

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <b>32</b>		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <b>Mr</b> FIRST <b>Larry</b> MI <b>J</b> NICKNAME <b>Josh</b> LAST <b>Horne</b> SUFFIX			OFFICE USE ONLY		
				Date Received <b>3:50 AM</b>		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>Po Box 1075 Flatonia, TX 78941</b>			FILED <b>Open</b> <b>FEB 2 2026</b>		
			Date Hand-delivered or Mailed Postmarked <b>1/26/2026</b>			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE <b>(361)</b> PHONE NUMBER <b>210-6958</b>			Receipt # <b>CO. ELECTIONS ADMINISTRATOR</b> Amount \$ <b>0.00</b>		
			Date Processed			
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <b>Mrs.</b> FIRST <b>Beverly</b> MI <b>Zapalac</b> NICKNAME LAST <b>Ponder</b> SUFFIX			Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; <b>606 E N Main St. Flatonia TX 78941</b>			STATE; ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE <b>(979)</b> PHONE NUMBER <b>224-6197</b>					
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election		<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)		
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election		<input type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month <b>1</b>	Day <b>1</b>	Year <b>26</b>	Month <b>1</b>	Day <b>22</b>	Year <b>26</b>
11 ELECTION	ELECTION DATE Month <b>3</b> Day <b>3</b> Year <b>26</b>	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special				
12 OFFICE	OFFICE HELD (if any) <b>City Council (Flatonia)</b>			13 OFFICE SOUGHT (if known) <b>County Judge</b>		
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.					
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS				
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRESS				

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME

*Josh Homan*

16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION  
TOTALS

1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)

\$ *0*

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ *11709.00*

EXPENDITURE  
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$ *0*

CONTRIBUTION  
BALANCE

4. TOTAL POLITICAL EXPENDITURES

\$ *7308.24*

OUTSTANDING  
LOAN TOTALS

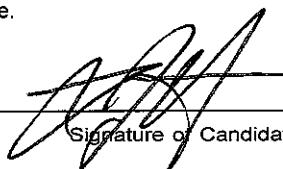
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ *3450.71*

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ *0*

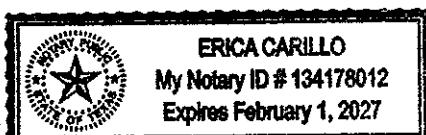
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP

Sworn to and subscribed before me by Larry Joshua Homan this the 2nd day of February,  
202021, to certify which, witness my hand and seal of office.

*Erica Carillo*

*Erica Carillo*

*CSR*

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.

(street)

(city)

(state)

(zip code)

(country)

Executed in \_\_\_\_\_, County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.  
(month) (year)

Signature of Candidate/Officeholder (Declarant)

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

<b>19</b> FILER NAME	<i>Josh Honan</i>	<b>20</b> Filer ID (Ethics Commission Filers)
<b>21</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7730.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 3979.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ _____
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ _____
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 7308.24
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ _____
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ _____
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ _____
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ _____
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ _____
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ _____
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ _____

## MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: <i>16</i>
2 FILER NAME <i>Josc Human</i>			3 Filer ID (Ethics Commission Filers)
4 Date <i>1/5/24</i>	5 Full name of contributor <i>Kristine Human</i>	<input type="checkbox"/> out-of-state PAC (ID#: .....)	7 Amount of contribution (\$) <i>125.00</i>
6 Contributor address; <i>56064 257th St Glenwood IA 51534</i>	City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date <i>1/4/24</i>	Full name of contributor <i>Ranney McDonough</i>	<input type="checkbox"/> out-of-state PAC (ID#: .....)	Amount of contribution (\$) <i>500.00</i>
Contributor address; <i>8150 Guettlerman Elkhorn Rd Schulenburg TX 78956</i>	City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/8/24</i>	Full name of contributor <i>Aaron + Leanna Gray</i>	<input type="checkbox"/> out-of-state PAC (ID#: .....)	Amount of contribution (\$) <i>200.00</i>
Contributor address; <i>611 S Converse St Flatonia TX 78941</i>	City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/9/24</i>	Full name of contributor <i>Richard Schaefer</i>	<input type="checkbox"/> out-of-state PAC (ID#: .....)	Amount of contribution (\$) <i>200.00</i>
Contributor address; <i>1732 Slaughterhouse Ln Flatonia TX 78941</i>	City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: <i>2/16</i>
2 FILER NAME <i>Josh Horner</i>			3 Filer ID (Ethics Commission Filers)
4 Date <i>1/4/26</i>	5 Full name of contributor <i>Bill Dunk</i>	<input type="checkbox"/> out-of-state PAC (ID#: .....)	7 Amount of contribution (\$) <i>200.00</i>
6 Contributor address; <i>6690 FM 2762 Flatonia TX 78941</i>	City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date <i>1/4/26</i>	Full name of contributor <i>Don Mikulanka</i>	<input type="checkbox"/> out-of-state PAC (ID#: .....)	Amount of contribution (\$) <i>125.00</i>
Contributor address; <i>9365 S SH 95 Flatonia TX 78941</i>	City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/4/26</i>	Full name of contributor <i>Beverly Zapata Ponder</i>	<input type="checkbox"/> out-of-state PAC (ID#: .....)	Amount of contribution (\$) <i>100.00</i>
Contributor address; <i>686 E N Main Flatonia TX 78941</i>	City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/10/26</i>	Full name of contributor <i>Gary Cerny</i>	<input type="checkbox"/> out-of-state PAC (ID#: .....)	Amount of contribution (\$) <i>100.00</i>
Contributor address; <i>3625 Stryk Rd Flatonia TX 78941</i>	City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

## MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: <i>3/16</i>
2 FILER NAME <i>Josh Homan</i>				3 Filer ID (Ethics Commission Filers)
4 Date <i>1/10/26</i>	5 Full name of contributor <i>Karen Farck</i>	<input type="checkbox"/> out-of-state PAC (ID#_____)		7 Amount of contribution (\$) <i>140.00</i>
6 Contributor address; <i>310 N Market st Flatonia TX 78941</i>	City; State; Zip Code			
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)		
Date <i>1/10/26</i>	Full name of contributor <i>Terri Homan</i>	<input type="checkbox"/> out-of-state PAC (ID#_____)		Amount of contribution (\$) <i>250.00</i>
Contributor address; <i>2890 Hwy Rd. Flatonia Tx 78941</i>	City; State; Zip Code			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date <i>1/10/26</i>	Full name of contributor <i>Jodie Siptak</i>	<input type="checkbox"/> out-of-state PAC (ID#_____)		Amount of contribution (\$) <i>40.00</i>
Contributor address; <i>Po Box 392 Flatonia Tx 78941</i>	City; State; Zip Code			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date <i>1/10/26</i>	Full name of contributor <i>Alex Wellborn</i>	<input type="checkbox"/> out-of-state PAC (ID#_____)		Amount of contribution (\$) <i>100.00</i>
Contributor address; <i>809 Pawley St. Schertz Tx 78956</i>	City; State; Zip Code			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: <i>4/16</i>
2 FILER NAME <i>Josh Homan</i>			3 Filer ID (Ethics Commission Filers)
4 Date <i>1/16/24</i>	5 Full name of contributor <i>Christian Castillo</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$ <i>800.00</i> )
	6 Contributor address; <i>637 Walnut St. Flatonia TX 78941</i>	City; State; Zip Code	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date <i>1/16/24</i>	Full name of contributor <i>Craig Beckly</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$ <i>100.00</i> )
	Contributor address; <i>2696 Dans Rd. Mabden, TX 78949</i>	City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/16/24</i>	Full name of contributor <i>Lauren Flores</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$ <i>100.00</i> )
	Contributor address; <i>4731 FM 2237 Flatonia TX 78941</i>	City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/16/24</i>	Full name of contributor <i>Kip Brunner</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$ <i>100.00</i> )
	Contributor address; <i>2052 CR422 Waelder TX 78959</i>	City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <i>5/16</i>
2 FILER NAME <i>Josh Homan</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>1/10/26</i>	5 Full name of contributor <i>Colton Hadaway</i>	6 Contributor address; City; State; Zip Code <i>3044 FM 609 La Grange TX 78945</i>
7 Amount of contribution (\$) <i>160.00</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>1/10/26</i>	Full name of contributor <i>Bernie Satterwhite</i>	□ out-of-state PAC (ID#: <i>60.00</i> )
Contributor address; City; State; Zip Code <i>1851 CR 402 Flatonia TX 78941</i>		Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>1/10/26</i>	Full name of contributor <i>Bobby Smith</i>	□ out-of-state PAC (ID#: <i>60.00</i> )
Contributor address; City; State; Zip Code <i>1304 Kellert Ave Schwansburg TX 78956</i>		Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>1/10/26</i>	Full name of contributor <i>Colton Starnes</i>	□ out-of-state PAC (ID#: <i>60.00</i> )
Contributor address; City; State; Zip Code <i>126 CR 196 Hallettville TX 77964</i>		Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

## MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: <b>6/16</b>
2 FILER NAME <i>Josh Homan</i>			3 Filer ID (Ethics Commission Filers)
4 Date <b>1/10/26</b>	5 Full name of contributor <i>Abraham Gatica</i>	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$ <b>60.00</b> )
6 Contributor address; <i>204 E 5th St. Flatonia TX 78941</i>		City; State; Zip Code	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date <b>1/10/26</b>	Full name of contributor <i>Code Kohurik</i>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$ <b>60.00</b> )
Contributor address; <i>1277 FM 957 Hallettsville TX 77944</i>		City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>1/10/26</b>	Full name of contributor <i>Preston Mackey</i>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$ <b>60.00</b> )
Contributor address; <i>3014 US 77 S Hallettsville TX 77944</i>		City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>1/10/26</b>	Full name of contributor <i>Kearaeth Ponder</i>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$ <b>240.00</b> )
Contributor address; <i>606 E N Main Flatonia TX 78941</i>		City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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## MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: <i>7 1/4</i>
2 FILER NAME <i>Josh Haven</i>			3 Filer ID (Ethics Commission Filers)
4 Date <i>1/10/24</i>	5 Full name of contributor <i>Jamie Mikulik</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) <i>100.00</i>
6 Contributor address; <i>1500 US90 Flatonia TX 78941</i>		City; State; Zip Code	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date <i>1/10/24</i>	Full name of contributor <i>Shawn Montague</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>60.00</i>
Contributor address; <i>264 Crystal Valley Cibolo, TX 78108</i>		City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/10/24</i>	Full name of contributor <i>Daniel Rosas</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>60.00</i>
Contributor address; <i>208 Richard Rd. LaGrange TX 78945</i>		City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/10/24</i>	Full name of contributor <i>Jamie Montgomery</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>100.00</i>
Contributor address; <i>4015 East St. Wimber, TX 78962</i>		City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: <b>8/16</b>
2 FILER NAME <i>Josh Homm</i>			3 Filer ID (Ethics Commission Filers)
4 Date <b>1/10/26</b>	5 Full name of contributor <b>Blake Michaelic</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) <b>60.00</b>
6 Contributor address; <b>1004 3 Peck St. Suite TX 77984</b>	City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date <b>1/10/26</b>	Full name of contributor <b>Heather Wair</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>220.00</b>
Contributor address; <b>330 W Zand St Flatana TX 78841</b>	City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>1/10/26</b>	Full name of contributor <b>Leanne Vyv Julia</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>60.00</b>
Contributor address; <b>2135 Henderson Ln. Schertzburg TX 78951</b>	City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>1/10/26</b>	Full name of contributor <b>Brent Kover</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>120.00</b>
Contributor address; <b>2524 Jackson Rd. LaGrange TX 78945</b>	City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

## MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

<p>The Instruction Guide explains how to complete this form.</p>				<p>1 Total pages Schedule A1: <u>0/1</u></p>
<p>2 FILER NAME <u>Josh Horner</u></p>				<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 Date <u>1/10/26</u></p>	<p>5 Full name of contributor <u>Sam Gunz</u></p>	<p><input type="checkbox"/> out-of-state PAC (ID#_____)</p>		<p>7 Amount of contribution (\$) <u>120.00</u></p>
	<p>6 Contributor address; <u>111 E Travis LaGrange TX 78945</u></p>	City;	State;	Zip Code
<p>8 Principal occupation / Job title (See Instructions)</p>			<p>9 Employer (See Instructions)</p>	
<p>Date <u>1/10/26</u></p>	<p>Full name of contributor <u>Tim Wolff</u></p>	<p><input type="checkbox"/> out-of-state PAC (ID#_____)</p>		<p>Amount of contribution (\$) <u>60.00</u></p>
	<p>Contributor address; <u>11001 N SH 95 Flatonia TX 78941</u></p>	City;	State;	Zip Code
<p>Principal occupation / Job title (See Instructions)</p>			<p>Employer (See Instructions)</p>	
<p>Date <u>1/10/26</u></p>	<p>Full name of contributor <u>Brock Hollay</u></p>	<p><input type="checkbox"/> out-of-state PAC (ID#_____)</p>		<p>Amount of contribution (\$) <u>60.00</u></p>
	<p>Contributor address; <u>3486 Davis Rd. Muldoon TX 78949</u></p>	City;	State;	Zip Code
<p>Principal occupation / Job title (See Instructions)</p>			<p>Employer (See Instructions)</p>	
<p>Date <u>1/10/26</u></p>	<p>Full name of contributor <u>Anthony Lichnovsky</u></p>	<p><input type="checkbox"/> out-of-state PAC (ID#_____)</p>		<p>Amount of contribution (\$) <u>120.00</u></p>
	<p>Contributor address; <u>609 N Mechanic Wimber TX 78962</u></p>	City;	State;	Zip Code
<p>Principal occupation / Job title (See Instructions)</p>			<p>Employer (See Instructions)</p>	
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>				

