

CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

| | | | |
|--|---|--|---|
| 1 Filer ID (Ethics Commission Filers) 00065047 | 2 Total pages filed: 55 | OFFICE USE ONLY | |
| 3 COMMITTEE NAME Texans for Joan Huffman | | | Date Received ELECTRONICALLY FILED 02/23/2026 |
| 4 TREASURER NAME Brown, Jeb (Mr.) | | | Date Hand-delivered or Date Postmarked |
| 5 ORIGINAL REPORT TYPE | <input type="checkbox"/> January 15 | <input type="checkbox"/> Runoff | Receipt # Amount |
| | <input type="checkbox"/> July 15 | <input type="checkbox"/> 10th day after campaign treasurer resignation | |
| | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> Dissolution report | Date Processed |
| | <input checked="" type="checkbox"/> 8th day before election | <input type="checkbox"/> Other (specify) _____ | Date Imaged |
| 6 ORIGINAL PERIOD COVERED | Month Day Year 01/23/2026 | THROUGH | Month Day Year 02/21/2026 |

7 EXPLANATION OF CORRECTION
 We reported the incorrect Total Political Contributions Maintained as of the Last Day of the Reporting Period (line 5 on the Cover Sheet) on the originally filed report. We corrected the amount and filed an amended Campaign Finance Report before the filing deadline.

8 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Mr. Jeb Brown

 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

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC
COVER SHEET PG 1

| | | | |
|--|---|---|--|
| The SPAC Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00065047 | 2 Total pages filed: 55 |
| 3 COMMITTEE NAME Texans for Joan Huffman | | OFFICE USE ONLY | |
| | | Date Received ELECTRONICALLY FILED 02/23/2026 | |
| | | Date Hand-delivered or Date Postmarked | |
| | | Receipt # | Amount |
| | | Date Processed | |
| | | Date Imaged | |
| 4 COMMITTEE ADDRESS | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE | | |
| | 3733-1 Westheimer Rd. Suite 40 Houston, TX 77027 | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR | FIRST | MI |
| | Mr. | Jeb | |
| | | NICKNAME | SUFFIX |
| | | Brown | |
| 6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small> | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE | | |
| | 2900 Wesleyan Ste 580 Houston, TX 77027 | | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE | | |
| | 2900 Wesleyan Ste 580 Houston, TX 77027 | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER | EXTENSION |
| | (713) | 439-1988 | |
| 9 REPORT TYPE | <input type="checkbox"/> January 15 | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> Exceeded modified reporting limit |
| | <input type="checkbox"/> July 15 | <input checked="" type="checkbox"/> 8th day before election | <input type="checkbox"/> Dissolution (Attach PAC-DR) |
| | | <input type="checkbox"/> Runoff | <input type="checkbox"/> 10th day after campaign treasurer termination |
| | | | |
| 10 PERIOD COVERED | Month Day Year | THROUGH | Month Day Year |
| | 01/23/2026 | | 02/21/2026 |
| 11 ELECTION | ELECTION DATE | ELECTION TYPE | |
| | Month Day Year | <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> Runoff <input type="checkbox"/> Other |
| | 03/03/2026 | <input type="checkbox"/> General | <input type="checkbox"/> Special |

GO TO PAGE 2

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **SPAC**
COVER SHEET PG 2

| | | | | | | |
|--|--|---|----------------------------------|----------------------|--|----------------------|
| 12 COMMITTEE NAME Texans for Joan Huffman | | 13 Filer ID (Ethics Commission Filers) 00065047 | | | | |
| 14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder) | <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Officeholder | CANDIDATE / OFFICEHOLDER NAME Sen. Joan Huffman OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Attorney General | | | | |
| | <input type="checkbox"/> Measure | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;">BALLOT IDENTIFICATION / #</td> <td style="padding: 5px;">ELECTION DATE</td> </tr> <tr> <td style="padding: 5px;"></td> <td style="padding: 5px; text-align: center;"> Month Day Year </td> </tr> </table> | BALLOT IDENTIFICATION / # | ELECTION DATE | | Month Day Year |
| | BALLOT IDENTIFICATION / # | ELECTION DATE | | | | |
| | | Month Day Year | | | | |
| | DESCRIPTION | | | | | |
| | | | | | | |
| 15 CONTRIBUTION TOTALS | 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED | \$ 200.00 | | | | |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 531,616.04 | | | | |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 1,093.36 | | | | |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 2,577,672.66 | | | | |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 971,357.17 | | | | |
| 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. Jeb Brown
 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

**SPECIFIC-PURPOSE COMMITTEE REPORT:
PURPOSE**

**FORM SPAC
ADDENDUM**

Page 4 of 55

| | |
|---|---|
| 12 COMMITTEE NAME Texans for Joan Huffman | 13 Filer ID (Ethics Commission Filers) 00065047 |
|---|---|

| | | |
|---|---|---|
| 14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input checked="" type="checkbox"/> ASSIST (Officeholders only) | <input type="checkbox"/> CANDIDATE <input checked="" type="checkbox"/> OFFICE HOLDER | CANDIDATE / OFFICE HOLDER NAME Sen. Joan Huffman |
| | <input type="checkbox"/> MEASURE | OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) State Senator |
| | BALLOT IDENTIFICATION DESCRIPTION | ELECTION DATE MONTH DAY YEAR |

SUBTOTALS - SPAC

| | |
|---|---|
| 17 COMMITTEE NAME Texans for Joan Huffman | 18 Filer ID (Ethics Commission Filers) 00065047 |
|---|---|

