

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: 31
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <input checked="" type="radio"/> FIRST MI	OFFICE USE ONLY	
	NICKNAME LAST SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE		Date Received 12/15/2025 - gk 4:30pm
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION		Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <input checked="" type="radio"/> FIRST MI	Receipt # Amount \$	
	NICKNAME LAST SUFFIX	Date Processed	
	Date Imaged		
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY: STATE: ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input checked="" 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 Day Year THROUGH Month Day Year 10 / 26 / 25 12 / 5 / 25		
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year Primary Runoff Other Description 12 / 13 / 25 General <input checked="" type="radio"/> Special		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
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.		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL	COMMITTEE ADDRESS	
	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 <u>Robert Rizo</u>		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)	\$ <u>Ø</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>22,637</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ <u>Ø</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>30,074</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>4,827</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>Ø</u>

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.

Robert Rizo
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

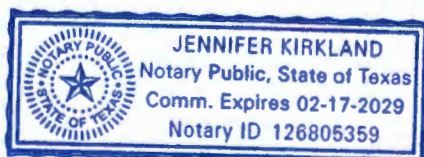
NOTARY STAMP/SEAL

Sworn to and subscribed before me by Robert Rizo this the 5th day of December, 20 25, to certify which, witness my hand and seal of office.

Jennifer Kirkland

Jennifer Kirkland

Notary Public



SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME Robert Rizo		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 22,637
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ Ø
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ Ø
4.	SCHEDULE E: LOANS	\$ Ø
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 30,074
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ Ø
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ Ø
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ Ø
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ Ø
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ Ø
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ Ø
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ Ø

