXAS FARM BUREAU
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, BRYCE R. <hr/> Contributor address; City; State; Zip Code WACO, TX 76712-3125	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DIRECTOR OF FIELD OPERATIONS		Employer (See Instructions) TEXAS FARM BUREAU

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 141/230 Rpt: 199/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/08/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, REBECCA <hr/> 6 Contributor address; City; State; Zip Code GREENVILLE, TX 75404-9223	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORALES, MANUEL <hr/> Contributor address; City; State; Zip Code SPRINGTOWN, TX 76082-1198	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, ARTHUR <hr/> Contributor address; City; State; Zip Code Huntsville, TX 77340-8903	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, MADISSON <hr/> Contributor address; City; State; Zip Code WEST COLUMBIA, TX 77486-0907	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) LOAN OFFICER		Employer (See Instructions) THE FIRST STATE BANK
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, NICHOL <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155-8238	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 142/230 Rpt: 200/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/25/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, COURTNEY	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code KENNARD, TX 75847-0293		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, LEAH	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PALESTINE, TX 75801-6344		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSELEY, JAMES	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TYLER, TX 75709-5438		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSER, AMY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Huntsville, TX 77320-0502		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSS, KANDRA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PALACIOS, TX 77465-6848		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 143/230 Rpt: 201/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/08/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOUND, RICHARD <hr/> 6 Contributor address; City; State; Zip Code FLOWER MOUND, TX 75028-1603	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOUNT, CRYSTAL <hr/> Contributor address; City; State; Zip Code SCURRY, TX 75158-2540	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOUSER, MICHAEL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78253-5711	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOUTON, CLARA <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584-8780	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOWERY, DIANA <hr/> Contributor address; City; State; Zip Code ROSHARON, TX 77583-6507	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 144/230 Rpt: 202/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/18/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOWERY III, CURT <hr/> 6 Contributor address; City; State; Zip Code SANDY POINT, TX 77583-6507	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUELLER, DIANE <hr/> Contributor address; City; State; Zip Code KEMPNER, TX 76539-5567	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURFF, STUART <hr/> Contributor address; City; State; Zip Code ALED0, TX 76008-2836	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, BRIAN <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77707-1427	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUSGROVE, TERENCE <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401-6075	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 145/230 Rpt: 203/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, DEBRA <hr/> 6 Contributor address; City; State; Zip Code WESTHOFF, TX 77994-4129	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGee, BETTY <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75044-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messick, RONALD <hr/> Contributor address; City; State; Zip Code Brookeland, TX 75931-4254	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NASH, JAKE <hr/> Contributor address; City; State; Zip Code ORANGE, TX 77630-3301	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEELY, MELINA <hr/> Contributor address; City; State; Zip Code LA GRANGE, TX 78945-5437	Amount of Contribution (\$) \$5.00
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: 146/230 Rpt: 204/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/23/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, BUDDIE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77037-2414	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, KAYLEE <hr/> Contributor address; City; State; Zip Code BONHAM, TX 75418-8018	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESTER, BRENDA <hr/> Contributor address; City; State; Zip Code ADKINS, TX 78101-2727	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NETHERY, BRYAN <hr/> Contributor address; City; State; Zip Code CUERO, TX 77954-6743	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWTON, CODY <hr/> Contributor address; City; State; Zip Code FRANKSTON, TX 75763-6696	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) BANKER		Employer (See Instructions) AUSTIN BANK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 147/230 Rpt: 205/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/24/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWTON, KLINT <hr/> 6 Contributor address; City; State; Zip Code WICHITA FALLS, TX 76309-1404	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NGUYEN, HUNG <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130-9036	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, ZACH <hr/> Contributor address; City; State; Zip Code SANGER, TX 76266-7966	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLSON, SCOTT <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICOLETTE, THOMAS <hr/> Contributor address; City; State; Zip Code WACO, TX 76712-8197	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) PUBLIC RELATIONS SENIOR REPORTER		Employer (See Instructions) TEXAS FARM BUREAU

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 148/230 Rpt: 206/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/27/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORRIS, MAC <hr/> 6 Contributor address; City; State; Zip Code Huntsville, TX 77340-7332	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORRIS, RICHARD <hr/> Contributor address; City; State; Zip Code SIMMS, TX 75574-5507	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORTON, JON <hr/> Contributor address; City; State; Zip Code CLYDE, TX 79510-6533	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOVAK, CHARLES <hr/> Contributor address; City; State; Zip Code FLORESVILLE, TX 78114-6003	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOWLIN, KALEB <hr/> Contributor address; City; State; Zip Code DE LEON , TX 76444-6110	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) FRAMER		Employer (See Instructions) SELF EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 149/230 Rpt: 207/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/02/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nel, Eduard <hr/> 6 Contributor address; City; State; Zip Code LOCKHART, TX 78644-3965	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ODELSON, Linda <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633-2245	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ODOWD, JULIE <hr/> Contributor address; City; State; Zip Code LONGVIEW, TX 75602-6989	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OELSEN, VICTORIA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130-8103	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGLESBY, CIERRA <hr/> Contributor address; City; State; Zip Code OCALA, FL 34471-8446	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 150/230 Rpt: 208/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/08/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OKONSKI, ANTHONY <hr/> 6 Contributor address; City; State; Zip Code WILLIS, TX 77378-0000	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLBRICH, JEFFREY <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660-4780	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVER, RL <hr/> Contributor address; City; State; Zip Code LUFKIN, TX 75904-6682	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONEILL, JASON <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130-7018	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONOFRE, CYNTHIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78221-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 151/230 Rpt: 209/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/27/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OPITZ, ERIC <hr/> 6 Contributor address; City; State; Zip Code CANTON, TX 75103-4608	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OROCIO, REYES <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049-6431	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSCAR, JOSEPH <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665-9733	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSGOOD, JOHN <hr/> Contributor address; City; State; Zip Code KEMPNER, TX 76539-5897	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OTTE, PAMELA <hr/> Contributor address; City; State; Zip Code LEXINGTON, TX 78947-6355	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 152/230 Rpt: 210/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/28/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OUTLAW, GARY <hr/> 6 Contributor address; City; State; Zip Code KINGWOOD, TX 77339-1247	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWENS, CAROLINE <hr/> Contributor address; City; State; Zip Code ELGIN, TX 78621-5631	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAGE, JONATHAN <hr/> Contributor address; City; State; Zip Code NACOGDOCHES, TX 75964-4344	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALACIOS, EDGAR <hr/> Contributor address; City; State; Zip Code POTH, TX 78147-0918	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALACIOS, VIRGINIA <hr/> Contributor address; City; State; Zip Code ENCINAL, TX 78019-0172	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) COMMISSION SHIFT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 153/230 Rpt: 211/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, DENNIS <hr/> 6 Contributor address; City; State; Zip Code COLLINSVILLE, TX 76233-5131	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARISH, CHAD <hr/> Contributor address; City; State; Zip Code MOUNT PLEASANT, TX 75455-1224	Amount of Contribution (\$) \$360.00
Principal occupation / Job title (See Instructions) RANCHER/CHATTEL APPRAISER		Employer (See Instructions) SELF EMPLOYED/AG TRUST FARM CREDIT
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, JAMIE <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479-5544	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, KARIN <hr/> Contributor address; City; State; Zip Code LEWISVILLE, TX 75077-2743	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, KRIS <hr/> Contributor address; City; State; Zip Code WRIGHTSBORO, TX 78677-4016	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 154/230 Rpt: 212/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/25/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKS, STEVEN <hr/> 6 Contributor address; City; State; Zip Code BANDERA, TX 78003-1443	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARR, BRENT <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79416-1329	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARUM, JOHN <hr/> Contributor address; City; State; Zip Code SPUR, TX 79370-5277	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PASCHAL, PHILLIP <hr/> Contributor address; City; State; Zip Code ROYSE CITY, TX 75189-7523	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, JENAY <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77523-0836	Amount of Contribution (\$) \$5.00
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: 155/230 Rpt: 213/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/17/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTON, STEPHEN <hr/> 6 Contributor address; City; State; Zip Code Woodville, TX 75979-8821	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAUL, DERRAL <hr/> Contributor address; City; State; Zip Code CLINT, TX 79836-0234	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAVLIC, JUSTIN <hr/> Contributor address; City; State; Zip Code LUFKIN, TX 75904-4724	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAVLOCK, BERNARD <hr/> Contributor address; City; State; Zip Code NAVASOTA, TX 77868-5754	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAWELEK, LYNSE <hr/> Contributor address; City; State; Zip Code POTEET, TX 78065-4085	Amount of Contribution (\$) \$300.00
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: 156/230 Rpt: 214/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/17/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAWELEK, PETE J. <hr/> 6 Contributor address; City; State; Zip Code POTEET, TX 78065-4085	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) RANCHER		9 Employer (See Instructions) SELF EMPLOYED