| 19 SCHEDULE SUBTOTALS NAME OF SCHEDULE | SUBTOTAL AMOUNT |
|--|-----------------|
| 1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 516,727.00 |
| 2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 14,889.04 |
| 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 D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 7. <input type="checkbox"/> SCHEDULE E: LOANS | \$ |
| 8. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 2,576,835.81 |
| 9. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 10. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 11. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ 836.85 |
| 12. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 13. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 14. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ 318,490.80 |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/18 Rpt: 6/55 |
| 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/10/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, LAURA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77009 | 7 Amount of Contribution (\$) \$250.00 |
| 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#: _____) AT&T, INC. TEXAS PAC <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701 | Amount of Contribution (\$) \$5,000.00 |
| 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#: _____) AULD, MARIANNE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76102 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) LAWYER | | Employer (See Instructions) KELLY HART |
| Date 01/24/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALLARD, BROOKS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77040 | Amount of Contribution (\$) \$500.00 |
| 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#: _____) BERRY, MICHAEL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76116 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/18 Rpt: 7/55 |
| 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/19/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKRIDGE 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701 | 7 Amount of Contribution (\$) \$10,000.00 |
| 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#: _____) BLAIR, NELDA Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380 | Amount of Contribution (\$) \$1,000.00 |
| 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#: _____) BLAIR III, MAJOR Contributor address; City; State; Zip Code FORT WORTH, TX 76109 | Amount of Contribution (\$) \$250.00 |
| 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#: _____) BOWE, LANCE Contributor address; City; State; Zip Code HOUSTON, TX 77056 | Amount of Contribution (\$) \$500.00 |
| 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, JAMES Contributor address; City; State; Zip Code DALLAS, TX 75206 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/18 Rpt: 8/55 |
| 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/06/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYAN, TIM | 7 Amount of Contribution (\$) \$250.00 |
| | 6 Contributor address; City; State; Zip Code BRYAN, TX 77805 | |
| 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#: _____) BUSSEMEY, EMILE | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code HOUSTON, TX 77096 | |
| 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#: _____) CENTERPOINT ENERGY INC. POLITICAL ACTION COMMITTEE | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code HOUSTON, TX 77210-4567 | |
| 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#: _____) COLEMAN, DARREN | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code HOUSTON, TX 77007 | |
| 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#: _____) CONNER, MATTHEW | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code CYPRESS, TX 77433 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/18 Rpt: 9/55 |
| 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/20/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COURT REFORM ACTION FOR FAMILIES TEXAS PAC <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78757 | 7 Amount of Contribution (\$) \$100,000.00 |
| 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#: _____) DELISI COMMUNICATIONS PAC <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701 | Amount of Contribution (\$) \$5,000.00 |
| 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#: _____) DEMOES, RENATA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024 | Amount of Contribution (\$) \$250.00 |
| 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#: _____) DRAKE, BRINDLEY <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459 | Amount of Contribution (\$) \$100.00 |
| 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#: _____) DUNCAN, TERRI <hr/> Contributor address; City; State; Zip Code HOUSESHOE BAY, TX 78657 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/18 Rpt: 10/55 |
| 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/17/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERBEN & YARBROUGH <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701-2508 | 7 Amount of Contribution (\$) \$1,000.00 |
| 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#: _____) ESCUE, JESSICA <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845 | Amount of Contribution (\$) \$100.00 |
| 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#: _____) FAUST , TYSON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) PRESIDENT | | Employer (See Instructions) FAUST DISTRIBUTING |
| Date 02/11/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEATHER, ROBERT <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76101 | Amount of Contribution (\$) \$500.00 |
| 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#: _____) FISHER, KENNETH <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093 | Amount of Contribution (\$) \$10,000.00 |
| Principal occupation / Job title (See Instructions) EXECUTIVE CHAIRMAN | | Employer (See Instructions) FISHER INVESTMENTS |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/18 Rpt: 11/55 |
| 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 01/27/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, CHARLES C <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77006 | 7 Amount of Contribution (\$) \$100.00 |
| 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#: _____) FRASER, CHASE <hr/> Contributor address; City; State; Zip Code BOULDER, CO 80302 | Amount of Contribution (\$) \$1,000.00 |
| 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#: _____) FRIENDS OF THE TEXAS TECH UNIVERSITY SYSTEM PAC <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79409 | Amount of Contribution (\$) \$25,000.00 |
| 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#: _____) GATTIS P.E., JOE <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845 | Amount of Contribution (\$) \$25.00 |
| 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#: _____) GIBSON, GARY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/18 Rpt: 12/55 |
| 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/05/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRACE, JIM <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77401 | 7 Amount of Contribution (\$) \$5,000.00 |
| 8 Principal occupation / Job title (See Instructions) ATTORNEY | | 9 Employer (See Instructions) GRACE & MCEWAN CONSULTING |
| Date 02/09/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENBERG TRAUIG, PA PAC <hr/> Contributor address; City; State; Zip Code ALBANY, NY 12207 | Amount of Contribution (\$) \$5,000.00 |
| 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#: _____) GRIFFITH, CHELSEA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109 | Amount of Contribution (\$) \$500.00 |
| 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#: _____) GUERRA, CES <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 01/23/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMRICK, CAROL SUE <hr/> Contributor address; City; State; Zip Code ROSENBERG, TX 77471 | Amount of Contribution (\$) \$25.00 |
| 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: 8/18 Rpt: 13/55 |
| 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 01/27/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERMES, LEROY LEONARD <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77055 | 7 Amount of Contribution (\$) \$100.00 |
| 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#: _____) HETFIELD, MOSES <hr/> Contributor address; City; State; Zip Code BROWNSVILLE, TX 78521 | Amount of Contribution (\$) \$54.00 |
| 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#: _____) HODGES, CAROLYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056 | Amount of Contribution (\$) \$100.00 |
| 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#: _____) HODGES, MARY <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845 | Amount of Contribution (\$) \$50.00 |
| 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#: _____) HORD III, W D <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79702 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/18 Rpt: 14/55 |
| 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/20/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOUSTON ASSOCIATED GENERAL CONTRACTORS PAC | 7 Amount of Contribution (\$) \$5,000.00 |
| | 6 Contributor address; City; State; Zip Code HOUSTON, TX 77092 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 01/24/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUDSON, BARBARA JO | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code SPICEWOOD , TX 78669 | |
| 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#: _____) INDEPENDENT AUTO DEALERS ASSOC PAC | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code AUSTIN, TX 78750 | |
| 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#: _____) JOHNSON, JASON | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code HOUSTON, TX 77024 | |
| Principal occupation / Job title (See Instructions) REAL ESTATE | | Employer (See Instructions) METRO NATIONAL |
| Date 01/30/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, PHILIP | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code LUBBOCK, TX 79412 | |
| 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: 10/18 Rpt: 15/55 |
| 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/11/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY Jr., DEE <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76107 | 7 Amount of Contribution (\$) \$2,000.00 |
| 8 Principal occupation / Job title (See Instructions) PARTNER | | 9 Employer (See Instructions) KELLY HART AND HALLMAN |
| Date 02/11/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIMMEL, STEPHEN <hr/> Contributor address; City; State; Zip Code HORSESHOE BAY, TX 78657 | Amount of Contribution (\$) \$500.00 |
| 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#: _____) LATTU, ANDREW <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429 | Amount of Contribution (\$) \$25.00 |
| 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#: _____) LEE A WOODS POLITICAL ACTION COMMITTEE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701 | Amount of Contribution (\$) \$2,000.00 |
| 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#: _____) LISBONY III, EDWARD <hr/> Contributor address; City; State; Zip Code FLINT, TX 75762 | Amount of Contribution (\$) \$25.00 |
| 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: 11/18 Rpt: 16/55 |
| 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/11/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNDQUIST, TAMA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77019 | 7 Amount of Contribution (\$) \$2,500.00 |
| 8 Principal occupation / Job title (See Instructions) RETIRED | | 9 Employer (See Instructions) RETIRED |
| Date 01/30/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADDEN, STEVEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024 | Amount of Contribution (\$) \$10,000.00 |
| Principal occupation / Job title (See Instructions) FOUNDER AND CHAIRMAN | | Employer (See Instructions) APEX HERITAGE GROUP |
| Date 02/06/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSDEN, COLT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 01/30/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATOCHA, KEVIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057 | Amount of Contribution (\$) \$100,000.00 |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) STONEHENGE CO |
| Date 02/09/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS, CHARLES <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) LAWYER | | Employer (See Instructions) SELF |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 12/18 Rpt: 17/55 |
| 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/05/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCABE, ELIZABETH | 7 Amount of Contribution (\$) \$2,000.00 |