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: 8
2 FILER NAME Robert Rizo		3 Filer ID (Ethics Commission Filers)
4 Date 10/29/25	5 Full name of contributor out-of-state PAC (ID#): Rick Sheldon 6 Contributor address; City; State; Zip Code [REDACTED] Waco, TX 76710	7 Amount of contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions)
Date 10/30/25	Full name of contributor out-of-state PAC (ID#): Rolando Barrera Contributor address; City; State; Zip Code [REDACTED] Corpus Christi, TX 78413	Amount of contribution (\$) \$262.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions)
Date 10/31/25	Full name of contributor out-of-state PAC (ID#): Alex Abadi Contributor address; City; State; Zip Code [REDACTED] Kyle, TX 78640	Amount of contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions)
Date 11/7/25	Full name of contributor out-of-state PAC (ID#): Gregg Reyes Contributor address; City; State; Zip Code [REDACTED] Houston, TX 77042	Amount of contribution (\$) \$5,246.00
Principal occupation / Job title (See Instructions) President		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:
2 FILER NAME Robert Rizo		3 Filer ID (Ethics Commission Filers)
4 Date 11/7/25	5 Full name of contributor out-of-state PAC (ID#: Chris Adams 6 Contributor address: City: State; Zip Code Kyle, TX 78640	7 Amount of contribution (\$) \$ 106⁰⁰
8 Principal occupation / Job title (See Instructions) HR Director		9 Employer (See Instructions)
Date 11/8/25	Full name of contributor out-of-state PAC (ID#: Jordan E. Villarreal Contributor address: City: State; Zip Code Denton, TX 76208	Amount of contribution (\$) \$ 106⁰⁰
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions)
Date 11/12/25	Full name of contributor out-of-state PAC (ID#: Stephen Drenner Contributor address: City: State; Zip Code Spicewood, TX 78669	Amount of contribution (\$) \$ 1,000⁰⁰
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 11/14/25	Full name of contributor out-of-state PAC (ID#: Kara Buffington Contributor address: City: State; Zip Code Buda, TX 78610	Amount of contribution (\$) \$ 211⁰⁰
Principal occupation / Job title (See Instructions) Consulting		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:
2 FILER NAME Robert+ Rizo		3 Filer ID (Ethics Commission Filers)
4 Date 11/15/25	5 Full name of contributor out-of-state PAC (ID#: Terry Mitchell 6 Contributor address: City; State; Zip Code [REDACTED] Austin, TX 78703	7 Amount of contribution (\$) \$ 262.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/15/25	Full name of contributor out-of-state PAC (ID#: Terry Mitchell Contributor address: City; State; Zip Code [REDACTED] Austin, TX 78703	Amount of contribution (\$) \$ 262.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/15/25	Full name of contributor out-of-state PAC (ID#: David Hartman Contributor address: City; State; Zip Code [REDACTED] Austin, TX 78703	Amount of contribution (\$) \$ 200.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: Contributor address: City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions) [REDACTED] MR		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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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:
2 FILER NAME Robert Rizo		3 Filer ID (Ethics Commission Filers)
4 Date 11/15/25	5 Full name of contributor Patrick Rose out-of-state PAC (ID#): Contributor address: City: San Marcos, TX State: TX Zip Code: 78166	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions)
Date 11/17/25	Full name of contributor Reid McCoy out-of-state PAC (ID#): Contributor address: City: San Marcos, TX State: TX Zip Code: 78167	Amount of contribution (\$) \$262.00
Principal occupation / Job title (See Instructions) Business Person		Employer (See Instructions)
Date 11/17/25	Full name of contributor James (Jim) Camp out-of-state PAC (ID#): Contributor address: City: Manchaca, TX State: TX Zip Code: 78652	Amount of contribution (\$) \$53.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/19/25	Full name of contributor Mark Boyer out-of-state PAC (ID#): Contributor address: City: Houston, TX State: TX Zip Code: 77064	Amount of contribution (\$) \$2,623.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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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:
2 FILER NAME Robert Rizo		3 Filer ID (Ethics Commission Filers)
4 Date 11/20/25	5 Full name of contributor Pamela Madere out-of-state PAC (ID#): Contributor address: [REDACTED] City: Austin, TX State: Zip Code 78701	7 Amount of contribution (\$) \$ 100⁰⁰
8 Principal occupation / Job title (See Instructions) Partner		9 Employer (See Instructions)
Date 11/21/25	Full name of contributor Heather Aidala out-of-state PAC (ID#): Contributor address: [REDACTED] City: Kyle, TX State: Zip Code 78640	Amount of contribution (\$) \$ 200⁰⁰
Principal occupation / Job title (See Instructions) Admin		Employer (See Instructions)
Date 11/21/25	Full name of contributor Paul Hill out-of-state PAC (ID#): Contributor address: [REDACTED] City: Kyle, TX State: Zip Code 78640	Amount of contribution (\$) \$ 500⁰⁰
Principal occupation / Job title (See Instructions) Candidate		Employer (See Instructions) Paul Hill For Kyle
Date 11/25/25	Full name of contributor Joe Muñoz out-of-state PAC (ID#): Contributor address: [REDACTED] City: Driftwood, TX State: Zip Code 78619	Amount of contribution (\$) \$ 100⁰⁰
Principal occupation / Job title (See Instructions) N/A		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:
2 FILER NAME Robert Rizo		3 Filer ID (Ethics Commission Filers)
4 Date 12/1/25	5 Full name of contributor out-of-state PAC (ID#: Mark Littlefield 6 Contributor address; City; State; Zip Code [REDACTED] Austin, TX 78735-8586	7 Amount of contribution (\$) \$ 262.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions)
Date 12/3/25	Full name of contributor out-of-state PAC (ID#: Marcus Moreno Contributor address; City; State; Zip Code [REDACTED] San Antonio, TX 78209	Amount of contribution (\$) \$ 526.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions)
Date 11/20/25	Full name of contributor out-of-state PAC (ID#: Quiddity PAC Contributor address; City; State; Zip Code [REDACTED] Austin, TX 78741	Amount of contribution (\$) \$ 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/25/25	Full name of contributor out-of-state PAC (ID#: Alonso Rangel Contributor address; City; State; Zip Code [REDACTED] Kyle, TX 78640	Amount of contribution (\$) \$ 500.00
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:
2 FILER NAME Robert Rizo		3 Filer ID (Ethics Commission Filers)
4 Date 11/25/25	5 Full name of contributor out-of-state PAC (ID#: Mario A. Munoz 6 Contributor address: City: State; Zip Code <div style="background-color: black; width: 150px; height: 1.2em; display: inline-block;"></div> Buda, TX 78610-5141	7 Amount of contribution (\$) \$ 500⁰⁰
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/25/25	Full name of contributor out-of-state PAC (ID#: Erik Rangel Contributor address: City: State; Zip Code <div style="background-color: black; width: 150px; height: 1.2em; display: inline-block;"></div> Austin, TX 78748-1022	Amount of contribution (\$) \$ 1,000⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/25	Full name of contributor out-of-state PAC (ID#: Cardinal MF LLC Contributor address: City: State; Zip Code <div style="background-color: black; width: 150px; height: 1.2em; display: inline-block;"></div> San Antonio, TX 78254	Amount of contribution (\$) \$ 500⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/2/25	Full name of contributor out-of-state PAC (ID#: Metcalf Wolff Stuart & Williams, LLP Contributor address: City: State; Zip Code <div style="background-color: black; width: 150px; height: 1.2em; display: inline-block;"></div> Austin, TX 78701	Amount of contribution (\$) \$ 1,000⁰⁰
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:
2 FILER NAME Robert Rizo		3 Filer ID (Ethics Commission Filers)
4 Date 11/12/25	5 Full name of contributor out-of-state PAC (ID#: Richard K. Sheldon & Lisa L. Sheldon 6 Contributor address; City; State; Zip Code <div style="background-color: black; width: 150px; height: 1.2em; display: inline-block;"></div> Waco, TX 76710	7 Amount of contribution (\$) \$1,500⁰⁰
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/14/25	Full name of contributor out-of-state PAC (ID#: Crab Strategies Contributor address; City; State; Zip Code <div style="background-color: black; width: 150px; height: 1.2em; display: inline-block;"></div> Eyle, TX 78040	Amount of contribution (\$) \$100⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/17/25	Full name of contributor out-of-state PAC (ID#: Pape-Dawson Engineers PAC Contributor address; City; State; Zip Code <div style="background-color: black; width: 150px; height: 1.2em; display: inline-block;"></div> San Antonio, TX 78213	Amount of contribution (\$) \$500⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)
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.