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAWLIK, DOUGLAS <hr/> Contributor address; City; State; Zip Code TELFERNER, TX 77988-0482	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYTON, TOM <hr/> Contributor address; City; State; Zip Code SONORA, TX 76950-0664	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAZIK, DIANNE <hr/> Contributor address; City; State; Zip Code HALLSVILLE, TX 75650-5410	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEARSON, PHIL <hr/> Contributor address; City; State; Zip Code WHITNEY, TX 76692-0333	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 157/230 Rpt: 215/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PECHAL, KENNETH <hr/> 6 Contributor address; City; State; Zip Code ROGERS, TX 76569-3720	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEDERSON, DAVID <hr/> Contributor address; City; State; Zip Code BANDERA, TX 78003-3048	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEDERSON, JAMES <hr/> Contributor address; City; State; Zip Code SALADO, TX 76571-6559	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEDERSON, REBECCA <hr/> Contributor address; City; State; Zip Code WACO, TX 76708-2365	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PELFREY, SPENCER <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75090-5308	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 158/230 Rpt: 216/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/26/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PELTON, DEBRA <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76705-2565	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PELTON, KAYLA <hr/> Contributor address; City; State; Zip Code WACO, TX 76705-2565	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENNELL, Robert <hr/> Contributor address; City; State; Zip Code CUERO, TX 77954-6312	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERALES, ANGELICA <hr/> Contributor address; City; State; Zip Code RAYMONDVILLE, TX 78580-4463	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, GINA <hr/> Contributor address; City; State; Zip Code CORP CHRISTI, TX 78405-3116	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 159/230 Rpt: 217/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRY, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77084-2621	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETTY, KEVIN <hr/> Contributor address; City; State; Zip Code VALLEY VIEW, TX 76272-6611	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PICKETT, LEVI <hr/> Contributor address; City; State; Zip Code BELTON, TX 76513-8288	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERCE, Linda <hr/> Contributor address; City; State; Zip Code CAMPBELL, TX 75422-2224	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERCE, MONICA <hr/> Contributor address; City; State; Zip Code KINGSVILLE, TX 78363-6465	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 160/230 Rpt: 218/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/17/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLATTS, BRON <hr/> 6 Contributor address; City; State; Zip Code MILLSAP, TX 76066-0741	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLUMMER, DONALD <hr/> Contributor address; City; State; Zip Code SONORA, TX 76950-1605	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POINTER, BELINDA <hr/> Contributor address; City; State; Zip Code IOLA, TX 77861-3728	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLK, DEWAE <hr/> Contributor address; City; State; Zip Code PITTSBURG, TX 75686-1823	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POMYKAL, DARA <hr/> Contributor address; City; State; Zip Code ROSEBUD, TX 76570-2021	Amount of Contribution (\$) \$5.00
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: 161/230 Rpt: 219/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/24/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POPP, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code EL CAMPO, TX 77437-5092	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) FARMER		9 Employer (See Instructions) SELF EMPLOYED
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, JOE <hr/> Contributor address; City; State; Zip Code EMORY, TX 75440-3440	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POSTERT, LORETTA <hr/> Contributor address; City; State; Zip Code FLORESVILLE, TX 78114-5114	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POUNDS, GEORGE <hr/> Contributor address; City; State; Zip Code Woodville, TX 75979-6475	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, LOGAN <hr/> Contributor address; City; State; Zip Code GATESVILLE, TX 76528-0000	Amount of Contribution (\$) \$5.00
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: 162/230 Rpt: 220/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRELLOP, BRUCE <hr/> 6 Contributor address; City; State; Zip Code GIDDINGS, TX 78942-6400	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESS, DELAURA <hr/> Contributor address; City; State; Zip Code WILLS POINT, TX 75169-7305	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESTON, MICHAEL <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75010-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PULLIN, JOHN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78114-6713	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURSER, MARY ANN <hr/> Contributor address; City; State; Zip Code CANADIAN, TX 79014-1104	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 163/230 Rpt: 221/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/21/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pillow, STEPHEN <hr/> 6 Contributor address; City; State; Zip Code GRAPEVINE, TX 76051-6573	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plowman, JAMES <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUICK, RONDA <hr/> Contributor address; City; State; Zip Code TIMPSON, TX 75975-2584	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUINLAN, JANICE <hr/> Contributor address; City; State; Zip Code KATY, TX 77494-7467	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABORN, DARLENE <hr/> Contributor address; City; State; Zip Code GATESVILLE, TX 76528-2623	Amount of Contribution (\$) \$5.00
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: 164/230 Rpt: 222/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABSON, SYLVIA <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77498-2508	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAFFIELD, SAMANTHA <hr/> Contributor address; City; State; Zip Code BEASLEY, TX 77417-7000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMAGE, CALEB <hr/> Contributor address; City; State; Zip Code HOOKS, TX 75561-7546	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, MANUEL <hr/> Contributor address; City; State; Zip Code DESOTO, TX 75115-4693	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, SANDRA <hr/> Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070-3610	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 165/230 Rpt: 223/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/11/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMSEY, KRISTA <hr/> 6 Contributor address; City; State; Zip Code SPLENDORA, TX 77372-4584	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDALL, JASON <hr/> Contributor address; City; State; Zip Code HIGHLAND VILLAGE, TX 75077-7114	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANJEL, Robert <hr/> Contributor address; City; State; Zip Code VERNON, TX 76384-7507	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASH, REGAN <hr/> Contributor address; City; State; Zip Code ZAVALLA, TX 75980-7400	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, BEVERLY <hr/> Contributor address; City; State; Zip Code LOVELADY, TX 75851-4816	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 166/230 Rpt: 224/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, JEFFREY <hr/> 6 Contributor address; City; State; Zip Code SCHERTZ, TX 78154-6104	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RECKAWAY, VICKY <hr/> Contributor address; City; State; Zip Code EL CAMPO, TX 77437-2606	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDMAN, JOSEPH <hr/> Contributor address; City; State; Zip Code SATIN, TX 76685-3013	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, CONNIE <hr/> Contributor address; City; State; Zip Code Blanket, TX 76432-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, ROBERT E. <hr/> Contributor address; City; State; Zip Code BAY CITY, TX 77414-2852	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 167/230 Rpt: 225/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, WESLEY <hr/> 6 Contributor address; City; State; Zip Code PLEASANTON, TX 78064-6391	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REEDER, RALPH G BUBBA <hr/> Contributor address; City; State; Zip Code DICKINSON, TX 77539-7269	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REEVES, ALEXANDER <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76016-2005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REGER, ALFORD <hr/> Contributor address; City; State; Zip Code CHICOTA, TX 75425-0030	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REID, ASHLEE <hr/> Contributor address; City; State; Zip Code GRANDVIEW, TX 76050-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 168/230 Rpt: 226/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/25/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REL FORD-CLARKSON, TAMMY <hr/> 6 Contributor address; City; State; Zip Code BROOKSTON, TX 75421-2420	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RELIFORD, ELIZABETH <hr/> Contributor address; City; State; Zip Code KILGORE, TX 75662-3915	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RENBARGER, Robert <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746-1000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RENDON, AMALIA <hr/> Contributor address; City; State; Zip Code CLEBURNE, TX 76031-0202	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RENFRO, SAUNDRA <hr/> Contributor address; City; State; Zip Code LUFKIN, TX 75904-7380	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 169/230 Rpt: 227/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/27/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RENGER, RODDY <hr/> 6 Contributor address; City; State; Zip Code HALLETTSVILLE, TX 77964-3993	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RENKEN, RANDY <hr/> Contributor address; City; State; Zip Code HALLETTSVILLE, TX 77964-4403	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RENSCHLER, ERIC <hr/> Contributor address; City; State; Zip Code HEARNE, TX 77859-9576	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REPKA, BLAKE <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77316-3981	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHODES, JEANNA <hr/> Contributor address; City; State; Zip Code ETOILE, TX 75944-7936	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 170/230 Rpt: 228/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/14/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARD, KEITH <hr/> 6 Contributor address; City; State; Zip Code COLUMBUS, TX 78934-3225	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHTER, WHITNEY <hr/> Contributor address; City; State; Zip Code China Spring, TX 76633-3495	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIFE, Robert <hr/> Contributor address; City; State; Zip Code LARUE, TX 75770-2525	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RILEY, DAYTON <hr/> Contributor address; City; State; Zip Code YOAKUM, TX 77995-6624	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RINEHART, DANNY <hr/> Contributor address; City; State; Zip Code ROUND TOP, TX 78954-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 171/230 Rpt: 229/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/24/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIOS, LETICIA <hr/> 6 Contributor address; City; State; Zip Code CHAPPELL HILL, TX 77426-6016	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIOS, TARA <hr/> Contributor address; City; State; Zip Code CHAPPELL HILL, TX 77426-6016	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RISTAU, TONI <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78253-5554	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROACH, BLAKE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748-3727	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ASSOCIATE LEGISLATIVE DIRECTOR		Employer (See Instructions) TEXAS FARM BUREAU
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROACH, BLAKE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748-3727	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ASSOCIATE LEGISLATIVE DIRECTOR		Employer (See Instructions) TEXAS FARM BUREAU

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 172/230 Rpt: 230/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/08/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERSON-RILEY, CHERYL <hr/> 6 Contributor address; City; State; Zip Code LULING, TX 78648-1731	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, ATHLYN <hr/> Contributor address; City; State; Zip Code ALVIN, TX 77511-1719	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) COMMUNICATIONS MANAGER		Employer (See Instructions) CITY OF ALVIN