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: 16/16
<b>2 FILER NAME</b> <i>Josh Hansen</i>			<b>3 Filer ID (Ethics Commission Filers)</b>
<b>4 Date</b> <i>1/10/24</i>	<b>5 Full name of contributor</b> <i>Erik Estrada</i>		<b>6 Contributor address;</b> <b>7 Amount of contribution (\$)</b> <i>1305 S Pecan Flats, TX 78991</i> <i>60.00</i>
<b>8 Principal occupation / Job title (See Instructions)</b>		<b>9 Employer (See Instructions)</b>	
<b>Date</b> <i>1/10/24</i>	<b>Full name of contributor</b> <i>Alex Natera</i>		<b>Amount of contribution (\$)</b> <i>60.00</i>
<b>Contributor address;</b> <i>4023 Hill St. Irion, TX 79744</i>		<b>City;</b> <b>State;</b> <b>Zip Code</b>	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b> <i>1/10/24</i>	<b>Full name of contributor</b> <i>Davon Granger</i>		<b>Amount of contribution (\$)</b> <i>60.00</i>
<b>Contributor address;</b> <i>833 FM 1383 Latrige TX 78945</i>		<b>City;</b> <b>State;</b> <b>Zip Code</b>	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b> <i>1/10/24</i>	<b>Full name of contributor</b> <i>Genz Kandler</i>		<b>Amount of contribution (\$)</b> <i>60.00</i>
<b>Contributor address;</b> <i>107 Oak Ridge Dr. Yoakum, TX 77995</i>		<b>City;</b> <b>State;</b> <b>Zip Code</b>	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:  11/16
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date  1/16/26	5 Full name of contributor  Dennis Florer	6 Contributor address; City; State; Zip Code  1010 Kessler Schlebenburg TX 78956
7 Amount of contribution (\$)  60.00		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date  1/16/26	Full name of contributor  KIP Bruner	□ out-of-state PAC (ID#:  60.00
Contributor address; City; State; Zip Code  2852 CR 422 Wadler TX 78954		Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date  1/16/26	Full name of contributor  Brant Mathis	□ out-of-state PAC (ID#:  60.00
Contributor address; City; State; Zip Code  12930 5495 Flatonia TX 78941		Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date  1/16/26	Full name of contributor  David Zimmerman	□ out-of-state PAC (ID#:  60.00
Contributor address; City; State; Zip Code  2928 Zimmerman Rd Flatonia TX 78941		Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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## MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: <i>11/16</i>
2 FILER NAME <i>Josh Homan</i>			3 Filer ID (Ethics Commission Filers)
4 Date <i>1/10/24</i>	5 Full name of contributor <i>Chad Martin</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) <i>60.00</i>
6 Contributor address; <i>PO Box 822 Flatonia TX 78941</i>		City; State; Zip Code	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date <i>1/10/24</i>	Full name of contributor <i>Jose Cedillo</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>100.00</i>
Contributor address; <i>215 Hamilton Pool Ln Bastrop TX 78602</i>		City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/10/24</i>	Full name of contributor <i>Jason Mica</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>60.00</i>
Contributor address; <i>739 S Mill St Flatonia TX 78941</i>		City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/10/24</i>	Full name of contributor <i>Miggy Grifaldo</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>60.00</i>
Contributor address; <i>6009 FM 609 Flatonia TX 78941</i>		City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