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 20	2 FILER NAME Robert Rizo	3 Filer ID (Ethics Commission Filers)
4 Date 10/27/25	5 Payee name Kyle Law Enforcement Association	
6 Amount (\$) \$20.00	7 Payee address; City; State; Zip Code 1700 Kohlers Crossing Kyle, TX 78640	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation Made By Candidate	(b) Description Donation
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete ONLY if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 10/27/25	Payee name Kyle Law Enforcement Association	
Amount (\$) \$20.00	Payee address; City; State; Zip Code 1700 Kohlers Crossing Kyle, TX 78640	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation Made By Candidate	Description Donation
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete ONLY if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 10/28/25	Payee name Back Swing Golf Events	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 1700 Kohlers Crossing Kyle, TX 78640	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation Made By Candidate	Description Donation Kyle Law Enforcement Golf Golf Tournament
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME: Robert Rizo	3 Filer ID (Ethics Commission Filers)
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4 Date: 10/29/25	5 Payee name: Amelie Juarez
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6 Amount (\$): \$418.15	7 Payee address: [REDACTED] City: San Marcos, TX State: TX Zip Code: 78666
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Canvassing
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date: 10/30/25	Payee name: Jose Alcala
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Amount (\$): \$337.50	Payee address: [REDACTED] City: Austin, TX State: TX Zip Code: 78745
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Canvassing
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date: 10/30/25	Payee name: Hector Corona
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Amount (\$): \$256.25	Payee address: [REDACTED] City: Austin, TX State: TX Zip Code: 78753
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Canvassing
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Robert Rizo		3 Filer ID (Ethics Commission Filers)	
4 Date 10/31/25		5 Payee name Minami Krembs			
6 Amount (\$) \$100⁰⁰		7 Payee address: [REDACTED]		City: Austin, TX State: TX Zip Code: 78705	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor		(b) Description Canvassing		
	(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 10/30/25		Payee name Minami Krembs			
Amount (\$) \$100⁰⁰		Payee address: [REDACTED]		City: Austin, TX State: TX Zip Code: 78705	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		Description Canvassing		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 11/1/25		Payee name Minami Krembs			
Amount (\$) \$100⁰⁰		Payee address: [REDACTED]		City: Austin, TX State: TX Zip Code: 78705	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		Description Canvassing		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