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, DANIELLE <hr/> Contributor address; City; State; Zip Code OLNEY, TX 76374-1709	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, HASKELL <hr/> Contributor address; City; State; Zip Code ARCHER CITY, TX 76351-0901	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, MAE <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 173/230 Rpt: 231/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/08/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, MELANIE <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78628-2311	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTSON, JAMES <hr/> Contributor address; City; State; Zip Code HIGGINS, TX 79046-0081	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTSON, WESLEY <hr/> Contributor address; City; State; Zip Code San saba, TX 76877-8223	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, PAIGE <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77808-7733	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, TARYN <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641-3692	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 174/230 Rpt: 232/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/27/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODGERS, BILLY 6 Contributor address; City; State; Zip Code CENTER, TX 75935-1228	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODGERS, MARISA Contributor address; City; State; Zip Code LORENA, TX 76655-3461	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODGERS, RUTH Contributor address; City; State; Zip Code GALVESTON, TX 77551-4837	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, DANA Contributor address; City; State; Zip Code WACO, TX 76705-1026	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/01/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, JAMES Contributor address; City; State; Zip Code Helotes, TX 78023-3302	Amount of Contribution (\$) \$5.00
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: 175/230 Rpt: 233/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/02/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, JANETHA <hr/> 6 Contributor address; City; State; Zip Code GUN BARREL CY, TX 75156-4203	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROJAS AVALOS, LUIS ENRIQUE <hr/> Contributor address; City; State; Zip Code YOAKUM, TX 77995-6108	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMEO, SALVADORE <hr/> Contributor address; City; State; Zip Code PASADENA, TX 77504-2931	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROOD, JEFF <hr/> Contributor address; City; State; Zip Code ONALASKA, TX 77360-4602	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROOT, RICKY <hr/> Contributor address; City; State; Zip Code Brookeland, TX 75931-4254	Amount of Contribution (\$) \$5.00
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: 176/230 Rpt: 234/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/07/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSS, JESSICA <hr/> 6 Contributor address; City; State; Zip Code EULESS, TX 76039-8045	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROW, GEORGE <hr/> Contributor address; City; State; Zip Code WILLS POINT, TX 75169-6562	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWE, JOHN <hr/> Contributor address; City; State; Zip Code KILGORE, TX 75662-3935	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/01/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWE, STEVEN <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76010-4420	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWLAND, GARY <hr/> Contributor address; City; State; Zip Code Pottsboro, TX 75076-6276	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 177/230 Rpt: 235/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUEMKE, DONNY <hr/> 6 Contributor address; City; State; Zip Code TAYLOR, TX 76574-3010	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUMBO JORDAN, TRACY <hr/> Contributor address; City; State; Zip Code MURCHISON, TX 75778-4654	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, PHILLIP <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401-3308	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robar, FRANK <hr/> Contributor address; City; State; Zip Code LONGVIEW, TX 75603-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, DAVID <hr/> Contributor address; City; State; Zip Code EAGLE PASS, TX 78853-3566	Amount of Contribution (\$) \$5.00
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: 178/230 Rpt: 236/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/25/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code YORKTOWN, TX 78164-1887	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAS, BRADLEY <hr/> Contributor address; City; State; Zip Code GANADO, TX 77962-8614	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAZAR, ADRIAN <hr/> Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067-3124	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALISBURY, BEN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76179-7311	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANCHEZ, MOSES <hr/> Contributor address; City; State; Zip Code CHARLOTTE, TX 78011-0297	Amount of Contribution (\$) \$5.00
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: 179/230 Rpt: 237/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/23/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERSON, JIMMY <hr/> 6 Contributor address; City; State; Zip Code Nocona, TX 76255-3011	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANSOM, GLENN <hr/> Contributor address; City; State; Zip Code LAWN, TX 79530-0206	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAULS, EUGENE <hr/> Contributor address; City; State; Zip Code NACOGDOCHES, TX 75964-8780	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAWYERS, THOMAS <hr/> Contributor address; City; State; Zip Code FAIRVIEW, TX 75069-9446	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCARBOROUGH, MACIE <hr/> Contributor address; City; State; Zip Code ROBSTOWN, TX 78380-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 180/230 Rpt: 238/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHEFFER, DAWN <hr/> 6 Contributor address; City; State; Zip Code KRUM, TX 76249-6651	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHENKEL, THOMAS <hr/> Contributor address; City; State; Zip Code SONORA, TX 76950-1117	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHIESS, DAVID <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006-2153	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHNEEMANN, CADE <hr/> Contributor address; City; State; Zip Code IRAAN, TX 79744-0523	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOEPF, JOHN <hr/> Contributor address; City; State; Zip Code LORENZO, TX 79343-0717	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 181/230 Rpt: 239/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/18/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOEPP, MARK <hr/> 6 Contributor address; City; State; Zip Code LORENZO, TX 79343-0723	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHRAUB, JOHN <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155-7233	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHROEDER, COLLIN <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833-0274	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHROEDER, EDGAR <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHULZ, SUSAN <hr/> Contributor address; City; State; Zip Code MALONE, TX 76660-3039	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 182/230 Rpt: 240/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/27/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUR, JESSI <hr/> 6 Contributor address; City; State; Zip Code PLAINVIEW, TX 79072-0212	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) FARMER		9 Employer (See Instructions) SELF EMPLOYED
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUYLER, GREGORY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78223-2404	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWARZ, MATTHEW <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301-3202	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEALE, ERIN <hr/> Contributor address; City; State; Zip Code FLATONIA, TX 78941-2542	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAY, PAMELA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132-2612	Amount of Contribution (\$) \$5.00
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: 183/230 Rpt: 241/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/19/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEBESTA, JASON <hr/> 6 Contributor address; City; State; Zip Code RICHMOND, TX 77469-1774	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEIFERT, CHRISTINE <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78029-1913	Amount of Contribution (\$) \$27.50
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEIFERT, WAYNE <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78029-1913	Amount of Contribution (\$) \$27.50
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEILHEIMER, WAYNE <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833-2323	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SENEFF, MARILYN <hr/> Contributor address; City; State; Zip Code FLYNN, TX 77855-0069	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 184/230 Rpt: 242/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SENTENO, SHANNON <hr/> 6 Contributor address; City; State; Zip Code BRENHAM, TX 77833-2270	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAFFER, DAVID <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132-4660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHELFER, ALAN <hr/> Contributor address; City; State; Zip Code WALLER, TX 77484-1307	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPPARD, CODY <hr/> Contributor address; City; State; Zip Code LOMETA, TX 76853-0268	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERRY, KARL <hr/> Contributor address; City; State; Zip Code CLEBURNE, TX 76033-4619	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 185/230 Rpt: 243/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHILLER, KEVIN <hr/> 6 Contributor address; City; State; Zip Code COLUMBUS, TX 78934-1656	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOEMAKER, DENNIS <hr/> Contributor address; City; State; Zip Code BELLEVUE, TX 76228-0295	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) RANCHER		Employer (See Instructions) SELF EMPLOYED
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHORT, JACK <hr/> Contributor address; City; State; Zip Code BRIDGE CITY, TX 77611-6244	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHORT, RENEA <hr/> Contributor address; City; State; Zip Code EMORY, TX 75440-5200	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHULL, BRENDA <hr/> Contributor address; City; State; Zip Code GARRISON, TX 75946-6570	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 186/230 Rpt: 244/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIKORSKI, DAVID <hr/> 6 Contributor address; City; State; Zip Code BRYAN, TX 77803-2480	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMAN, CARMEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78734-1662	Amount of Contribution (\$) \$600.00
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#: _____) SIMMONS, ROMIEY <hr/> Contributor address; City; State; Zip Code MARSHALL, TX 75672-3274	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMPSON, TODD <hr/> Contributor address; City; State; Zip Code Pottsboro, TX 75076-7448	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMPSON, WILLIAM <hr/> Contributor address; City; State; Zip Code LEWISVILLE, TX 75067-4530	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 187/230 Rpt: 245/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/26/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIPES, JUSTINA <hr/> 6 Contributor address; City; State; Zip Code HENDERSON, TX 75652-5211	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKAROVSKY, JAMES <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132-3407	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKINNER, TRUDI <hr/> Contributor address; City; State; Zip Code CALDWELL, TX 77836-6674	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKIPPER, STEVE <hr/> Contributor address; City; State; Zip Code BANDERA, TX 78003-0416	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKIPWORTH, SARAH <hr/> Contributor address; City; State; Zip Code WYLIE, TX 75098-1309	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 188/230 Rpt: 246/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLATE, KERRIE <hr/> 6 Contributor address; City; State; Zip Code PALESTINE, TX 75803-0720	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLOVAK, MICHELLE <hr/> Contributor address; City; State; Zip Code ENNIS, TX 75119-8832	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, CLARENCE <hr/> Contributor address; City; State; Zip Code FLORESVILLE, TX 78114-3321	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, Caul <hr/> Contributor address; City; State; Zip Code LAMPASAS, TX 76550-9521	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, JAMES <hr/> Contributor address; City; State; Zip Code ATLANTA, TX 75551-6495	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 189/230 Rpt: 247/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/29/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, JASON <hr/> 6 Contributor address; City; State; Zip Code NEOSHO, MO 64804-0418	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, RICHARD <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088-7227	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, STUART <hr/> Contributor address; City; State; Zip Code CROWLEY, TX 76036-1288	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNADER, TOM <hr/> Contributor address; City; State; Zip Code FAYETTEVILLE, TX 78940-5181	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNEED, JAMES <hr/> Contributor address; City; State; Zip Code SUNNYVALE, TX 75182-9103	Amount of Contribution (\$) \$5.00