<p>The Instruction Guide explains how to complete this form.</p>			<p>1 Total pages Schedule A1: <u>13/14</u></p>
<p>2 FILER NAME <u>Josh Horan</u></p>			<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 Date <u>1/10/26</u></p>	<p>5 Full name of contributor <u>Brant Vyrjala</u></p>	<p><input type="checkbox"/> out-of-state PAC (ID#:</p>	<p>7 Amount of contribution (\$) <u>60.00</u></p>
<p>6 Contributor address; City: State: Zip Code <u>10707 Ashburn Ln Richmond TX 77466</u></p>			
<p>8 Principal occupation / Job title (See Instructions)</p>		<p>9 Employer (See Instructions)</p>	
<p>Date <u>1/10/26</u></p>	<p>Full name of contributor <u>Elisabeth Pender</u></p>	<p><input type="checkbox"/> out-of-state PAC (ID#:</p>	<p>Amount of contribution (\$) <u>150.00</u></p>
<p>Contributor address; City; State; Zip Code <u>217 W 4th St Plainview TX 78941</u></p>			
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>	
<p>Date <u>1/10/26</u></p>	<p>Full name of contributor <u>Bailey Bruner</u></p>	<p><input type="checkbox"/> out-of-state PAC (ID#:</p>	<p>Amount of contribution (\$) <u>60.00</u></p>
<p>Contributor address; City; State; Zip Code <u>317 STAPLES ST Plainview TX 78941</u></p>			
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>	
<p>Date <u>1/10/26</u></p>	<p>Full name of contributor <u>Amy West</u></p>	<p><input type="checkbox"/> out-of-state PAC (ID#:</p>	<p>Amount of contribution (\$) <u>200.00</u></p>
<p>Contributor address; City; State; Zip Code <u>865 CR 303 Orange Grove TX 78372</u></p>			
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>	
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: <i>14/14</i>
2 FILER NAME <i>Josh Horan</i>			3 Filer ID (Ethics Commission Filers)
4 Date <i>1/10/26</i>	5 Full name of contributor <i>Laura Flores</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) <i>20.00</i>
	6 Contributor address; <i>4731 FM 2237 Flatonia TX 78941</i>	City; State; Zip Code	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date <i>1/10/26</i>	Full name of contributor <i>David Zapalac</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>20.00</i>
	Contributor address; <i>Po Box 121 Flatonia TX 78941</i>	City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/10/26</i>	Full name of contributor <i>Gregg Ray</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>30.00</i>
	Contributor address; <i>2961 FM 2762 Flatonia TX 78941</i>	City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/10/26</i>	Full name of contributor <i>Travis Seale</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>150.00</i>
	Contributor address; <i>523 E N Main Flatonia TX 78941</i>	City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: <i>15/16</i>
2 FILER NAME <i>Tom Homan</i>			3 Filer ID (Ethics Commission Filers)
4 Date <i>1/10/26</i>	5 Full name of contributor <i>Willie Steinkasser</i>	<input type="checkbox"/> out-of-state PAC (ID#: .....)	7 Amount of contribution (\$) <i>200.00</i>
6 Contributor address; <i>3300 Allen Rd Flatonia TX 78941</i>	City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date <i>1/10/26</i>	Full name of contributor <i>Christian Castillo</i>	<input type="checkbox"/> out-of-state PAC (ID#: .....)	Amount of contribution (\$) <i>200.00</i>
Contributor address; <i>637 N Walnut Flatonia TX 78941</i>	City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/10/26</i>	Full name of contributor <i>Randy McDonough</i>	<input type="checkbox"/> out-of-state PAC (ID#: .....)	Amount of contribution (\$) <i>40.00</i>
Contributor address; <i>8150 Guetterman Elder Rd Schertz TX 78954</i>	City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/10/26</i>	Full name of contributor <i>Bar Duperior</i>	<input type="checkbox"/> out-of-state PAC (ID#: .....)	Amount of contribution (\$) <i>200.00</i>
Contributor address; <i>333 Old Waelder Rd Flatonia TX 78941</i>	City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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## MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: <i>16/16</i>
2 FILER NAME <i>Josh Hanan</i>			3 Filer ID (Ethics Commission Filers)
4 Date <i>1/16/26</i>	5 Full name of contributor <i>DENNIS GEESMAN</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) <i>500.00</i>
6 Contributor address; <i>815 Scott's School Rd Flatonia TX 78941</i>	City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date <i>1/16/26</i>	Full name of contributor <i>Joe Brooks</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>90.00</i>
Contributor address; <i>485 E 4th St Flatonia TX 78941</i>	City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/16/26</i>	Full name of contributor <i>Sam Quintero</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>60.00</i>
Contributor address; <i>Po Box 172 Waelder TX 78954</i>	City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <i>SA</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address;	City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <b>7</b>
2 FILER NAME <b>JOSH Homan</b>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ <b>3979.00</b>
5 Date <b>1/18/26</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Sarah Swinler</b> )	8 Amount of Contribution \$ <b>239.00</b> 9 In-kind contribution description <b>Auction Items (outdoor items)</b>
7 Contributor address; City: State; Zip Code <b>9207 Polaris Lane N Maple Grove MN 55369</b>		<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 <b>1/10/26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Kelly Homan</b> )	Amount of Contribution \$ <b>175.00</b> In-kind contribution description <b>Auction Items (spirits)</b>
Contributor address; City; State; Zip Code <b>Po Box 1075 Flatonia TX 78941</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
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)		

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If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <b>2/1</b>
2 FILER NAME <b>JOSH Homan</b>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$
5 Date <b>1/10/26</b>	6 Full name of contributor <b>Leisha Kib</b> <input type="checkbox"/> out-of-state PAC (ID#:	8 Amount of Contribution \$ <b>75.00</b> <input type="checkbox"/> In-kind contribution description <b>Auction Item (Basket)</b>
7 Contributor address; City; State; Zip Code <b>6710 FM 282 Flatonia TX 78941</b>		<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 <b>1/10/26</b>	Full name of contributor <b>Tori Hefner</b> <input type="checkbox"/> out-of-state PAC (ID#:	Amount of Contribution \$ <b>250.00</b> <input type="checkbox"/> In-kind contribution description <b>Auction Item (Basket)</b>
Contributor address; City; State; Zip Code <b>2990 Allen Rd Flatonia TX 78941</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.