| 6 Contributor address; City; State; Zip Code DALLAS, TX 75229 | | |
| 8 Principal occupation / Job title (See Instructions) ATTORNEY | | 9 Employer (See Instructions) SELF |
| Date 02/03/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCURTHY, ANTHONY CHARLES | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code SPRING, TX 77373 | | |
| 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#: _____) MERRILL, RICK | Amount of Contribution (\$) \$500.00 |
| Contributor address; City; State; Zip Code FORT WORTH, TX 76107 | | |
| 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#: _____) MONCRIEF, KIT | Amount of Contribution (\$) \$1,000.00 |
| Contributor address; City; State; Zip Code FORT WORTH, TX 76107 | | |
| 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#: _____) MORENO, MARK | Amount of Contribution (\$) \$500.00 |
| Contributor address; City; State; Zip Code HOUSTON, TX 77025 | | |
| 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: 13/18 Rpt: 18/55 |
| 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 01/27/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, JOE | 7 Amount of Contribution (\$) \$250.00 |
| 6 Contributor address; City; State; Zip Code AUSTIN, TX 78757 | | |
| 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#: _____) NAU III, JOHN | Amount of Contribution (\$) \$100,000.00 |
| Contributor address; City; State; Zip Code HOUSTON, TX 77219 | | |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) SILVER EAGLE BEVERAGES |
| Date 02/11/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERCE MITCHELL LEGISLATIVE SOLUTIONS LLC | Amount of Contribution (\$) \$5,000.00 |
| Contributor address; City; State; Zip Code AUSTIN, TX 78746 | | |
| 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#: _____) PILLANS, JIM | Amount of Contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code BRYAN, TX 77802 | | |
| 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#: _____) Pediatrix Medical Group, Inc. Texas PAC | Amount of Contribution (\$) \$10,000.00 |
| Contributor address; City; State; Zip Code Sunrise, FL 33323 | | |
| 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: 14/18 Rpt: 19/55 |
| 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/06/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANEY, JOHN <hr/> 6 Contributor address; City; State; Zip Code BRYAN, TX 77801 | 7 Amount of Contribution (\$) \$500.00 |
| 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#: _____) RED PRODUCTIONS LLC <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76104 | Amount of Contribution (\$) \$250.00 |
| 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#: _____) REED, SAMUEL <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479 | Amount of Contribution (\$) \$50.00 |
| 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#: _____) RICHARDSON, GORDON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079 | Amount of Contribution (\$) \$1,000.00 |
| 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#: _____) ROTH, A G <hr/> Contributor address; City; State; Zip Code OAKWOOD, TX 75855 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 15/18 Rpt: 20/55 |
| 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/10/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROZYCKI, TAHL | 7 Amount of Contribution (\$) \$250.00 |
| 6 Contributor address; City; State; Zip Code HOUSTON, TX 77063 | | |
| 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#: _____) RYDMAN, JOHN | Amount of Contribution (\$) \$5,000.00 |
| Contributor address; City; State; Zip Code HOUSTON, TX 77007 | | |
| Principal occupation / Job title (See Instructions) PRESIDENT | | Employer (See Instructions) SPECS LIQUOR |
| Date 02/10/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHALL, MOLLIE | Amount of Contribution (\$) \$200.00 |
| Contributor address; City; State; Zip Code HOUSTON, TX 77009 | | |
| 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#: _____) SCHALL, MOLLIE | Amount of Contribution (\$) \$200.00 |
| Contributor address; City; State; Zip Code HOUSTON, TX 77009 | | |
| 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#: _____) SCHATTE, ANDREW | Amount of Contribution (\$) \$25,000.00 |
| Contributor address; City; State; Zip Code HOUSTON, TX 77005 | | |
| Principal occupation / Job title (See Instructions) EXECUTIVE | | Employer (See Instructions) AMERICUS HOLDINGS, LP |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 16/18 Rpt: 21/55 |
| 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/03/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, NANCY | 7 Amount of Contribution (\$) \$25.00 |
| | 6 Contributor address; City; State; Zip Code HOUSTON, TX 77077 | |
| 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#: _____) SHIELD TRUST LLC | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code HOUSTON, TX 77007 | |
| 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#: _____) SINCLAIR , DONALD | Amount of Contribution (\$) \$25,000.00 |
| | Contributor address; City; State; Zip Code HOUSTON, TX 77005 | |
| Principal occupation / Job title (See Instructions) CHAIRMAN | | Employer (See Instructions) WT PUMPING SERVICES LLC |
| Date 02/17/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KRISTIE | Amount of Contribution (\$) \$50.00 |
| | Contributor address; City; State; Zip Code PALESTINE, TX 75803 | |
| 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#: _____) SPARACINO, JAMIE | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code HOUSTON, TX 77027 | |
| 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: 17/18 Rpt: 22/55 |
| 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/10/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, STEVEN | 7 Amount of Contribution (\$) \$1,500.00 |
| 6 Contributor address; City; State; Zip Code HOUSTON, TX 77024 | | |
| 8 Principal occupation / Job title (See Instructions) CEO | | 9 Employer (See Instructions) AMEGY BANK |
| Date 02/17/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXAS FOOD & FUEL ASSN PAC | Amount of Contribution (\$) \$2,000.00 |
| Contributor address; City; State; Zip Code AUSTIN, TX 78701 | | |
| 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#: _____) THE BEER ALLIANCE OF TEXAS POLITICAL ACTION COMMITTEE | Amount of Contribution (\$) \$1,000.00 |
| Contributor address; City; State; Zip Code AUSTIN, TX 78701 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 01/25/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOOMEY, MICHAEL | Amount of Contribution (\$) \$1,000.00 |
| Contributor address; City; State; Zip Code AUSTIN, TX 78731 | | |
| 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#: _____) TORRES, GERARD | Amount of Contribution (\$) \$500.00 |
| Contributor address; City; State; Zip Code HOUSTON, TX 77023 | | |
| 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: 18/18 Rpt: 23/55 |
| 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/10/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARNER Jr., FREDERIC | 7 Amount of Contribution (\$) \$500.00 |
| | 6 Contributor address; City; State; Zip Code HOUSTON, TX 77019 | |
| 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#: _____) WEAVER, BRANDON | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034 | |
| 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#: _____) WERLING, CRAIG L | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459 | |
| 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#: _____) WITHINGTON, SHERRILEE | Amount of Contribution (\$) \$3.00 |
| | Contributor address; City; State; Zip Code HOUSTON, TX 77070 | |
| 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#: _____) YOUNG, GEORGE | Amount of Contribution (\$) \$10,000.00 |
| | Contributor address; City; State; Zip Code FORT WORTH, TX 76121 | |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) ENCAP MINERALS LLC |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | |
|---|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: Sch: 1/2 Rpt: 24/55 | |
| 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date 02/03/2026 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIENDS OF THE TEXAS TECH UNIVERSITY SYSTEM PAC | 8 Amount of contribution (\$) \$2,006.80 | 9 In-kind contribution description CAMPAIGN EVENT FEES AND EXPENSES |
| | 7 Contributor address; City; State; Zip Code LUBBOCK, TX 79409 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | 11 Employer (FOR NON-JUDICIAL) (See instructions) | |
| 12 Contributor's principal occupation (FOR JUDICIAL) | | 13 Contributor's job title (FOR JUDICIAL) (See instructions) | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) | | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |
| Date 02/06/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWYER, KEITH | Amount of contribution (\$) \$5,000.00 | In-kind contribution description CAMPAIGN EVENT FEES AND EXPENSES |
| | Contributor address; City; State; Zip Code Houston, TX 77043 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) PRESIDENT | | Employer (FOR NON-JUDICIAL) (See instructions) WESTERN ENTERTAINMENT MANAGEMENT INC | |
| Contributor's principal occupation (FOR JUDICIAL) | | Contributor's job title (FOR JUDICIAL) (See instructions) | |
| Contributor's employer/law firm (FOR JUDICIAL) | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |
| Date 02/20/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWYER, KEITH | Amount of contribution (\$) \$2,027.31 | In-kind contribution description CAMPAIGN SIGNS |
| | Contributor address; City; State; Zip Code Houston, TX 77043 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) PRESIDENT | | Employer (FOR NON-JUDICIAL) (See instructions) WESTERN ENTERTAINMENT MANAGEMENT INC | |
| Contributor's principal occupation (FOR JUDICIAL) | | Contributor's job title (FOR JUDICIAL) (See instructions) | |
| Contributor's employer/law firm (FOR JUDICIAL) | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | |
|--|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: Sch: 2/2 Rpt: 25/55 | |
| 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date 02/06/2026 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUFFINO, JOE JOHNNY | 8 Amount of contribution (\$) \$5,000.00 | 9 In-kind contribution description CAMPAIGN EVENT FEES AND EXPENSES |
| | 7 Contributor address; City; State; Zip Code BRYAN, TX 77808 | | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) REALTOR | | 11 Employer (FOR NON-JUDICIAL) (See instructions) CHERRY RUFFINO TEAM | |
| 12 Contributor's principal occupation (FOR JUDICIAL) | | 13 Contributor's job title (FOR JUDICIAL) (See instructions) | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) | | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |
| Date 02/09/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXAS BIPARTISAN JUSTICE COMMITTEE | Amount of contribution (\$) \$742.43 | In-kind contribution description PRINTING AND POSTAGE FOR POLITICAL ADVERTISING MAILER |
| | Contributor address; City; State; Zip Code JUDSON, TX 75660 | | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | Employer (FOR NON-JUDICIAL) (See instructions) | |
| Contributor's principal occupation (FOR JUDICIAL) | | Contributor's job title (FOR JUDICIAL) (See instructions) | |
| Contributor's employer/law firm (FOR JUDICIAL) | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |
| Date 02/04/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXAS BIPARTISAN JUSTICE COMMITTEE | Amount of contribution (\$) \$112.50 | In-kind contribution description PRINTING OF CAMPAIGN SLATE CARDS |
| | Contributor address; City; State; Zip Code JUDSON, TX 75660 | | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | Employer (FOR NON-JUDICIAL) (See instructions) | |
| Contributor's principal occupation (FOR JUDICIAL) | | Contributor's job title (FOR JUDICIAL) (See instructions) | |
| Contributor's employer/law firm (FOR JUDICIAL) | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: Sch: 1/28 Rpt: 26/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/05/2026 | 5 Payee name ADCRUNCH | |
| 6 Amount (\$) \$544,582.00 | 7 Payee address; City; State; Zip Code 7907 MOONFLOWER DR AUSTIN, TX 78750 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL ADVERTISING |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/26/2026 | Payee name ADCRUNCH | |
| Amount (\$) \$544,582.00 | Payee address; City; State; Zip Code 7907 MOONFLOWER DR AUSTIN, TX 78750 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL ADVERTISING |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/03/2026 | Payee name AIRBNB | |
| Amount (\$) \$249.68 | Payee address; City; State; Zip Code 888 BRANAN ST STE 4 SAN FRANCISCO, CA 94103 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LODGING TO ATTEND CAMPAIGN EVENT |
| 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.