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 Robert Rizo		3 Filer ID (Ethics Commission Filers)	
4 Date 10/28/25		5 Payee name Minami Krembs			
6 Amount (\$) \$81.25		7 Payee address: <div style="background-color: black; width: 150px; height: 20px;"></div>		City: Austin, TX State: TX Zip Code: 78705	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor		(b) Description Canvassing		
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>				
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 10/31/25		Payee name Wal-Mart Supercenter			
Amount (\$) \$151.21		Payee address; 5754 Kyle Pkwy Kyle, TX		City: TX State: TX Zip Code: 78640	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Campaign Fundraiser		
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>				
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 11/1/25		Payee name Austin Budget Signs			
Amount (\$) \$112.58		Payee address; 209 E. Ben White Blvd		City: Austin, TX State: TX Zip Code: 78745	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description Campaign signs stickers		
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>				
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Robert Rizo		3 Filer ID (Ethics Commission Filers)	
4 Date: 11/2/25		5 Payee name Best Buy			
6 Amount (\$) \$212.14		7 Payee address: 1050 McKinley Pl Dr Ste 280 San Marcos, TX 78666 City: State: Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description Printer Ink		
	(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 11/3/25		Payee name Mario Perez			
Amount (\$) \$200.00		Payee address: [REDACTED] City: Austin, TX State: Zip Code 78705			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		Description Canvassing		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 10/28/25		Payee name Grant Carroll ^{MR} Gilker			
Amount (\$) \$87.50		Payee address: [REDACTED] City: Austin, TX State: Zip Code 78761			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		Description Canvassing		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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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 Robert Rizo	3 Filer ID (Ethics Commission Filers)
4 Date 11/3/25	5 Payee name Mario Perez	
6 Amount (\$) \$256.25	7 Payee address; [REDACTED]	City; State; Zip Code Austin, TX 78705
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Canvassing
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/4/25	Payee name Printing Solutions	
Amount (\$) \$2,653.48	Payee address; 321 W. Ben White Blvd Frontage Rd Ste 102 Austin, TX 78704	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Door hangers
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/4/25	Payee name Home Depot	
Amount (\$) \$75.50	Payee address; 3730 Dry Hole Rd Kyle, TX 78640	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Campaign Expense	Description T-post
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 Robert Rizo		3 Filer ID (Ethics Commission Filers)
4 Date 11/4/25	5 Payee name Willie's Grill & Ice House		
6 Amount (\$) \$294.45	7 Payee address; City; State; Zip Code 19200 S. 1-35 Frontage Rd Kyle, TX 78640		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Watch Party
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>		
9 Complete ONLY if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 11/5/25	Payee name Plum Creek HOA		
Amount (\$) \$40.00	Payee address; City; State; Zip Code 450 Haupt Kyle, TX 78640		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Event Space
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>		
Complete ONLY if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 11/6/25	Payee name Genco Strategies		
Amount (\$) 3,500.00	Payee address; City; State; Zip Code 3810 Medical Pkwy #245 Austin, TX 78756		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description Consultant
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>		
Complete ONLY if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 Robert Rizo	3 Filer ID (Ethics Commission Filers)
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4 Date 11/07/25	5 Payee name Target
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6 Amount (\$) 51.95	7 Payee address; 5188 Kyle Center Dr	City; Kyle	State; TX	Zip Code 78640
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description INK Printer
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/07/25	Payee name Target
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Amount (\$) 51.95	Payee address; 5188 Kyle Center Dr	City; Kyle	State; TX	Zip Code 78640
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Ink Printer
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/08/25	Payee name Best Buy
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Amount (\$) 51.84	Payee address; 1050 McKinley Pl Dr Ste 280	City; San Marcos, TX	State; TX	Zip Code 78666
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Printer Ink
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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>Robert Rizo</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>11/09/25</i>		5 Payee name <i>Dollar General</i>			
6 Amount (\$) <i>35.99</i>		7 Payee address; <i>850 Veterans Dr Kyle, TX 78640</i>		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>Parade Candy</i>		
	(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH					
Date <i>11/10/25</i>		Payee name <i>Amelie Juarez</i>			
Amount (\$) <i>362.50</i>		Payee address; <i>[REDACTED]</i>		City;	State; Zip Code <i>San Marcos, TX 78666</i>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>		Description <i>Canvassing</i>		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH					
Date <i>11/12/25</i>		Payee name <i>Jose Alcala</i>			
Amount (\$) <i>1,000</i>		Payee address; <i>[REDACTED]</i>		City;	State; Zip Code <i>Austin, TX 78745</i>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>		Description <i>Canvassing</i>		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH					
Date		Payee name			
Amount (\$)		Payee address;		City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH					

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 Robert Rizo		3 Filer ID (Ethics Commission Filers)	
4 Date 11/12/25		5 Payee name Mario Perez			
6 Amount (\$) 500.00		7 Payee address; [REDACTED] Austin, TX 78705		City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor		(b) Description Canvassing		
	(c) Check if travel outside of Texas. Complete Schedule T.		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 11/13/25		Payee name Hector Corona			
Amount (\$) 862.50		Payee address; [REDACTED] Austin, TX 78753		City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		Description Canvassing		
	Check if travel outside of Texas. Complete Schedule T.		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 11/17/25		Payee name Mia Alva			
Amount (\$) 100.00		Payee address; [REDACTED] San Marcos TX 78666		City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		Description Canvassing		
	Check if travel outside of Texas. Complete Schedule T.		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	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 Robert Rizo	3 Filer ID (Ethics Commission Filers)
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4 Date 11/18/25	5 Payee name Grant Gilker
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6 Amount (\$) 125.00	7 Payee address; City; State; Zip Code [REDACTED] Austin, TX 78751
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Canvassing
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/18/25	Payee name Genco Strategies
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Amount (\$) 750.00	Payee address; City; State; Zip Code 3810 Medical Pkwy #245 Austin, TX 78756
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Consultant
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/20/25	Payee name Amelia Juarez
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Amount (\$) 215.63	Payee address; City; State; Zip Code [REDACTED] San Marcos, TX 78666
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Canvassing
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 Robert Rizo		3 Filer ID (Ethics Commission Filers)	
4 Date 11/21/25		5 Payee name At Credit Union			
6 Amount (\$) 15.00		7 Payee address;		City;	State; Zip Code
		1204 Thrope Ln. San Marcos, Tx 78666			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Description		
	Fee Accounting + Banking Expense		Temp Checks		
	(c) Check if travel outside of Texas. Complete Schedule T.		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 11/21/25		Payee name Hector Corona			
Amount (\$) 237.75		Payee address;		City;	State; Zip Code
		[REDACTED]		Austin, TX 78753	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	Contract Labor		Canvassing		
	Check if travel outside of Texas. Complete Schedule T.		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 11/22/25		Payee name Kyle Law Enforcement Association			
Amount (\$) 150.00		Payee address;		City;	State; Zip Code
		1700 Kohlers Crossing Kyle, TX 78640			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	Donation Made by Candidate Pancake fundraiser				
	Check if travel outside of Texas. Complete Schedule T.		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

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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 **Robert Rizo** 3 Filer ID (Ethics Commission Filers)

4 Date **11/22/25** 5 Payee name **Custom Embroide A2Z**

6 Amount (\$) **102.54** 7 Payee address; City; State; Zip Code
5488 SPID Corpus Christi, TX 78411

8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description
Em Printing Expense **Campaign Hat Embroidery**
(c) Check if travel outside of Texas. Complete Schedule T. 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 **11/24/25** Payee name **Human Age Digital**
Amount (\$) **1,600.00** Payee address; City; State; Zip Code
2700 Post Oak Blvd 21 st floor Houston, TX 77056

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description
Advertising Expense **Ads**
Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date **11/24/25** Payee name **Jose Alcala**
Amount (\$) **243.75** Payee address; City; State; Zip Code
Austin, TX 78745

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description
Contract Labor **Canvassing**
Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 Robert Rizo		3 Filer ID (Ethics Commission Filers)	
4 Date 11/24/25		5 Payee name Genco Strategies			
6 Amount (\$) 3,500.00		7 Payee address; City; State; Zip Code 3810 Medical Pkwy # 245 Austin, TX 78756			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description Consultant		
	(c) Check if travel outside of Texas. Complete Schedule T.		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 11/25/25		Payee name Jose Alcala			
Amount (\$) 243.75		Payee address; City; State; Zip Code [REDACTED] Austin, TX 78745			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		Description Canvassing		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 11/26/25		Payee name Union Direct Print			
Amount (\$) 1,555.38		Payee address; City; State; Zip Code 8222 N Lamar Blvd # E44 Austin, TX 78753			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description Doorhangers		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 Robert Rizo		3 Filer ID (Ethics Commission Filers)
4 Date 11/26/25	5 Payee name Denee Barsalou		
6 Amount (\$) 175.00	7 Payee address: [Redacted] City: Pflugerville, TX State: Zip Code: 78660		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor		(b) Description Canvassing
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 11/26/25	Payee name Hector Corona		
Amount (\$) 237.50	Payee address: [Redacted] City: Austin, TX State: Zip Code: 78753		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		Description Canvassing
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 11/27/25	Payee name Union Direct Printing		
Amount (\$) 1,614.41	Payee address: 8222 N Lamar Blvd # E44 Austin, TX 78753 City: State: Zip Code:		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Mail
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>		
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 <u>Robert Rizo</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>11/27/25</u>		5 Payee name <u>Union Direct Printing</u>			
6 Amount (\$) <u>2,153.20</u>		7 Payee address: <u>8222 N Lamar Blvd #E44</u> City: <u>Austin, TX</u> State: Zip Code: <u>78753</u>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>		(b) Description <u>Mail</u>		
	(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <u>11/27/25</u>		Payee name <u>Union Direct Printing</u>			
Amount (\$) <u>1,323.83</u>		Payee address: <u>8222 N Lamar Blvd #E44</u> City: <u>Austin, TX</u> State: Zip Code: <u>78753</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>		Description <u>Mail</u>		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <u>11/29/25</u>		Payee name <u>A+ Credit Union</u>			
Amount (\$) <u>7.50</u>		Payee address: <u>1204 Thrope Ln. San Marcos, TX</u> City: <u>78666</u> State: Zip Code: <u>78666</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Fees</u>		Description <u>check fee</u>		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 Robert Rizo	3 Filer ID (Ethics Commission Filers)
4 Date 12/1/25	5 Payee name Denee Barsalou	
6 Amount (\$) 175.00	7 Payee address: [REDACTED]	City: Pflugerville, TX State: TX Zip Code: 78660
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Canvassing
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/1/25	Payee name Bronko Stachura	
Amount (\$) 300.00	Payee address: [REDACTED]	City: Austin, TX State: TX Zip Code: 78739
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Canvassing
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/1/25	Payee name Sameeha Lawal	
Amount (\$) 100.00	Payee address: [REDACTED]	City: San Marcos, TX State: TX Zip Code: 78666
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Canvassing
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 <u>Robert Rizo</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>12/2/25</u>		5 Payee name <u>A+Credit Union</u>			
6 Amount (\$) <u>15.00</u>		7 Payee address; City; State; Zip Code <u>1204 Thrope Ln. San Marcos, TX 78666</u>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Fee</u>		(b) Description <u>Wire transfer fee</u>		
	(c) Check if travel outside of Texas. Complete Schedule T.		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 <u>12/2/25</u>		Payee name <u>Human Age Digital</u>			
Amount (\$) <u>1,600.00</u>		Payee address; City; State; Zip Code <u>2700 Post Oak Blvd, 21st floor Houston, TX 77056</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>		Description <u>Ads</u>		
	Check if travel outside of Texas. Complete Schedule T.		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 <u>12/2/25</u>		Payee name <u>Home Depot</u>			
Amount (\$) <u>81.57</u>		Payee address; City; State; Zip Code <u>3730 Drymore Rd Kyle, TX 78640</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Campaign Expense</u>		Description <u>Supplies</u>		
	Check if travel outside of Texas. Complete Schedule T.		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					

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 Robert Rizo		3 Filer ID (Ethics Commission Filers)	
4 Date 12/2/25		5 Payee name Jose Acala			
6 Amount (\$) 100.00		7 Payee address; <div style="background-color: black; width: 150px; height: 20px;"></div>		City; State; Zip Code Austin, TX 78745	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor		(b) Description Canvassing		
	(c) Check if travel outside of Texas. Complete Schedule T.		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 12/2/25		Payee name Hector Corona			
Amount (\$) 550.00		Payee address; <div style="background-color: black; width: 150px; height: 20px;"></div>		City; State; Zip Code Austin, TX 78753	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		Description Canvassing		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12/2/25		Payee name Denee Barsalou			
Amount (\$) 200.00		Payee address; <div style="background-color: black; width: 150px; height: 20px;"></div>		City; State; Zip Code Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		Description Canvassing		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date 12/3/25		5 Payee name Amelia Juarez			
6 Amount (\$) 525.00		7 Payee address;		City;	State; Zip Code
		[REDACTED]		San Marcos, TX 78148	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Description		
	Contract Labor		Canvassing		
		(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name			
		Office sought			
		Office held			
Amount (\$)		Payee address;		City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
		Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name			
		Office sought			
		Office held			
Amount (\$)		Payee address;		City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
		Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name			
		Office sought			
		Office held			
Amount (\$)		Payee address;		City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
		Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name			
		Office sought			
		Office held			
Amount (\$)		Payee address;		City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
		Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name			
		Office sought			
		Office held			
Amount (\$)		Payee address;		City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
		Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH					

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