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)	

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If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <b>3/1</b>
2 FILER NAME <b>JOSH HOMAN</b>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$		
5 Date <b>1/10/26</b>	6 Full name of contributor <b>Beverly Z. Ponder</b> <input type="checkbox"/> out-of-state PAC (ID#:	8 Amount of Contribution \$ <b>50.00</b> <input type="checkbox"/> In-kind contribution description <b>Auction Item (Basket)</b>
	7 Contributor address; City; State; Zip Code <b>646 E N Main Flatonia TX 78841</b>	<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 <b>1/10/26</b> Full name of contributor <b>Cecil Odem</b> <input type="checkbox"/> out-of-state PAC (ID#:		Amount of Contribution \$ <b>90.00</b> <input type="checkbox"/> In-kind contribution description <b>Auction Item (Golf)</b>
Contributor address; City; State; Zip Code <b>394 Garbuck Ln Flatonia TX 78841</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
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)		
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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <b>4/7</b>																					
2 FILER NAME <b>Josh Homan</b>		3 Filer ID (Ethics Commission Filers)																					
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$																					
5 Date <b>1/16/24</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Lauren Hoffman</b> )	8 Amount of Contribution \$ <b>300.00</b> 9 In-kind contribution description <b>Auction Item (Bag)</b>																					
7 Contributor address; City; State; Zip Code <b>716 S. FAIR ST Flatonia TX 78941</b>																							
<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)																							
<table border="1"> <tr> <td>Date <b>1/16/24</b></td> <td>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Samantha Hadaway</b>)</td> <td>Amount of Contribution \$ <b>400.00</b> In-kind contribution description <b>Auction Item (Beef)</b></td> </tr> <tr> <td colspan="3">Contributor address; City; State; Zip Code <b>5044 FM609 LaGrange TX 78945</b></td> </tr> <tr> <td colspan="3"><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</td> </tr> <tr> <td colspan="2">Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)</td> <td>Employer (FOR NON-JUDICIAL) (See Instructions)</td> </tr> <tr> <td colspan="2">Contributor's principal occupation (FOR JUDICIAL)</td> <td>Contributor's job title (FOR JUDICIAL) (See Instructions)</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm (FOR JUDICIAL)</td> <td>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</td> </tr> </table>			Date <b>1/16/24</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Samantha Hadaway</b> )	Amount of Contribution \$ <b>400.00</b> In-kind contribution description <b>Auction Item (Beef)</b>	Contributor address; City; State; Zip Code <b>5044 FM609 LaGrange TX 78945</b>			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			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 <b>1/16/24</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Samantha Hadaway</b> )	Amount of Contribution \$ <b>400.00</b> In-kind contribution description <b>Auction Item (Beef)</b>																					
Contributor address; City; State; Zip Code <b>5044 FM609 LaGrange TX 78945</b>																							
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.																							
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)																							
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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <b>5/1</b>
2 FILER NAME <b>Josh Homan</b>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$
5 Date <b>1/10/26</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Rodney Stryk</b> )	8 Amount of Contribution \$ <b>65.00</b> 9 In-kind contribution description <b>Action Items (Basket)</b>
7 Contributor address; City; State; Zip Code <b>318 S. Flores #21 Flatsoria TX 78941</b>		<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 <b>1/10/26</b>		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Cesey Ray</b> )
Contributor address; City; State; Zip Code <b>2961 FM 2762 Flatsoria TX 78941</b>		Amount of Contribution \$ <b>125.00</b> In-kind contribution description <b>Action Items (GIFT)</b>
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
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)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