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| 1 Total pages Schedule F1: Sch: 2/28 Rpt: 27/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
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| 4 Date 02/17/2026 | 5 Payee name AMAZON |
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| 6 Amount (\$) \$224.25 | 7 Payee address; City; State; Zip Code 410 TERRY AVENUE NORTH SEATTLE, WA 98109 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN OFFICE SUPPLIES |
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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 01/27/2026 | Payee name AMEGY BANK |
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| Amount (\$) \$30.00 | Payee address; City; State; Zip Code 1717 WEST LOOP S HOUSTON, TX 77027 |
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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 WIRE FEES |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 01/27/2026 | Payee name AMEGY BANK |
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| Amount (\$) \$15.00 | Payee address; City; State; Zip Code 1717 WEST LOOP S HOUSTON, TX 77027 |
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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 WIRE FEES |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 3/28 Rpt: 28/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 01/28/2026 | 5 Payee name AMEGY BANK | |
| 6 Amount (\$) \$30.00 | 7 Payee address; City; State; Zip Code 1717 WEST LOOP S HOUSTON, TX 77027 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WIRE FEES |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/29/2026 | Payee name AMEGY BANK | |
| Amount (\$) \$30.00 | Payee address; City; State; Zip Code 1717 WEST LOOP S HOUSTON, TX 77027 | |
| 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 WIRE FEES |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/30/2026 | Payee name AMEGY BANK | |
| Amount (\$) \$30.00 | Payee address; City; State; Zip Code 1717 WEST LOOP S HOUSTON, TX 77027 | |
| 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 WIRE FEES |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 4/28 Rpt: 29/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/04/2026 | 5 Payee name AMEGY BANK | |
| 6 Amount (\$) \$30.00 | 7 Payee address; City; State; Zip Code 1717 WEST LOOP S HOUSTON, TX 77027 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WIRE FEES |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/05/2026 | Payee name AMEGY BANK | |
| Amount (\$) \$120.00 | Payee address; City; State; Zip Code 1717 WEST LOOP S HOUSTON, TX 77027 | |
| 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 WIRE FEES |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/13/2026 | Payee name AMEGY BANK | |
| Amount (\$) \$30.00 | Payee address; City; State; Zip Code 1717 WEST LOOP S HOUSTON, TX 77027 | |
| 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 WIRE FEES |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 5/28 Rpt: 30/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
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| 4 Date 02/12/2026 | 5 Payee name AMEGY BANK |
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| 6 Amount (\$) \$30.00 | 7 Payee address; City; State; Zip Code 1717 WEST LOOP S HOUSTON, TX 77027 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WIRE FEES |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/17/2026 | Payee name AMEGY BANK |
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| Amount (\$) \$60.00 | Payee address; City; State; Zip Code 1717 WEST LOOP S HOUSTON, TX 77027 |
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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 WIRE FEES |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/18/2026 | Payee name AMEGY BANK |
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| Amount (\$) \$60.00 | Payee address; City; State; Zip Code 1717 WEST LOOP S HOUSTON, TX 77027 |
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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 WIRE FEES |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 6/28 Rpt: 31/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
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| 4 Date 02/20/2026 | 5 Payee name AMEGY BANK |
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| 6 Amount (\$) \$15.00 | 7 Payee address; City; State; Zip Code 1717 WEST LOOP S HOUSTON, TX 77027 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WIRE FEES |
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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 01/28/2026 | Payee name ANEDOT |
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| Amount (\$) \$21.60 | Payee address; City; State; Zip Code 5555 HILTON AVE SUITE 106 BATON ROUGE , LA 70808 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARDS FEES FOR CAMPAIGN CONTRIBUTIONS |
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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 02/03/2026 | Payee name ANEDOT |
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| Amount (\$) \$400.30 | Payee address; City; State; Zip Code 5555 HILTON AVE SUITE 106 BATON ROUGE , LA 70808 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARDS FEES FOR CAMPAIGN CONTRIBUTIONS |
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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.