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: 190/230 Rpt: 248/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/29/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SORRELS, JEFFREY 6 Contributor address; City; State; Zip Code MIDLOTHIAN, TX 76065-3732	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SORSBY, SAMUEL Contributor address; City; State; Zip Code BRENHAM, TX 77833-0416	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOUTHER, JERRY Contributor address; City; State; Zip Code SHERMAN, TX 75090-2230	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOWDERS, DENNIS Contributor address; City; State; Zip Code Old River Winfree, TX 77535-9099	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOWELL, AMIE Contributor address; City; State; Zip Code GROVES, TX 77619-4990	Amount of Contribution (\$) \$5.00
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: 191/230 Rpt: 249/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPARKS, HAILEY <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76708-6131	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPEARMAN, BLAKE <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071-3974	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPENCE, IRENE <hr/> Contributor address; City; State; Zip Code CUERO, TX 77954-4113	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPENCER, KIMBERLY <hr/> Contributor address; City; State; Zip Code CANTON, TX 75103-5728	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPITZER, CHAD <hr/> Contributor address; City; State; Zip Code WHITNEY, TX 76692-5809	Amount of Contribution (\$) \$5.00
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: 192/230 Rpt: 250/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/05/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANBERRY, INDIA <hr/> 6 Contributor address; City; State; Zip Code JEFFERSON, TX 75657-1331	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANLEY, JASON <hr/> Contributor address; City; State; Zip Code COMO, TX 75431-4444	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANLEY, MARY <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028-8616	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STARNES, RANDY <hr/> Contributor address; City; State; Zip Code Pottsboro, TX 75076-4198	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAVINOHA, TIM <hr/> Contributor address; City; State; Zip Code MANVEL, TX 77578-5091	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 193/230 Rpt: 251/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/21/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEAKLEY, Robert <hr/> 6 Contributor address; City; State; Zip Code ODESSA, TX 79763-2544	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEELE, CHARLES <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249-4707	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEELE, REXA <hr/> Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165-1774	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEELMAN, PHYLLIS <hr/> Contributor address; City; State; Zip Code Bovina, TX 79009-4501	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, GLORIA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75254-3057	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 194/230 Rpt: 252/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/19/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENSON, CARLA <hr/> 6 Contributor address; City; State; Zip Code EDGEWOOD, TX 75117-0252	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENSON, PATRICIA <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020-0068	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENSON, RONNIE <hr/> Contributor address; City; State; Zip Code QUINLAN, TX 75474-5277	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, MICHAEL <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071-4185	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, STEVEN D <hr/> Contributor address; City; State; Zip Code LIBERTY HILL, TX 78642-4751	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 195/230 Rpt: 253/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOBER, DANIEL <hr/> 6 Contributor address; City; State; Zip Code KYLE, TX 78640-5330	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOERNER, JUSTIN <hr/> Contributor address; City; State; Zip Code LOCKNEY, TX 79241-4835	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOKES, GARY <hr/> Contributor address; City; State; Zip Code China Spring, TX 76633-2707	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOLLEY, DARRELL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78253-5465	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE, KENNETH <hr/> Contributor address; City; State; Zip Code BELTON, TX 76513-8212	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 196/230 Rpt: 254/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/18/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONER, NINA <hr/> 6 Contributor address; City; State; Zip Code BOGATA, TX 75417-0816	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STREETY, RIKY <hr/> Contributor address; City; State; Zip Code MEADOW, TX 79345-5923	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STREMPPEL, JARRELL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729-2830	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRICKLAND, DEBBIE <hr/> Contributor address; City; State; Zip Code CENTERVILLE, TX 75833-2355	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRICKLAND, TERRY <hr/> Contributor address; City; State; Zip Code COOPER, TX 75432-8023	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 197/230 Rpt: 255/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRONGIN, ERIC <hr/> 6 Contributor address; City; State; Zip Code DRIPPING SPGS, TX 78620-4026	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRUBE, LARRY <hr/> Contributor address; City; State; Zip Code PITTSBURG, TX 75686-0069	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STURROCK, CLINTON <hr/> Contributor address; City; State; Zip Code WARREN, TX 77664-6557	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUAREZ, LUIS <hr/> Contributor address; City; State; Zip Code FREDERICKSBRG, TX 78624-1082	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUGGS, DEBBIE <hr/> Contributor address; City; State; Zip Code CHANDLER, TX 75758-8930	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 198/230 Rpt: 256/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/28/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SULT, GREG <hr/> 6 Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401-3005	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/01/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUNDSTROM, ALEXANDER <hr/> Contributor address; City; State; Zip Code CAMERON, TX 76520-9606	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SVEHLAK, MICHAEL <hr/> Contributor address; City; State; Zip Code ENNIS, TX 75119-7443	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWEET, JANET <hr/> Contributor address; City; State; Zip Code WESTON, TX 75097-0220	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWENSON, MONICA <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610-9208	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 199/230 Rpt: 257/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWINNEY, JULIA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Plantersville, TX 77363-0574		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SYKES, RICKY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76119-0000		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seeger, PATRICIA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78750-8300		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, RUTH	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ROSANKY, TX 78953-9053		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, SUE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MIDLOTHIAN, TX 76065-2074		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 200/230 Rpt: 258/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/24/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TANT, GARY <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75707-4953	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TARPLEY, MARQUITA <hr/> Contributor address; City; State; Zip Code MIAMI, TX 79059-2209	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TARVIN, MARY <hr/> Contributor address; City; State; Zip Code VALLEY MILLS, TX 76689-0516	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, CHAD <hr/> Contributor address; City; State; Zip Code MOUNT PLEASANT, TX 75455-8445	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) UNITED AG & TURF
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, KELLY <hr/> Contributor address; City; State; Zip Code MOUNT PLEASANT, TX 75455-8445	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) SALES PERSON		Employer (See Instructions) UNITED AG & TURF

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 201/230 Rpt: 259/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, RICHARD	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code COTULLA, TX 78014-3210		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, Robert	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code EMORY, TX 75440-4323		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, SANDRA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TOMBALL, TX 77375-6651		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEAGUE, CHRISTY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MINEOLA, TX 75773-3416		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEAGUE, JULIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Anson, TX 79501-0000		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 202/230 Rpt: 260/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/07/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEEL, HELEN <hr/> 6 Contributor address; City; State; Zip Code HALE CENTER, TX 79041-0353	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEMPLIN, Linda <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76010-5646	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TENA, LUIS <hr/> Contributor address; City; State; Zip Code HEREFORD, TX 79045-3536	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TERRY, LACI <hr/> Contributor address; City; State; Zip Code WACO, TX 76708-7161	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THANE, MARK <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584-4561	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 203/230 Rpt: 261/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/23/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THERIOT, AUGUSTE <hr/> 6 Contributor address; City; State; Zip Code KIRBYVILLE, TX 75956-4570	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, JENA <hr/> Contributor address; City; State; Zip Code HUTTO, TX 78634-0011	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, RONALD <hr/> Contributor address; City; State; Zip Code CROCKETT, TX 75835-7171	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, BRENT <hr/> Contributor address; City; State; Zip Code LIVINGSTON, TX 77351-4853	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, HAROLD <hr/> Contributor address; City; State; Zip Code MILFORD, TX 76670-1223	Amount of Contribution (\$) \$5.00
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: 204/230 Rpt: 262/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/26/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, JIMMY <hr/> 6 Contributor address; City; State; Zip Code WILLS POINT, TX 75169-9489	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, MARK <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574-1061	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, SCOTT <hr/> Contributor address; City; State; Zip Code FLORENCE, TX 76527-4453	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, TODD <hr/> Contributor address; City; State; Zip Code TULIA, TX 79088-3400	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ASSOCIATE DIRECTOR FIELD OPERATIONS		Employer (See Instructions) TEXAS FARM BUREAU
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, TODD <hr/> Contributor address; City; State; Zip Code TULIA, TX 79088-3400	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ASSOCIATE DIRECTOR FIELD OPERATIONS		Employer (See Instructions) TEXAS FARM BUREAU

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 205/230 Rpt: 263/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/09/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, WILLIAM J. <hr/> 6 Contributor address; City; State; Zip Code SAN ANGELO, TX 76904-9318	7 Amount of Contribution (\$) \$360.00
8 Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		9 Employer (See Instructions) SOUTHERN ROLLING PLAINS COTTON GROWERS
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THURMAN, JAY <hr/> Contributor address; City; State; Zip Code HAPPY, TX 79042-3210	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIETJEN, LAURA <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77807-3216	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TILLER, KAREN <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833-8016	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TILTON, ELIZABETH <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133-3604	Amount of Contribution (\$) \$5.00
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: 206/230 Rpt: 264/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIPP, RANDALL <hr/> 6 Contributor address; City; State; Zip Code SEALY, TX 77474-9167	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOBOLA, RYAN <hr/> Contributor address; City; State; Zip Code HALLETTSVILLE, TX 77964-5936	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLENTINO RODRIGUEZ, LESLIE <hr/> Contributor address; City; State; Zip Code YOAKUM, TX 77995-6108	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOOLE, KAREN <hr/> Contributor address; City; State; Zip Code MEXIA, TX 76667-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOUHY, CATHY <hr/> Contributor address; City; State; Zip Code BEN WHEELER, TX 75754-4011	Amount of Contribution (\$) \$5.00
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: 207/230 Rpt: 265/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOWERS, GEORGE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78245-1272	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAMEL, JESSICA <hr/> Contributor address; City; State; Zip Code LONGVIEW, TX 75605-7016	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TROUTMAN, DANIEL <hr/> Contributor address; City; State; Zip Code CLYDE, TX 79510-7515	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, STEPHEN <hr/> Contributor address; City; State; Zip Code WACO, TX 76715-4461	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER, RACEY <hr/> Contributor address; City; State; Zip Code WHITEHOUSE, TX 75791-6010	Amount of Contribution (\$) \$5.00
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: 208/230 Rpt: 266/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TYLER, GLEN <hr/> 6 Contributor address; City; State; Zip Code KOUNTZE, TX 77625-4327	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TYLER, WILLIAM <hr/> Contributor address; City; State; Zip Code DRIPPING SPGS, TX 78620-2331	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ULMER, ISIAIAH <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79932-2458	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) URBANSKI, DAVID <hr/> Contributor address; City; State; Zip Code FREDERICKSBRG, TX 78624-1000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) URBANSKI, JOE <hr/> Contributor address; City; State; Zip Code MABANK, TX 75156-6809	Amount of Contribution (\$) \$5.00
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: 209/230 Rpt: 267/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDEZ, BRYAN <hr/> 6 Contributor address; City; State; Zip Code Poteet, TX 78065-3585	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDEZ, MANUEL <hr/> Contributor address; City; State; Zip Code BAY CITY, TX 77414-5432	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALLADARES MIRANDA, JULIO <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78237-2021	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALVERDE, MICHAEL <hr/> Contributor address; City; State; Zip Code SHALLOWATER, TX 79363-0820	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANCE, PATRICK <hr/> Contributor address; City; State; Zip Code BULVERDE, TX 78163-2599	Amount of Contribution (\$) \$5.00
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: 210/230 Rpt: 268/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/28/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAUGHN, MITCHELL <hr/> 6 Contributor address; City; State; Zip Code SULPHUR SPRINGS, TX 75482-1225	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VELEZ, JOB <hr/> Contributor address; City; State; Zip Code NEDERLAND, TX 77627-2545	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERDONK, SUSAN <hr/> Contributor address; City; State; Zip Code HILLTOP LAKES, TX 77871-1905	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERETT, STEVEN <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79423-2022	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF EMPLOYED
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERWOLD, GARY <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479-6907	Amount of Contribution (\$) \$5.00
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: 211/230 Rpt: 269/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VIERLING, SCOTT <hr/> 6 Contributor address; City; State; Zip Code DEVINE, TX 78016-4111	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOGLER, JARED <hr/> Contributor address; City; State; Zip Code Kirby, TX 78219-1803	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOGLER, LYN <hr/> Contributor address; City; State; Zip Code LAMESA, TX 79331-2310	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) PHARMACIST		Employer (See Instructions) JONES-MCCALL PHARMACY
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VON QUINTUS, STEVEN <hr/> Contributor address; City; State; Zip Code FRANKLIN, TX 77856-4551	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanrijsbergen, PETER <hr/> Contributor address; City; State; Zip Code KENNARD, TX 75847-6403	Amount of Contribution (\$) \$5.00
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: 212/230 Rpt: 270/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vest, DANIEL <hr/> 6 Contributor address; City; State; Zip Code AZLE, TX 76020-1582	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vest, WAYMON <hr/> Contributor address; City; State; Zip Code CROCKETT, TX 75835-0010	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAGLIARDO, RODNEY <hr/> Contributor address; City; State; Zip Code GATESVILLE, TX 76528-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAGNER, DENNIS <hr/> Contributor address; City; State; Zip Code SANTA FE, TX 77510-9000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAGNER, EUNA <hr/> Contributor address; City; State; Zip Code MEDINA, TX 78055-1554	Amount of Contribution (\$) \$5.00
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: 213/230 Rpt: 271/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/08/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAITE, Robert <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633-5425	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAKEFIELD, JOEL <hr/> Contributor address; City; State; Zip Code CENTERVILLE, TX 75833-2393	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, CINDY <hr/> Contributor address; City; State; Zip Code EASTLAND, TX 76448-1600	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, Bill <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79702-7354	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, DONNA <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610-1221	Amount of Contribution (\$) \$5.00
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: 214/230 Rpt: 272/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/21/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, MARK	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78752-3138		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLER, ERIN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Center Point, TX 78010-5480		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLER, LEIGH	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code GROESBECK, TX 76642-0000		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTER, NEIL F.	Amount of Contribution (\$) \$600.00
Contributor address; City; State; Zip Code OGLESBY, TX 76561-2009		
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF EMPLOYED
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTER, Robert	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76244-5200		
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: 215/230 Rpt: 273/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTERS, KLYNTON <hr/> 6 Contributor address; City; State; Zip Code FORESTBURG, TX 76239-3436	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, WILMER L. <hr/> Contributor address; City; State; Zip Code COOLIDGE, TX 76635-0104	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) RANCHER		Employer (See Instructions) SELF EMPLOYED
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARNCKE, RANDY <hr/> Contributor address; City; State; Zip Code LA VERNIA, TX 78121-4147	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, MICHAEL <hr/> Contributor address; City; State; Zip Code FORNEY, TX 75126-7932	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASHINGTON, ANITA <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77489-3535	Amount of Contribution (\$) \$5.00
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: 216/230 Rpt: 274/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/31/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASHINGTON, SEAB <hr/> 6 Contributor address; City; State; Zip Code Flomot, TX 79234-2013	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATERS, PAT <hr/> Contributor address; City; State; Zip Code COOPER, TX 75432-3706	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, HILLARY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247-2907	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATSON, ALAN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77388-4520	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATSON, KRISTOPHER <hr/> Contributor address; City; State; Zip Code LLANO, TX 78643-2554	Amount of Contribution (\$) \$5.00
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: 217/230 Rpt: 275/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/07/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEAVER, JOHN <hr/> 6 Contributor address; City; State; Zip Code CELESTE, TX 75423-3897	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEAVER, JOHN <hr/> Contributor address; City; State; Zip Code WINONA, TX 75792-6304	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, BRUCE <hr/> Contributor address; City; State; Zip Code LIVINGSTON, TX 77351-3347	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, DUANE <hr/> Contributor address; City; State; Zip Code COLDSRING, TX 77331-4804	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, MARK <hr/> Contributor address; City; State; Zip Code COMANCHE, TX 76112-1061	Amount of Contribution (\$) \$5.00
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: 218/230 Rpt: 276/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/17/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, PHILLIP <hr/> 6 Contributor address; City; State; Zip Code DENISON, TX 75021-4300	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/16/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, RYAN <hr/> Contributor address; City; State; Zip Code GILMER, TX 75645-7966	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEDEL, JAMES <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424-7042	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEIDNER, KEITH <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133-1918	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEIGELT, SHIRLEY <hr/> Contributor address; City; State; Zip Code ALVIN, TX 77511-1850	Amount of Contribution (\$) \$5.00
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: 219/230 Rpt: 277/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/17/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISHUHN, BRADY <hr/> 6 Contributor address; City; State; Zip Code VANCOURT, TX 76955	7 Amount of Contribution (\$) \$180.00
8 Principal occupation / Job title (See Instructions) FARMER/RANCHER		9 Employer (See Instructions) SELF EMPLOYED
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISHUHN, DONALD <hr/> Contributor address; City; State; Zip Code EOLA, TX 76937-9714	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELCH, GENE <hr/> Contributor address; City; State; Zip Code Whitewright, TX 75491-0000	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLS, Linda <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133-3478	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WENZEL, DOLPH <hr/> Contributor address; City; State; Zip Code LOTT, TX 76656-3716	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TEXAS FARM BUREAU BUSINESS CORP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 220/230 Rpt: 278/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/18/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WENZEL, DOLPH <hr/> 6 Contributor address; City; State; Zip Code LOTT, TX 76656-3716	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) TEXAS FARM BUREAU BUSINESS CORP
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, AMBER <hr/> Contributor address; City; State; Zip Code WICHITA FALLS, TX 76310-0452	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) FIELD REPRESENTAIVE		Employer (See Instructions) TEXAS FARM BUREAU
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, AMBER <hr/> Contributor address; City; State; Zip Code WICHITA FALLS, TX 76310-0452	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) FIELD REPRESENTAIVE		Employer (See Instructions) TEXAS FARM BUREAU
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WETHINGTON, NIKKI <hr/> Contributor address; City; State; Zip Code NAZARETH, TX 79063-0163	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WETHINGTON, TOMMY <hr/> Contributor address; City; State; Zip Code NAZARETH, TX 79063-0201	Amount of Contribution (\$) \$5.00
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: 221/230 Rpt: 279/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, CHRISTOPHER <hr/> 6 Contributor address; City; State; Zip Code NASHVILLE, TN 37215-1534	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, PAUL <hr/> Contributor address; City; State; Zip Code CANTON, TX 75103-4900	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITEHEAD, TODD <hr/> Contributor address; City; State; Zip Code Jasper, TX 75951-8653	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITLOCK, LEE <hr/> Contributor address; City; State; Zip Code BANDERA, TX 78003-1865	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITTINGTON, WILLIAM <hr/> Contributor address; City; State; Zip Code HEMPHILL, TX 75948-0773	Amount of Contribution (\$) \$5.00
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: 222/230 Rpt: 280/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/19/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHORTON, ADRIAN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77038-1806	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIECHKOSKE, GREGG <hr/> Contributor address; City; State; Zip Code CAMERON, TX 76520-4932	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIER, JOEL <hr/> Contributor address; City; State; Zip Code LUFKIN, TX 75901-3544	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILHELM, DALE <hr/> Contributor address; City; State; Zip Code NAZARETH, TX 79063-0036	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF EMPLOYED
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, BERNADINE <hr/> Contributor address; City; State; Zip Code FRESNO, TX 77545-8130	Amount of Contribution (\$) \$5.00
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: 223/230 Rpt: 281/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/04/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, HERB <hr/> 6 Contributor address; City; State; Zip Code DECATUR, TX 76234-0567	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/21/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, LIONELL <hr/> Contributor address; City; State; Zip Code GRAPELAND, TX 75844-8267	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, LOYDD <hr/> Contributor address; City; State; Zip Code PARADISE, TX 76073-4349	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, PATRICIA <hr/> Contributor address; City; State; Zip Code KAUFMAN, TX 75142-5005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, SHELBY <hr/> Contributor address; City; State; Zip Code HEMPSTEAD, TX 77445-8381	Amount of Contribution (\$) \$5.00
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: 224/230 Rpt: 282/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/27/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, SIDNEY <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78207-7221	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIS, SCOTTY <hr/> Contributor address; City; State; Zip Code WILLS POINT, TX 75169-7876	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, BRAD <hr/> Contributor address; City; State; Zip Code LINDALE, TX 75771-3727	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, JOSHUA J. <hr/> Contributor address; City; State; Zip Code CANTON, TX 75103-5687	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) INSURANCE AGENCY MANAGER		Employer (See Instructions) SELF EMPLOYED
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, RUSSEL <hr/> Contributor address; City; State; Zip Code BEEVILLE, TX 78102-8809	Amount of Contribution (\$) \$5.00
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: 225/230 Rpt: 283/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, Robert <hr/> 6 Contributor address; City; State; Zip Code ABBOTT, TX 76621-3112	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINSLOW, STEVEN <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401-0005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIRZBERG, GLENN <hr/> Contributor address; City; State; Zip Code COLDSRING, TX 77331-8609	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WISE, ROLAND <hr/> Contributor address; City; State; Zip Code KATY, TX 77450-4319	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WISNIEWSKI, VALERIE <hr/> Contributor address; City; State; Zip Code ORANGE, TX 77632-0942	Amount of Contribution (\$) \$5.00
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: 226/230 Rpt: 284/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/11/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WISNIEWSKI, WALTER <hr/> 6 Contributor address; City; State; Zip Code ORANGE, TX 77632-0942	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WITT, RONALD <hr/> Contributor address; City; State; Zip Code Benbrook, TX 76126-2221	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WITTEL, NANCY <hr/> Contributor address; City; State; Zip Code NACOGDOCHES, TX 75963-3992	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLLER, ANDREW <hr/> Contributor address; City; State; Zip Code DECATUR, TX 76234-5814	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODLE, KENNEY <hr/> Contributor address; City; State; Zip Code PITTSBURG, TX 75686-1711	Amount of Contribution (\$) \$5.00
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: 227/230 Rpt: 285/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/11/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODRUFF, BENNETT K. <hr/> 6 Contributor address; City; State; Zip Code INGRAM, TX 78025-5036	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) INSURANCE AGENCY MANAGER		9 Employer (See Instructions) SELF EMPLOYED
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODS, HEATHER <hr/> Contributor address; City; State; Zip Code BURNET, TX 78611-1111	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOLEY, WESLEY <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76502-3161	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOLLEY, DANIEL <hr/> Contributor address; City; State; Zip Code JAYTON, TX 79528-0396	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WORSHAM, DENNIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746-2236	Amount of Contribution (\$) \$5.00
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: 228/230 Rpt: 286/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WORTHEN, ADAM <hr/> 6 Contributor address; City; State; Zip Code GLEN ROSE, TX 76043-6182	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, HARVEY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78263-3301	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, JOSHUA <hr/> Contributor address; City; State; Zip Code SOMERVILLE, TX 77879-5554	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, TYLER <hr/> Contributor address; City; State; Zip Code MENARD, TX 76859-0845	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warshak, GREGORY <hr/> Contributor address; City; State; Zip Code MISSION, TX 78572-4316	Amount of Contribution (\$) \$5.00
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: 229/230 Rpt: 287/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/25/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YEATTS, RYAN <hr/> 6 Contributor address; City; State; Zip Code FORESTBURG, TX 76239-3326	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) MEAT PROCESSOR		9 Employer (See Instructions) STANDARD MEAT COMPANY
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, BOOKER <hr/> Contributor address; City; State; Zip Code BANDERA, TX 78003-4342	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) RANCHER		Employer (See Instructions) SELF EMPLOYED
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZABOJNIK, KAMERON <hr/> Contributor address; City; State; Zip Code PALMER, TX 75152-0027	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZACHARIE, SHANNON <hr/> Contributor address; City; State; Zip Code ROWLETT, TX 75088-6682	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZACHEUS, SCOTT <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028-0000	Amount of Contribution (\$) \$5.00
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: 230/230 Rpt: 288/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/26/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZIESCHANG, ERNEST <hr/> 6 Contributor address; City; State; Zip Code GODLEY, TX 76044-0000	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZOSKI, LISA <hr/> Contributor address; City; State; Zip Code TRENTON, TX 75490-6034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZUNIGA, WANDA <hr/> Contributor address; City; State; Zip Code CUERO, TX 77954-3218	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

**NON-MONETARY SUPPORT FROM CORPORATION
OR LABOR ORGANIZATION**

SCHEDULE C4

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C4: Sch: 1/1 Rpt: 289/361
2 FILER NAME Texas Farm Bureau AGFUND		3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/15/2026	5 Corporation / Labor Organization name TEXAS FARM BUREAU	6 Amount (\$) 28,340.08

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: 1/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 01/29/2026	5 Payee name ANDY HOPPER CAMPAIGN
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6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1052 DECATUR, TX 76234
---	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
---------------------------------	---	---

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

Date 01/29/2026	Payee name ANGELIA ORR FOR TEXAS HOUSE
--------------------	---

Amount (\$) \$25,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 113 ITASCA, TX 76055
---	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 01/29/2026	Payee name ANGIE CHEN BUTTON CAMPAIGN
--------------------	--

Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 832748 RICHARDSON, TX 75083
--	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/23/2026	5 Payee name BETH VAN DUYN FOR CONGRESS	
6 Amount (\$) \$4,800.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 630167 IRVING, TX 75063	
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 FEDERAL CAMPAIGN CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/17/2026	Payee name BRETT BUSBY CAMPAIGN	
Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 417 AUSTIN, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2026	Payee name CANDY NOBLE CAMPAIGN	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1105 E MAIN ST #223 ALLEN , TX 75002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 01/29/2026	5 Payee name CAROLINE HARRIS FOR STATE REPRESENTATIVE
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6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 700 ROUND ROCK, TX 78680
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/29/2026	Payee name CHRIS SPENCER CAMPAIGN
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1497 CR 2985 HUGHES SPRINGS, TX 75656
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/29/2026	Payee name CHRIS TURNER CAMPAIGN
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 182093 ARLINGTON, TX 76096
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/29/2026	5 Payee name CODY HARRIS FOR STATE REPRESENTATIVE	
6 Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 100 AVE A PALESTINE, TX 75801	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2026	Payee name COLE HEFNER FOR STATE REPRESENTATIVE	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 167 MOUNT PLEASANT, TX 75456	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2026	Payee name DAVID COOK CAMPAIGN	
Amount (\$) \$25,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 309 E BROAD ST MANSFIELD, TX 76063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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: 5/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/29/2026	5 Payee name DR LALANI FOR TEXAS	
6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 6514 HOUSTON, TX 77265	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2026	Payee name ELECT CHARLENE WARD JOHNSON	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 9257751 HOUSTON, TX 77292	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2026	Payee name ELIZABETH "LIZ" CAMPOS CAMPAIGN	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1028 RIGSBY SAN ANTONIO, TX 78210	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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: 6/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 01/29/2026	5 Payee name ELLEN TROXCLAIR FOR TEXAS HOUSE
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6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 701 HWY 281 SUITE H #196 MARBLE FALLS, TX 78654
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/29/2026	Payee name HAROLD DUTTON CAMPAIGN
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3303 MAIN ST SUITE 303 HOUSTON, TX 77002
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/29/2026	Payee name HELEN KERWIN CAMPAIGN
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 115 S MAIN STREET CLEBURNE, TX 76033
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 01/29/2026	5 Payee name HUBERT VO CAMPAIGN
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6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 2227 ALIEF, TX 77411-2227
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/29/2026	Payee name JANIE LOPEZ CAMPAIGN
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2073 SAN BENITO, TX 78586
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/29/2026	Payee name JARED PATTERSON CAMPAIGN
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 5419 FRISCO, TX 75035
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/29/2026	5 Payee name JAY DEAN FOR TEXAS	
6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3822 HOLLY RIDGE LONGVIEW, TX 75605	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2026	Payee name JAY HARDAWAY FOR TEXAS	
Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1440 ABILENE, TX 79604-1440	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2026	Payee name JEFF LEACH CAMPAIGN	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 866186 PLANO, TX 75086	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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: 9/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/17/2026	5 Payee name JIMMY BLACKLOCK CAMPAIGN	
6 Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1588 AUSTIN, TX 78767	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/29/2026	Candidate/Officeholder name JUDITH ZAFFIRINI CAMPAIGN	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 627 LAREDO, TX 78042	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/23/2026	Candidate/Officeholder name JULIE JOHNSON FOR U.S. CONGRESS	
Amount (\$) \$4,800.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 100 N CENTRAL EXPY, SUITE 602 RICHARDSON, TX 75080	
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 FEDERAL CAMPAIGN CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 10/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/29/2026	5 Payee name KEN KING FOR STATE REPRESENTATIVE	
6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 517 CANADIAN, TX 79014	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/29/2026	Candidate/Officeholder name KERESA RICHARDSON CAMPAIGN	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 1179 MCKINNEY, TX 75070	
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 CAMPAGIN CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/29/2026	Candidate/Officeholder name MARC LAHOOD CAMPAIGN	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 4014 MCCULLOUGH AVE SAN ANTONIO, TX 78232	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 11/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 01/29/2026	5 Payee name MARK DORAZIO CAMPAIGN
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6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 461341 SAN ANTONIO, TX 78246
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/29/2026	Payee name MARY ANN PEREZ CAMPAIGN
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 262432 HOUSTON, TX 77297-2432
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/29/2026	Payee name MORGAN MEYER FOR TEXAS
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3838 OAK LAWN SUITE 400 DALLAS, TX 75219
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/30/2026	5 Payee name NATE SHEETS CAMPAIGN	
6 Amount (\$) \$50,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2910 NATURE NATE FARMS RD MCKINNEY, TX 75071	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2026	Payee name PAT CURRY CAMPAIGN	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 204 WOODHEW DR WACO, TX 76712	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2026	Payee name PHILIP CORTEZ CAMPAIGN	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7919 LIBERTY ISLAND SAN ANTONIO, TX 78227	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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: 13/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 01/29/2026	5 Payee name ROCKY THIGPEN FOR TEXAS
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6 Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 25 LUFKIN, TX 75902
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/29/2026	Payee name SCHOOLCRAFT FOR TEXAS
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8647 FM 725 MC QUEENEY, TX 78123
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/23/2026	Payee name SELF FOR CONGRESS
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Amount (\$) \$4,800.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1920 MCKINNEY, TX 75070
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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 FEDERAL CAMPAIGN CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 01/29/2026	5 Payee name STAN GERDES FOR STATE REPRESENTATIVE
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6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 606 GRESHAM ST SMITHVILLE, TX 78957
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/25/2026	Payee name STRIPE INC
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Amount (\$) \$607.33 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 185 BERRY ST #550 SAN FRANCISCO, CA 94170
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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 Pac Merchant Credit Card Processing Fee 1/26/2026 through 2/25/2026
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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 01/29/2026	Payee name TERRI LEO-WILSON CAMPAIGN
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 29 PIRATES BEACH W GALVESTON, TX 77554
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 01/29/2026	5 Payee name TEXANS FOR BRIAN HARRISON	
6 Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1950 ST ANDREWS DR OVILLA, TX 75154	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/29/2026	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee name TEXANS FOR CHARLES SCHWERTNER Payee address; City; State; Zip Code P.O. BOX 2448 GEORGETOWN, TX 78627	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/12/2026	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee name TEXAS FARM BUREAU Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support John Cornyn
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 16/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU
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6 Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Greg Abbott
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Dan Patrick
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Kelly Hancock
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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: 17/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Nate Sheets
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Dawn Buckingham
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Jimmy Blacklock
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: 18/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU
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6 Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Brett Busby
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Bryan Hughes
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Bob Hall
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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: 19/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Trent Ashby
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Charles Schwertner
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Leigh Wambsganss
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: 20/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Borris Miles
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Roland Gutierrez
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Judith Zaffirini
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: 21/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support David Cook
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Pete Flores
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Jose Menendez
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: 22/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Charles Perry
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Kevin Sparks
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support Nathaniel Moran
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: 23/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU
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6 Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 Federal In-kind contribution PAC website/social media endorsement - support Dan Crenshaw
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 Federal In-kind contribution PAC website/social media endorsement - support Keith Self
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 Federal In-kind contribution PAC website/social media endorsement - support Lance Gooden
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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: 24/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support Jake Ellzey
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support Lizzie Fletcher
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support Pat Fallon
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: 25/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support Craig Goldman
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support Ronny Jackson
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support Randy Weber
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: 26/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support Monica De La Cruz
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support Veronica Escobar
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support Pete Sessions
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: 27/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support Tom Sell
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support Mark Teixeira
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support Beth Van Duyne
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: 28/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support Roger Williams
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support Brandon Gill
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support Michael Cloud
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: 29/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support Henry Cuellar
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support Sylvia Garcia
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support John Carter
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: 30/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support Julie Johnson
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support Vicente Gonzalez
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 Federal In-kind contribution PAC website/social media endorsement - support Brian Babin
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: 31/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU
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6 Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 Federal In-kind contribution PAC website/social media endorsement - support August Pfluger
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Chris Spencer
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Brent Money
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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: 32/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU
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6 Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Cecil Bell Jr.
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Keith Bell
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Cole Hefner
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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: 33/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU
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6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Daniel Alders
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Jay Dean
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Cody Harris
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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 | 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: 34/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Brian E. Harrison
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Joanne Shofner
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Trey Wharton
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: 35/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Angelia Orr
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind Contribution PAC website/social Media endorsement - support Paul Dyson
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Will Metcalf
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: 36/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Stan Gerdes
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Janis Holt
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Ellen Troxclair
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: 37/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU
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6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Terry M. Wilson
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Christian Manuel
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Terri Leo-Wilson
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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: 38/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU
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6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Greg Bonnen
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Cody T. Vasut
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Matthew Morgan
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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 | 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: 39/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Gary Gates
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Jeffrey Barry
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support AJ Louderback
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: 40/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU
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6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Ryan Guillen
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Todd Hunter
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Katrina Pierson
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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: 41/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Denise Villalobos
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Oscar Longoria
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Sergio Munoz
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: 42/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU
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6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Janie Lopez
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Erin E. Gamez
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Armando Martinez
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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: 43/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Terry Canales
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Richard Pena Raymond
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support J.M. Lozano
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: 44/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Alan Schoolcraft
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Sheryl Cole
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Donna Howard
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: 45/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Caroline Harris Davila
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Wes Virdell
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Brad Buckley
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: 46/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU
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6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Hillary Hickland
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Pat Curry
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Richard Hayes
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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: 47/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU
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6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Helen Kerwin
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Shelby Slawson
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Mike Olcott
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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: 48/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Keresa Richardson
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Shelley Luther
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Ben Bumgarner
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: 49/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU
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6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Andy Hopper
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Mitch Little
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Matt Shaheen
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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: 50/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Jeff Leach
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support David Spiller
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support James Frank
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: 51/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU
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6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Mihaela E. Plesa
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Drew Darby
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Carrie Isaac
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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: 52/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Eddie Morales
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Mary E. Gonzalez
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Suleman Lalani
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: 53/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU
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6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Vince Perez
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Joe Moody
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Claudia Ordaz
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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: 54/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU
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6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Don McLaughlin Jr.
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Brooks Landgraf
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Tom Craddick
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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: 55/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU
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6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Dustin Burrows
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Carl Tepper
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Stan Kitzman
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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: 56/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Caroline Fairly
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Ken King
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Candy Noble
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: 57/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Salman Bhojani
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Nicole Collier
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support John McQueeney
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 58/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Charlie L. Geren
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Venton Jones
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Chris Turner
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: 59/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Rafael Anchia
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Jared Patterson
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Linda Garcia
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: 60/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU
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6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Morgan Meyer
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Aicha Davis
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Toni Rose
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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: 61/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Yvonne Davis
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Angie Chen Button
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Rhetta A. Bowers
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: 62/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Cassandra Hernandez
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Trey Martinez Fischer
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Philip Cortez
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: 63/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Elizabeth "Liz" Campos
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Marc LaHood
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Mark Dorazio
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: 64/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU
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6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Diego Bernal
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Josey Garcia
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Charles Cunningham
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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: 65/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU
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6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Mike Schofield
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Mano DeAyala
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Ann Johnson
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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: 66/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU
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6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support John H. Bucy
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Gene Wu
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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 02/12/2026	Payee name TEXAS FARM BUREAU
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Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702
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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 In-kind contribution PAC website/social media endorsement - support Charlene Ward Johnson
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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: 67/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Armando Walle
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Senfronia Thompson
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Harold V. Dutton
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: 68/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Ana Hernandez
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Mary Ann Perez
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Jolanda "Jo" Jones
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: 69/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
4 Date 02/12/2026	5 Payee name TEXAS FARM BUREAU	
6 Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Penny Morales Shaw
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Hubert Vo
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name TEXAS FARM BUREAU	
Amount (\$) \$11.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 2689 WACO, TX 76702	
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 In-kind contribution PAC website/social media endorsement - support Valoree Swanson
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: 70/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/13/2026	5 Payee name THE EPPSTEIN GROUP
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6 Amount (\$) \$50,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2830 SOUTH HULEN STREET #361 FORT WORTH, TX 76109
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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 In Kind Campaign Contribution Texting Campaign - Support Greg Abbott
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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 02/13/2026	Payee name THE EPPSTEIN GROUP
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Amount (\$) \$50,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2830 SOUTH HULEN STREET #361 FORT WORTH, TX 76109
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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 In Kind Campaign Contribution Texting Campaign - Support Nate Sheets
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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 02/25/2026	Payee name THE EPPSTEIN GROUP
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Amount (\$) \$50,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2830 SOUTH HULEN STREET #361 FORT WORTH, TX 76109
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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 In Kind Campaign Contribution Texting Campaign - Support Greg Abbott
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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: 71/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623
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4 Date 02/25/2026	5 Payee name THE EPPSTEIN GROUP
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6 Amount (\$) \$50,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2830 SOUTH HULEN STREET #361 FORT WORTH, TX 76109
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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 In Kind Campaign Contribution Texting Campaign - Support Nate Sheets
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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 02/12/2026	Payee name TONY GONZALES FOR CONGRESS
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Amount (\$) \$4,800.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11613 HUEBNER SAN ANTONIO, TX 78248
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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 FEDERAL CAMPAIGN CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/29/2026	Payee name VENTON JONES FOR TEXAS
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1075 GRIFFIN ST WEST DALLAS, TX 75215
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 72/72 Rpt:	2 FILER NAME Texas Farm Bureau AGFUND	3 Filer ID (Ethics Commission Filers) 00016623	
4 Date 01/29/2026	5 Payee name WILL METCALF CAMPAIGN		
6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 454 CONROE, TX 77305		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held