<p>The Instruction Guide explains how to complete this form.</p>				<p>1 Total pages Schedule A2: <u>6/1</u></p>																														
<p>2 FILER NAME <u>Josh Homan</u></p>				<p>3 Filer ID (Ethics Commission Filers)</p>																														
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$</p>																																		
<p>5 Date <u>1/16/24</u></p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<u></u>) <u>Jodie Siptak</u></p>			<p>8 Amount of Contribution \$ <u>1500.00</u></p>																														
<p>7 Contributor address: City; State; Zip Code <u>3021 Old Hallettsville Rd Flatonia TX 78941</u></p>				<p>9 In-kind contribution description <u>Food + Catering</u></p>																														
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>																																		
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)</p>		<p>11 Employer (FOR NON-JUDICIAL) (See Instructions)</p>																																
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See Instructions)</p>																																
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>																																
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>																																		
<table border="1"> <tr> <td> <p>Date <u>1/16/24</u></p> </td> <td colspan="2"> <p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<u></u>) <u>Jamie Mikulik</u></p> </td> <td> <p>Amount of Contribution \$ <u>250.00</u></p> </td> <td> <p>In-kind contribution description <u>Food + Catering</u></p> </td> </tr> <tr> <td colspan="2"> <p>Contributor address; City; State; Zip Code <u>1500 US90 Flatonia TX 78941</u></p> </td> <td colspan="3"> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p> </td> </tr> <tr> <td colspan="2"> <p>Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)</p> </td> <td colspan="3"> <p>Employer (FOR NON-JUDICIAL) (See Instructions)</p> </td> </tr> <tr> <td colspan="2"> <p>Contributor's principal occupation (FOR JUDICIAL)</p> </td> <td colspan="3"> <p>Contributor's job title (FOR JUDICIAL) (See Instructions)</p> </td> </tr> <tr> <td colspan="2"> <p>Contributor's employer/law firm (FOR JUDICIAL)</p> </td> <td colspan="3"> <p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p> </td> </tr> <tr> <td colspan="5"> <p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p> </td> </tr> </table>					<p>Date <u>1/16/24</u></p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<u></u>) <u>Jamie Mikulik</u></p>		<p>Amount of Contribution \$ <u>250.00</u></p>	<p>In-kind contribution description <u>Food + Catering</u></p>	<p>Contributor address; City; State; Zip Code <u>1500 US90 Flatonia TX 78941</u></p>		<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>			<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See Instructions)</p>			<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See Instructions)</p>			<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>			<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date <u>1/16/24</u></p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<u></u>) <u>Jamie Mikulik</u></p>		<p>Amount of Contribution \$ <u>250.00</u></p>	<p>In-kind contribution description <u>Food + Catering</u></p>																														
<p>Contributor address; City; State; Zip Code <u>1500 US90 Flatonia TX 78941</u></p>		<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>																																
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See Instructions)</p>																																
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See Instructions)</p>																																
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>																																
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>																																		
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>																																		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <b>1/1</b>
2 FILER NAME <i>Josh Homan</i>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$		
5 Date <b>1/10/26</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Josh Homan</b> )	8 Amount of Contribution \$ <b>400.00</b> 9 In-kind contribution description <b>Event Supply</b>
7 Contributor address; City; State; Zip Code <b>Po Box 1075 Flatonia TX 78941</b>		<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 <b>1/19/26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Terri Hefner</b> )	Amount of Contribution \$ <b>600.00</b> In-kind contribution description <b>Tickets for Country Music Club event</b>
Contributor address; City; State; Zip Code <b>2996 Alvaro Flatonia TX 78941</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.