| | | |
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| 1 Total pages Schedule F1: Sch: 7/28 Rpt: 32/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/02/2026 | 5 Payee name ANEDOT | |
| 6 Amount (\$) \$46.20 | 7 Payee address; City; State; Zip Code 5555 HILTON AVE SUITE 106 BATON ROUGE , LA 70808 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARDS FEES FOR CAMPAIGN CONTRIBUTIONS |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/05/2026 | Payee name ANEDOT | |
| Amount (\$) \$40.30 | Payee address; City; State; Zip Code 5555 HILTON AVE SUITE 106 BATON ROUGE , LA 70808 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARDS FEES FOR CAMPAIGN CONTRIBUTIONS |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/10/2026 | Payee name ANEDOT | |
| Amount (\$) \$20.30 | Payee address; City; State; Zip Code 5555 HILTON AVE SUITE 106 BATON ROUGE , LA 70808 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARDS FEES FOR CAMPAIGN CONTRIBUTIONS |
| 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)

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 8/28 Rpt: 33/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/10/2026 | 5 Payee name ANEDOT | |
| 6 Amount (\$) \$1,341.20 | 7 Payee address; City; State; Zip Code 5555 HILTON AVE SUITE 106 BATON ROUGE , LA 70808 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARDS FEES FOR CAMPAIGN CONTRIBUTIONS |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/26/2026 | Payee name ANEDOT | |
| Amount (\$) \$2,501.50 | Payee address; City; State; Zip Code 5555 HILTON AVE SUITE 106 BATON ROUGE , LA 70808 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARDS FEES FOR CAMPAIGN CONTRIBUTIONS |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/11/2026 | Payee name ANEDOT | |
| Amount (\$) \$1.30 | Payee address; City; State; Zip Code 5555 HILTON AVE SUITE 106 BATON ROUGE , LA 70808 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARDS FEES FOR CAMPAIGN CONTRIBUTIONS |
| 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.

| | | |
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| 1 Total pages Schedule F1: Sch: 9/28 Rpt: 34/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
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| 4 Date 02/13/2026 | 5 Payee name ANEDOT |
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| 6 Amount (\$) \$337.90 | 7 Payee address; City; State; Zip Code 5555 HILTON AVE SUITE 106 BATON ROUGE , LA 70808 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARDS FEES FOR CAMPAIGN CONTRIBUTIONS |
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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 02/19/2026 | Payee name ANEDOT |
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| Amount (\$) \$2.46 | Payee address; City; State; Zip Code 5555 HILTON AVE SUITE 106 BATON ROUGE , LA 70808 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARDS FEES FOR CAMPAIGN CONTRIBUTIONS |
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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 02/18/2026 | Payee name ANEDOT |
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| Amount (\$) \$8.30 | Payee address; City; State; Zip Code 5555 HILTON AVE SUITE 106 BATON ROUGE , LA 70808 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARDS FEES FOR CAMPAIGN CONTRIBUTIONS |
|------------------------|--|---|

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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.

| | | |
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| 1 Total pages Schedule F1: Sch: 10/28 Rpt: 35/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
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|-----------------------------|---|
| 4 Date 01/31/2026 | 5 Payee name ARCENEUX, AUSTIN |
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| 6 Amount (\$) \$5,000.00 | 7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE AUSTIN, TX 78729 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (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 CONTRACT LABOR |
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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 01/27/2026 | Payee name AT&T MOBILITY |
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| Amount (\$) \$157.63 | Payee address; City; State; Zip Code PO BOX 537104 ATLANTA, TX 30353-7104 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN TELECOMMUNICATIONS |
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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 02/03/2026 | Payee name BLAKEMORE PUBLIC AFFAIRS |
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| Amount (\$) \$27,500.00 | Payee address; City; State; Zip Code 1 E GREENWAY PLAZA STE 225 HOUSTON, TX 77046 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN PROFESSIONAL SERVICES |
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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.

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| 1 Total pages Schedule F1: Sch: 11/28 Rpt: 36/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/03/2026 | 5 Payee name BRADEN HAND | |
| 6 Amount (\$) \$2,500.00 | 7 Payee address; City; State; Zip Code 8405 LAUGHLIN LANE AUSTIN, TX 78744 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (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 CONTRACT LABOR |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/05/2026 | Payee name BULLHORN COMMUNICATIONS | |
| Amount (\$) \$55,568.00 | Payee address; City; State; Zip Code 550 CONGRESSIONAL BLVD STE 390 PMB 1027 CARMEL, IN 46032 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL ADVERTISING |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/12/2026 | Payee name BULLHORN COMMUNICATIONS | |
| Amount (\$) \$75,705.50 | Payee address; City; State; Zip Code 550 CONGRESSIONAL BLVD STE 390 PMB 1027 CARMEL, IN 46032 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL ADVERTISING |
| 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.

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| 1 Total pages Schedule F1: Sch: 12/28 Rpt: 37/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
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| 4 Date 02/18/2026 | 5 Payee name BULLHORN COMMUNICATIONS |
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| 6 Amount (\$) \$71,348.00 | 7 Payee address; City; State; Zip Code 550 CONGRESSIONAL BLVD STE 390 PMB 1027 CARMEL, IN 46032 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL ADVERTISING |
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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 02/03/2026 | Payee name CAMPAIGN PARTNERS LLC |
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| Amount (\$) \$5,000.00 | Payee address; City; State; Zip Code P O BOX 655 BELLAIRE, TX 77402 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN PROFESSIONAL SERVICES |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/06/2026 | Payee name CANOPY DALLAS UPTOWN |
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| Amount (\$) \$734.83 | Payee address; City; State; Zip Code 2950 CITYPLACE WEST BLVD DALLAS, TX 75024 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LODGING TO ATTEND CAMPAIGN EVENT |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 13/28 Rpt: 38/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
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| 4 Date 02/17/2026 | 5 Payee name CARDINAL STRATEGIES GROUP LLC |
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| 6 Amount (\$) \$10,000.00 | 7 Payee address; City; State; Zip Code 5957 CAPE CORAL DR AUSTIN, TX 78746 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN PROFESSIONAL SERVICES |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/17/2026 | Payee name CARDINAL STRATEGIES GROUP LLC |
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| Amount (\$) \$567.00 | Payee address; City; State; Zip Code 5957 CAPE CORAL DR AUSTIN, TX 78746 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MILEAGE REIMBURSEMENT FOR CAMPAIGN |
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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 02/09/2026 | Payee name CASE HALL & CO |
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| Amount (\$) \$35,809.06 | Payee address; City; State; Zip Code 1 E GREENWAY PLAZA STE 225 HOUSTON, TX 77046 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL ADVERTISING |
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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.

| | | |
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| 1 Total pages Schedule F1: Sch: 14/28 Rpt: 39/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/03/2026 | 5 Payee name CASE HALL & CO | |
| 6 Amount (\$) \$38,409.16 | 7 Payee address; City; State; Zip Code 1 E GREENWAY PLAZA STE 225 HOUSTON, TX 77046 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL ADVERTISING |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/17/2026 | Payee name CASE HALL & CO | |
| Amount (\$) \$34,657.66 | Payee address; City; State; Zip Code 1 E GREENWAY PLAZA STE 225 HOUSTON, TX 77046 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL ADVERTISING |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/03/2026 | Payee name CATALYST ADVISORS GROUP | |
| Amount (\$) \$1,000.00 | Payee address; City; State; Zip Code 1108 LAVACA ST 110-506 AUSTIN, TX 78701 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OFFICE SPACE FOR CAMPAIGN |
| 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.

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| 1 Total pages Schedule F1: Sch: 15/28 Rpt: 40/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
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| 4 Date 01/28/2026 | 5 Payee name CITICARDS |
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| 6 Amount (\$) \$89.84 | 7 Payee address; City; State; Zip Code P O BOX 78081 PHOENIX, AZ 85062 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (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 CREDIT CARD PAYMENT |
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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 02/06/2026 | Payee name CITICARDS |
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| Amount (\$) \$747.01 | Payee address; City; State; Zip Code P O BOX 78081 PHOENIX, AZ 85062 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (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 CREDIT CARD PAYMENT |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/20/2026 | Payee name HARRIS COUNTY REPUBLICAN PARTY |
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| Amount (\$) \$1,000.00 | Payee address; City; State; Zip Code 8588 KATY FREEWAY STE 445 HOUSTON, TX 77024 |
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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 POLITICAL DONATION |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 16/28 Rpt: 41/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
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| 4 Date 02/11/2026 | 5 Payee name HOUSTON TOWN CAR & LIMO |
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| 6 Amount (\$) \$275.00 | 7 Payee address; City; State; Zip Code 14403 S VISTAGLEN LOOP HOUSTON, TX 77084 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense VALET PARKING FOR CAMPAIGN EVENT |
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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 02/11/2026 | Payee name JENNIFER NAEDLER CONSULTING |
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| Amount (\$) \$3,500.00 | Payee address; City; State; Zip Code 1962 INDIANA ST HOUSTON, TX 77019 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN PROFESSIONAL SERVICES |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/11/2026 | Payee name JENNIFER NAEDLER CONSULTING |
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| Amount (\$) \$238.49 | Payee address; City; State; Zip Code 1962 INDIANA ST HOUSTON, TX 77019 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL ADVERTISING |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 17/28 Rpt: 42/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/03/2026 | 5 Payee name JOHN DONER & ASSOCIATES INC | |
| 6 Amount (\$) \$5,000.00 | 7 Payee address; City; State; Zip Code 1005 CONGRESS AVE STE 580 AUSTIN, TX 78701 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN PROFESSIONAL SERVICES |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/03/2026 | Payee name JOHN DONER & ASSOCIATES INC | |
| Amount (\$) \$1,993.97 | Payee address; City; State; Zip Code 1005 CONGRESS AVE STE 580 AUSTIN, TX 78701 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL ADVERTISING |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/17/2026 | Payee name JOHN DONER & ASSOCIATES INC | |
| Amount (\$) \$779.40 | Payee address; City; State; Zip Code 1005 CONGRESS AVE STE 580 AUSTIN, TX 78701 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL ADVERTISING |
| 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.

| | | |
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| 1 Total pages Schedule F1: Sch: 18/28 Rpt: 43/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
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| 4 Date 02/03/2026 | 5 Payee name JOHNSON, SAM |
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| 6 Amount (\$) \$10,607.25 | 7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE AUSTIN, TX 78701 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (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 CONTRACT LABOR |
|---------------------------------|--|---|

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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 02/03/2026 | Payee name LAND ROVER FINANCIAL GROUP |
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| Amount (\$) \$737.47 | Payee address; City; State; Zip Code P O BOX 650546 DALLAS, TX 75265 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN VEHICLE EXPENSE |
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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 01/31/2026 | Payee name LOJO, WENDY |
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| Amount (\$) \$500.00 | Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE SUGAR LAND, TX 77478 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (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 CONTRACT LABOR |
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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: 19/28 Rpt: 44/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 01/29/2026 | 5 Payee name LOST PINES REPUBLICAN WOMAN | |
| 6 Amount (\$) \$300.00 | 7 Payee address; City; State; Zip Code 3000 HWY 71 EAST BASTROP, TX 78602 | |
| 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 POLITICAL DONATION |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/27/2026 | Payee name MAHNKE, CHRISTY | |
| Amount (\$) \$1,875.00 | Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE HOUSTON, TX 77055 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (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 BOOKKEEPING SERVICES |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/03/2026 | Payee name MAMMOTH MARKETING GROUP, LLC | |
| Amount (\$) \$20,000.00 | Payee address; City; State; Zip Code 4500 BISSONNET STREET STE 370 BELLAIRE, TX 77401 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN PROFESSIONAL SERVICES |
| 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.

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| 1 Total pages Schedule F1: Sch: 20/28 Rpt: 45/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
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| 4 Date 02/17/2026 | 5 Payee name MAMMOTH MARKETING GROUP, LLC |
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| 6 Amount (\$) \$20,000.00 | 7 Payee address; City; State; Zip Code 4500 BISSONNET STREET STE 370 BELLAIRE, TX 77401 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN PROFESSIONAL SERVICES |
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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 01/31/2026 | Payee name MILLSAP, PETRA GLORIA |
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| Amount (\$) \$500.00 | Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE LAKE JACKSON, TX 77566 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (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 CONTRACT LABOR |
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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 01/31/2026 | Payee name OPPERMAN, SEAN |
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| Amount (\$) \$500.00 | Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE AUSTIN, TX 78730 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (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 CONTRACT LABOR |
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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: 21/28 Rpt: 46/55 | 2 | FILER NAME Texans for Joan Huffman | 3 | Filer ID (Ethics Commission Filers) 00065047 |
| 4 | Date 02/02/2026 | 5 | Payee name OVERTON HOTEL | | |
| 6 | Amount (\$) \$244.93 | 7 | Payee address; City; State; Zip Code 2322 MAC DAVIS LANE LUBBOCK, TX 79401 | | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LODGING TO ATTEND CAMPAIGN EVENT | | |
| 9 | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | Date 01/30/2026 | | Payee name POLITICAL COMMUNICATIONS ADVERTISING | | |
| | Amount (\$) \$70,000.00 | | Payee address; City; State; Zip Code 11 E 44TH ST ROOM 301 NEW YORK, NY 10017 | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL ADVERTISING | | |
| | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | Date 02/13/2026 | | Payee name POLITICAL COMMUNICATIONS ADVERTISING | | |
| | Amount (\$) \$433,015.06 | | Payee address; City; State; Zip Code 11 E 44TH ST ROOM 301 NEW YORK, NY 10017 | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL ADVERTISING | | |
| | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 22/28 Rpt: 47/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
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| 4 Date 02/18/2026 | 5 Payee name POLITICAL COMMUNICATIONS ADVERTISING |
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| 6 Amount (\$) \$433,015.06 | 7 Payee address; City; State; Zip Code 11 E 44TH ST ROOM 301 NEW YORK, NY 10017 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL ADVERTISING |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2026 | Payee name PUBLIC STORAGE |
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| Amount (\$) \$249.00 | Payee address; City; State; Zip Code 1213 W 6TH ST AUSTIN, TX 78701 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STORAGE FOR OFFICEHOLDER'S AUSTIN OFFICE |
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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 02/02/2026 | Payee name PUBLIC STORAGE |
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| Amount (\$) \$183.00 | Payee address; City; State; Zip Code 2603 JOEL WHEATON RD STE 400 HOUSTON, TX 77082 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STORAGE FOR OFFICEHOLDER'S HOUSTON OFFICE |
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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.

| | | |
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| 1 Total pages Schedule F1: Sch: 23/28 Rpt: 48/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
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| 4 Date 02/12/2026 | 5 Payee name RACONTEUR COMPANY |
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| 6 Amount (\$) \$20,787.31 | 7 Payee address; City; State; Zip Code P O BOX 26511 AUSTIN, TX 78755 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN PROFESSIONAL SERVICES |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/09/2026 | Payee name SOUTHWEST AIRLINES |
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| Amount (\$) \$343.40 | Payee address; City; State; Zip Code 2702 LOVE FIELD DR DALLAS, TX 75235 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TRAVEL TO ATTEND CAMPAIGN EVENT |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 01/28/2026 | Payee name SOUTHWEST AIRLINES |
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| Amount (\$) \$462.40 | Payee address; City; State; Zip Code 2702 LOVE FIELD DR DALLAS, TX 75235 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TRAVEL TO ATTEND CAMPAIGN EVENT |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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: 24/28 Rpt: 49/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
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|-----------------------------|---|
| 4 Date 02/12/2026 | 5 Payee name STRATUS INTELLIGENCE |
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| 6 Amount (\$) \$6,000.00 | 7 Payee address; City; State; Zip Code 3745 MEDINA RD STE C MEDINA, OH 44256 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Polling Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN PROFESSIONAL SERVICES |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| | |
|--------------------|------------------------------------|
| Date 02/09/2026 | Payee name STRATUS INTELLIGENCE |
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|---------------------------|---|
| Amount (\$) \$6,000.00 | Payee address; City; State; Zip Code 3745 MEDINA RD STE C MEDINA, OH 44256 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Polling Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN PROFESSIONAL SERVICES |
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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 01/27/2026 | Payee name STRATUS INTELLIGENCE |
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|---------------------------|---|
| Amount (\$) \$6,000.00 | Payee address; City; State; Zip Code 3745 MEDINA RD STE C MEDINA, OH 44256 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Polling Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN PROFESSIONAL SERVICES |
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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: 25/28 Rpt: 50/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
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| 4 Date 02/05/2026 | 5 Payee name TEXAS PRESS SERVICE INC |
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| 6 Amount (\$) \$64,108.00 | 7 Payee address; City; State; Zip Code 8800 BUSINESS PARK DRIVE #100 AUSTIN, TX 78759 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL ADVERTISING |
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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 02/18/2026 | Payee name THE BEEMAN HOTEL |
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| Amount (\$) \$617.25 | Payee address; City; State; Zip Code 6070 N CENTRAL EXPWY DALLAS, TX 75206 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LODGING TO ATTEND CAMPAIGN EVENT |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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|--------------------|----------------------------|
| Date 01/28/2026 | Payee name TWITTER, INC |
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| Amount (\$) \$395.00 | Payee address; City; State; Zip Code 1355 MARKET ST STE 900 SAN FRANCISCO , CA 94103 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SUBSCRIPTION |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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: 26/28 Rpt: 51/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/09/2026 | 5 Payee name UBER | |
| 6 Amount (\$) \$143.84 | 7 Payee address; City; State; Zip Code 1455 MARKET ST STE 400 SAN FRANCISCO, CA 94103 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OFFICEHOLDER GROUND TRANSPORTATION |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/12/2026 | Payee name UBER | |
| Amount (\$) \$21.58 | Payee address; City; State; Zip Code 1455 MARKET ST STE 400 SAN FRANCISCO, CA 94103 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OFFICEHOLDER GROUND TRANSPORTATION |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/13/2026 | Payee name UBER | |
| Amount (\$) \$9.99 | Payee address; City; State; Zip Code 1455 MARKET ST STE 400 SAN FRANCISCO, CA 94103 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OFFICEHOLDER GROUND TRANSPORTATION |
| 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: 27/28 Rpt: 52/55 | | 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 | |
| 4 Date 01/26/2026 | | 5 Payee name UNITED AIRLINES | | | |
| 6 Amount (\$) \$767.31 | | 7 Payee address; City; State; Zip Code 233 S WACKER DR 11TH FLOOR CHICAGO, IL 60606 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Travel In District | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TRAVEL TO ATTEND CAMPAIGN EVENT | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |
| Date 01/27/2026 | | Payee name UNITED AIRLINES | | | |
| Amount (\$) \$424.38 | | Payee address; City; State; Zip Code 233 S WACKER DR 11TH FLOOR CHICAGO, IL 60606 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Travel In District | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TRAVEL TO ATTEND CAMPAIGN EVENT | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |
| Date 02/02/2026 | | Payee name UNITED REPUBLICANS OF HARRIS COUNTY | | | |
| Amount (\$) \$515.38 | | Payee address; City; State; Zip Code P O BOX 130923 HOUSTON, TX 77219 | | | |
| 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 POLITICAL DONATION | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |

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: 28/28 Rpt: 53/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/03/2026 | 5 Payee name WEEKS & CO INC | |
| 6 Amount (\$) \$5,000.00 | 7 Payee address; City; State; Zip Code 5701 W SLAUGHTER LANE STE A 130-500 AUSTIN, TX 78749 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN PROFESSIONAL SERVICES |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |
| | | Office held |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F4: Sch: 1/1 Rpt: 54/55 | 2 FILER NAME Texans for Joan Huffman | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 CREDIT CARD ISSUER | Name of financial institution CITICARDS | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT | (a) Amount Charged \$179.68 | (b) Date of Charge 01/23/2026 |
| 7 PAYEE | (a) Payee name YOU TUBE TV | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description CAMPAIGN TELECOMMUNICATIONS |
| | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| PAYMENT | (a) Amount Charged \$595.00 | (b) Date of Charge 02/03/2026 |
| PAYEE | (a) Payee name CITICARDS | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Payee address; City, State, Zip Code P O BOX 658202 DALLAS, TX 75265 |
| | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| PAYMENT | (a) Amount Charged \$62.17 | (b) Date of Charge 01/23/2026 |
| PAYEE | (a) Payee name EXXON MOBILE | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Payee address; City, State, Zip Code 19216 FM 365 BEAUMONT, TX 77705 |
| | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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

SCHEDULE K

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule K: Sch: 1/1 Rpt: 55/55 |
| 2 FILER NAME Texans for Joan Huffman | | 3 Filer ID (Ethics Commission Filers) 00065047 |
| 4 Date 02/18/2026 | 5 Name of person from whom amount is received ADCRUNCH <hr/> 6 Address of person from whom amount is received; City; State; Zip Code AUSTIN, TX 78750 | 8 Amount (\$) \$312,977.00 |
| 7 Purpose for which amount is received REFUND | | <input type="checkbox"/> Check if political contribution returned to filer |
| Date 01/31/2026 | Name of person from whom amount is received FIDELITY INVESTMENTS <hr/> Address of person from whom amount is received; City; State; Zip Code BOSTON, MA 02205 | Amount (\$) \$5,513.80 |
| Purpose for which amount is received DIVIDEND INCOME | | <input type="checkbox"/> Check if political contribution returned to filer |