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)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### 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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
6	JOSH HOMAN		
4 Date	5 Payee name		
1/5/26	Houston Sign Co.		
6 Amount (\$)	7 Payee address:	City; State; Zip Code	
2212.04	5801 Chimney Rock Rd Houston, TX 77081		
2065.98 TH	<input type="checkbox"/> Check if individual's residence address.		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
	Advertising Expense	Large signage	
(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
Date	Payee name		
1/7/26	Signs on the Cheap		
Amount (\$)	Payee address:	City; State; Zip Code	
273.57	11525-A Stachollow Dr. STE 120 Austin TX 78758		
<input type="checkbox"/> Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Advertising Expense	Sign stakes	
<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
Date	Payee name		
1/7/26	Texas Print House LLC		
Amount (\$)	Payee address:	City; State; Zip Code	
81.19	105 E N MAIN Flatonia TX 78941		
<input type="checkbox"/> Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Advertising Expense	Promotional items	
<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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### 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: <i>2/6</i>	2 FILER NAME <i>JOSH HANAN</i>	3 Filer ID (Ethics Commission Filers)	
4 Date <i>1/8/28</i>	5 Payee name <i>Wix.com</i>		
6 Amount (\$) <i>121.07</i>	7 Payee address: <i>Advertising Expense 100 Hansvoort St. NY, NY 10014</i> <input type="checkbox"/> Check if individual's residence address.	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	(b) Description <i>Website Maint.</i>	
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date <i>1/8/28</i>	Payee name <i>Facebook (MOTA)</i>		
Amount (\$) <i>86.00</i>	Payee address: <i>1 Hacker Way Menlo Park, CA 94025</i> <input type="checkbox"/> Check if individual's residence address.	City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Facebook Ads</i>	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date <i>1/9/28</i>	Payee name <i>Schulenburg Printing, Inc</i>		
Amount (\$) <i>521.33</i>	Payee address: <i>705 N Upton Ave. Schulenburg, TX 78956</i> <input type="checkbox"/> Check if individual's residence address.	City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>EVENT EXPENSE</i>	Description <i>Signage for Fundraiser event</i>	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### 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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
3/6	Josh Homan			
4 Date	5 Payee name			
1/12/26	Flatonia Argos			
6 Amount (\$)	7 Payee address;	City; State; Zip Code		
35.00	212 S. Penn St. Flatonia TX 78941			
<input type="checkbox"/> Check if individual's residence address.				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
	Adv. Expense	Newspaper Ad		
	<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
Date	Payee name			
1/13/26	Facebook			
Amount (\$)	Payee address;	City;	State;	Zip Code
576.00	1 Hacker Way Menlo Park, CA	94025		
<input type="checkbox"/> Check if individual's residence address.				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description		
	Adv. Expense	FB Ad.		
	<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
Date	Payee name			
1/15/26	ONXMAPS.COM, Inc			
Amount (\$)	Payee address;	City;	State;	Zip Code
36.88	1925 Brooks St Missoula MT	59801		
<input type="checkbox"/> Check if individual's residence address.				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description		
	Adv. Expense	Software Subscription		
	<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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### 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:	2 FILER NAME <i>Josh Hanan</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>1/16/24</i>	5 Payee name <i>Your Sign Store</i>	
6 Amount (\$) <i>136.40</i>	7 Payee address; <i>629 E Old Hallettsville Rd Flatonia TX 78941</i> <input type="checkbox"/> Check if individual's residence address.	City; State; Zip Code
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	(b) Description <i>Signage</i>
	(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	
Date <i>1/17/24</i>	Payee name <i>TRE-House Embroidery</i>	
Amount (\$) <i>149.39</i>	Payee address; <i>107 E Main St. Werner, TX 78962</i> <input type="checkbox"/> Check if individual's residence address.	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Adv. Expense</i>	Description <i>Primo Items</i>
	<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	
Date <i>1/20/24</i>	Payee name <i>Schwenberg Sticker</i>	
Amount (\$) <i>60.00</i>	Payee address; <i>405 N Main St. Schwenberg TX 78956</i> <input type="checkbox"/> Check if individual's residence address.	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Adv. Expense</i>	Description <i>Paper Ad</i>
	<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	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### 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: <i>5/5</i>	2 FILER NAME <i>Josh Hansen</i>	3 Filer ID (Ethics Commission Filers)	
4 Date <i>1/21/24</i>	5 Payee name <i>Flatonia Argos</i>		
6 Amount (\$) <i>490.00</i>	7 Payee address: <i>212 S. Penn St. Flatonia TX 78941</i>	City; State; Zip Code	
<input type="checkbox"/> Check if individual's residence address.			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Adv. Expense</i>	(b) Description <i>Newspaper Advt</i>	
	<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
Date <i>1/17/24</i>	Payee name <i>Fayetteville Store</i>		
Amount (\$) <i>6.71</i>	Payee address: <i>401 E Main St. Fayetteville TX 78940</i>	City; State; Zip Code	
<input type="checkbox"/> Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Adv. Expense</i>	Description <i>Sign install materials</i>	
	<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
Date <i>1/22/24</i>	Payee name <i>Turboscribe. AI</i>		
Amount (\$) <i>20.00</i>	Payee address: <i>Fundraising Expense</i>	City; State; Zip Code	
<input type="checkbox"/> Check if individual's residence address. <i>Bellevue, WA 98004</i>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Fundraising Expense</i>	Description <i>Transcription Software</i>	
	<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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### 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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
6/6	<i>Josh Hansen</i>		
4 Date	5 Payee name		
1/22/26	<i>Tractor Supply Co #309</i>		
6 Amount (\$)	7 Payee address;	City; State; Zip Code	
8.66	<i>2005 5th St La Grange TX 78945</i>		
<input type="checkbox"/> Check if individual's residence address.			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
	<i>Adv. Expense</i>	<i>Sign Materials</i>	
(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
Date	Payee name		
1/22/26	<i>Fayette County Record</i>		
Amount (\$)	Payee address;	City; State; Zip Code	
1500.00	<i>127 S Washington St La Grange TX 78945</i>		
<input type="checkbox"/> Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	<i>Adv. Expense</i>	<i>Paper Ads</i>	
<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
Date	Payee name		
1/10/26	<i>Flatonia Golf Assoc. (FGA)</i>		
Amount (\$)	Payee address;	City; State; Zip Code	
1600.00	<i>1245 US90 Flatonia TX 78941</i>		
<input type="checkbox"/> Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	<i>Event Expense</i>	<i>Rental of course for Event/Fundraiser</i>	
<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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED