

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 <input checked="" type="checkbox"/> MR	FIRST <i>William</i>	MI <i>T</i>	
	NICKNAME <i>Thomas</i>	LAST <i>Schoenbein</i>	SUFFIX <i>JR.</i>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX, APT / SUITE #, CITY, STATE, ZIP CODE <i>6911 Silver Grove Ct. Pasadena TX 77505</i>			
	5 CANDIDATE / OFFICEHOLDER PHONE AREA CODE PHONE NUMBER EXTENSION <i>(832) 210-8075</i>			
6 CAMPAIGN TREASURER NAME	MS / <input checked="" type="checkbox"/> MRS <input type="checkbox"/> MR	FIRST <i>Paige</i>	MI <i>O</i>	
	NICKNAME <i>McInnis</i>	LAST	SUFFIX	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #, CITY, STATE, ZIP CODE <i>15950 Manor Square Houston TX 77062</i>			
	8 CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION <i>(281) 630-3381</i>			
9 REPORT TYPE	<input type="checkbox"/> January 15 <input 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 checked="" 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 <i>04 / 24 / 2025 THROUGH 05 / 28 / 2025</i>			
11 ELECTION	ELECTION DATE Month Day Year <i>06 / 07 / 2025</i>		ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
	12 OFFICE OFFICE HELD (if any) <i>Pasadena City Council Member H</i>		13 OFFICE SOUGHT (if known) <i>MAYOR of Pasadena TX</i>	
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	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 checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE		COMMITTEE NAME <i>SAN JACINTO CONSERVATIVES PAC</i>
		COMMITTEE ADDRESS <i>405 WAFER STREET 77506</i>		COMMITTEE CAMPAIGN TREASURER NAME <i>Tammie Nielson</i>
		COMMITTEE CAMPAIGN TREASURER ADDRESS <i>405 WAFER STREET 77506</i>		

OFFICE USE ONLY

Date Received
2025 MAY 30 AM 9:37

Date Hand-delivered or Date Postmarked

Receipt # Amount \$

Date Processed

Date Imaged

CITY SECRETARY

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

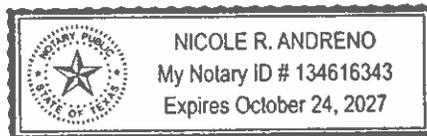
16 C/OH NAME <i>Thomas Schoenbein</i>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ <i>197³⁵</i>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <i>123,930⁹⁸</i>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$ <i>654⁰⁶</i>
	4. TOTAL POLITICAL EXPENDITURES	\$ <i>120,381⁹⁸</i>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <i>67,442²²</i>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <i>0</i>

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.

Thomas Schoenbein
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Thomas Schoenbein this the 30th day of May, 2025, to certify which, witness my hand and seal of office.

[Signature] Signature of officer administering oath
 Nicole R. Andreno Printed name of officer administering oath
 Notary 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

19 FILER NAME <i>THOMAS Schenkein</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 116,010 ⁹⁸
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 7920 ⁰⁹
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ 0
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 120,381 ⁹⁹
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

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: 2	
2 FILER NAME Thomas Schoerhein		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0.00	
5 Date 5/23/25	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) JON MATHew	8 Amount of Contribution \$ \$ 500.00	9 In-kind contribution description CAMPAIGN Location Fee
7 Contributor address; City; State; Zip Code 2618 Geneva Red Bluff Pasadena TX 77034		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Business owner		11 Employer (FOR NON-JUDICIAL)(See Instructions) Self Employed	
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 5/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) RYAN S. HOW CAMPAIGN	Amount of Contribution \$ \$ 6920.00	In-kind contribution description CAMPAIGN Advertising
Contributor address; City; State; Zip Code 1 Pinnacle way Pasadena TX 77504		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Executive Pinnacle		Employer (FOR NON-JUDICIAL)(See Instructions) Pinnacle	
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.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 2	
2 FILER NAME <i>Thomas Schoenlein</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0.00	
5 Date 5/21/25	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shelly Filler	8 Amount of Contribution \$ \$500	9 In-kind contribution description Campaign Event/ Food Bev.
7 Contributor address; City; State; Zip Code 5726 Westarck Ln Pasadena TX 77505		<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	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
		<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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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: 12
2 FILER NAME Thomas Schoenbein		3 Filer ID (Ethics Commission Filers)
4 Date 05/12/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) PAUL & JUDITH GARCIA	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 4502 SAO PAULO ST PASADENA TX 77504		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 05/20/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bruce Walters	Amount of contribution (\$) \$2000.00
Contributor address; City; State; Zip Code 801 SHADOW LN PASADENA TX 77506		
Principal occupation / Job title (See Instructions) Bruce Temporary Services		Employer (See Instructions) SELF EMPLOYED
Date 05/20/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) M.P. JACKSON	Amount of contribution (\$) \$1000.00
Contributor address; City; State; Zip Code PO Box 5421 Houston TX 77325		
Principal occupation / Job title (See Instructions) Police officer		Employer (See Instructions) City of Pasadena
Date 05/21/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) HR Green	Amount of contribution (\$) \$1000.00
Contributor address; City; State; Zip Code 11011 Richmond Ave St 200 Houston TX 77042		
Principal occupation / Job title (See Instructions) ENGINEERING		Employer (See Instructions) HR Green

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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: 12
2 FILER NAME Thomas Schoenbein		3 Filer ID (Ethics Commission Filers)
4 Date 05/22/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Mitchell	7 Amount of contribution (\$) \$ 500⁰⁰
6 Contributor address; City; State; Zip Code 3546 Dry Creek Pasadena Tx 77505		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 05/22/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beverly Gyllen	Amount of contribution (\$) \$ 200⁰⁰
Contributor address; City; State; Zip Code 3907 Ecuador Dr Pasadena Tx 77504		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 05/22/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Cowell	Amount of contribution (\$) \$ 200⁰⁰
Contributor address; City; State; Zip Code 3914 Salvador St Pasadena Tx 77504		
Principal occupation / Job title (See Instructions) Dentist Cowell DDS		Employer (See Instructions) OWNER
Date 05/22/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phyllis Targuard	Amount of contribution (\$) \$ 20⁰⁰
Contributor address; City; State; Zip Code 12442 Rutgers Park ct. Houston Tx 77058		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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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: 12
2 FILER NAME THOMAS Schoenbein		3 Filer ID (Ethics Commission Filers)
4 Date 05/26/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arturo Almeida	7 Amount of contribution (\$) \$ 50⁰⁰
6 Contributor address; City; State; Zip Code 6034 Denmark Dr Pasadena TX 77505		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 04/28/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnny Isbell	Amount of contribution (\$) \$ 9500⁰⁰
Contributor address; City; State; Zip Code PO Box 177 Pasadena TX 77501		
Principal occupation / Job title (See Instructions) Apache Oil		Employer (See Instructions) Self Employed
Date 05/05/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albert Chambers	Amount of contribution (\$) \$ 20,000
Contributor address; City; State; Zip Code 10959 N. P. La Porte TX 77571		
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self Employed
Date 05/05/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher Moody	Amount of contribution (\$) \$ 500⁰⁰
Contributor address; City; State; Zip Code 6423 Fuverness Way Pasadena TX 77505		
Principal occupation / Job title (See Instructions) Sales Director		Employer (See Instructions) DSS

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MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME Thomas Schoenbein		3 Filer ID (Ethics Commission Filers)
4 Date 05/05/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDALL MOODY	7 Amount of contribution (\$) \$ 500⁰⁰
	6 Contributor address; City; State; Zip Code 4631 NATIONS PASADENA TX 77505	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 05/05/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERMEO DELACRUZ	Amount of contribution (\$) \$ 100⁰⁰
	Contributor address; City; State; Zip Code 2005 EASTWIND DR Deer Park TX 77536	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 05/05/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAN JACINTO CONSERVATIVES	Amount of contribution (\$) \$ 1000⁰⁰
	Contributor address; City; State; Zip Code 5406 GOWA Red Bluff PASADENA TX 77505	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/05/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRY CERNOSEK	Amount of contribution (\$) 2500⁰⁰
	Contributor address; City; State; Zip Code 1705 Kingsdale Dr Deer Park TX 77536	
Principal occupation / Job title (See Instructions) Cernosek wrecker Service		Employer (See Instructions) Self Employed

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SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME THOMAS Schoenbein		3 Filer ID (Ethics Commission Filers)
4 Date 05/21/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) CARLOS Velasco	7 Amount of contribution (\$) \$ 40⁰⁰
6 Contributor address; City; State; Zip Code 4210 Thunderbay Pasadena TX 77504		
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Home Star
Date 05/22/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DANNY Schnautz	Amount of contribution (\$) \$ 1250⁰⁰
Contributor address; City; State; Zip Code PO Box 5808 Pasadena TX 77508		
Principal occupation / Job title (See Instructions) Clark Freight line Trucking		Employer (See Instructions) Self Employed
Date 05/22/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) JAVIER Morales	Amount of contribution (\$) \$ 1500⁰⁰
Contributor address; City; State; Zip Code 102 MUNGER Pasadena TX 77506		
Principal occupation / Job title (See Instructions) MORales ENGINEERING		Employer (See Instructions) Self Employed
Date 05/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elizabeth Jay	Amount of contribution (\$) \$ 25⁰⁰
Contributor address; City; State; Zip Code 6619 Avenel Pasadena TX 77505		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME THOMAS Schoonbein		3 Filer ID (Ethics Commission Filers)
4 Date 05/08/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) JIMMY JONES	7 Amount of contribution (\$) \$ 500⁰⁰
6 Contributor address; City; State; Zip Code 4515 Artec St PASADENA TX 77504		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 05/10/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DeVise Ramirez	Amount of contribution (\$) \$ 100⁰⁰
Contributor address; City; State; Zip Code 4739 Cornoustie PASADENA TX 77505		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 05/13/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Petra Properties	Amount of contribution (\$) \$ 250⁰⁰
Contributor address; City; State; Zip Code PO Box 5355 PASADENA TX 77503		
Principal occupation / Job title (See Instructions) Property management		Employer (See Instructions) Petra Properties
Date 05/13/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) GARY & DIANE VanderWiele	Amount of contribution (\$) \$ 250⁰⁰
Contributor address; City; State; Zip Code 6410 Stone Briar Dr. PASADENA TX 77505		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME THOMAS Schoenbein		3 Filer ID (Ethics Commission Filers)
4 Date 05/15/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SARAH Brady	7 Amount of contribution (\$) \$100
6 Contributor address; City; State; Zip Code 4401 Fox Meadow Pasadena TX 77504		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 05/15/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHANNON GAITAN	Amount of contribution (\$) \$20.00
Contributor address; City; State; Zip Code 6119 SAINT ANDREWS PASADENA TX 77505		
Principal occupation / Job title (See Instructions) Roofing		Employer (See Instructions) SELF EMPLOYED
Date 05/15/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBYN DAVIS GALLIAN	Amount of contribution (\$) \$20.00
Contributor address; City; State; Zip Code 6807 Little Redwood PASADENA TX 77505		
Principal occupation / Job title (See Instructions) Teacher (sub) / Retired		Employer (See Instructions) PASADENA ISD
Date 05/16/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAUL NUNU	Amount of contribution (\$) \$1 250.00
Contributor address; City; State; Zip Code 3256 Burke Rd PASADENA TX 77504		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF EMPLOYED

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SCHEDULE A1

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2 FILER NAME THOMAS Schoenbein		3 Filer ID (Ethics Commission Filers)
4 Date 05/16/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) T. HRYN JOHN 6 Contributor address; City; State; Zip Code 15430 WOODLAND ORCHARD Dr Cypress, TX 77433	7 Amount of contribution (\$) \$ 1000⁰⁰
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) Geo Science
Date 05/16/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MIKE ROGERS Contributor address; City; State; Zip Code 4917 LOUISE ST Seabrook TX 77586	Amount of contribution (\$) \$ 200⁰⁰
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 05/21/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DIANE BROWN Contributor address; City; State; Zip Code 4723 Kipper Cir PASADENA TX 77505	Amount of contribution (\$) \$ 250⁰⁰
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 05/21/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) BRIAN Heckathorne Contributor address; City; State; Zip Code 220 OAKDALE ST PASADENA TX	Amount of contribution (\$) \$ 50⁰⁰
Principal occupation / Job title (See Instructions) advertising		Employer (See Instructions) Bayside PR

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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME Thomas Schenkein		3 Filer ID (Ethics Commission Filers)
4 Date 05/22/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) GENIA MAHAFFEY	7 Amount of contribution (\$) \$ 50⁰⁰
6 Contributor address; City; State; Zip Code 1707 TYNEMOUTH DRIVE PASADENA TX 77504		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 05/22/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) PANNY STEFFENAUER	Amount of contribution (\$) \$ 300⁰⁰
Contributor address; City; State; Zip Code 3907 ECUADOR DR. PASADENA TX 77504		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 5/26/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DAVID MIDDLETON	Amount of contribution (\$) \$ 4532⁰⁰
Contributor address; City; State; Zip Code 1702 BEACHTOWN DR. GALVESTON TX 77550		
Principal occupation / Job title (See Instructions) owner Oil & Gas / Middleton Gas		Employer (See Instructions) State of Texas
Date 5/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) CONSERVATIVE CITIZENS CLUB PAC	Amount of contribution (\$) \$ 40,000
Contributor address; City; State; Zip Code 3910 PINEBROOK WAY HOUSTON TX 77059		
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: 12
2 FILER NAME <i>Thomas Schoerkein</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>05/07/25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Charles & Sheila Swindall</i>	7 Amount of contribution (\$) <i>\$ 500⁰⁰</i>
	6 Contributor address; City; State; Zip Code <i>10871 US Hwy 190E Point Blank Tx 77364</i>	
8 Principal occupation / Job title (See Instructions) <i>owner Swindall Paint & Body</i>		9 Employer (See Instructions) <i>SELF EMPLOYED</i>
Date <i>05/07/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Best Recycled Auto Parts</i>	Amount of contribution (\$) <i>\$ 500⁰⁰</i>
	Contributor address; City; State; Zip Code <i>2613 Red Bluff PASADENA Tx 77506</i>	
Principal occupation / Job title (See Instructions) <i>Resale Parts</i>		Employer (See Instructions) <i>Best Recycled Auto Parts</i>
Date <i>05/07/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Jan Mathews</i>	Amount of contribution (\$) <i>\$ 20,000</i>
	Contributor address; City; State; Zip Code <i>2618 Genoa Red Bluff Houston</i>	
Principal occupation / Job title (See Instructions) <i>Landscaping owner</i>		Employer (See Instructions) <i>SELF EMPLOYED</i>
Date <i>05/08/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>PASADENA Police Officers UNION Local 114</i>	Amount of contribution (\$) <i>\$ 2000⁰⁰</i>
	Contributor address; City; State; Zip Code <i>PO Box 34267 Houston Tx 77234</i>	
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.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME THOMAS Schoenbein		3 Filer ID (Ethics Commission Filers)
4 Date 05/07/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John Bangilan	7 Amount of contribution (\$) \$ 100⁰⁰
6 Contributor address; City; State; Zip Code 7324 County Rd 128 Alton Tx 77511		
8 Principal occupation / Job title (See Instructions) Police officer		9 Employer (See Instructions) city of Pasadena
Date 05/09/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) CAMERON Lowe	Amount of contribution (\$) \$ 100⁰⁰
Contributor address; City; State; Zip Code 1519 Village Townhome Dr Pasadena Tx 77504		
Principal occupation / Job title (See Instructions) Land Surveyor		Employer (See Instructions) LJA
Date 05/09/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) NAN'S COOKIES	Amount of contribution (\$) \$ 50⁰⁰
Contributor address; City; State; Zip Code 4805 Holly Park Dr Pasadena Tx 77505		
Principal occupation / Job title (See Instructions) BAKER		Employer (See Instructions) Self Employed
Date 05/09/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vickie Elizabeth	Amount of contribution (\$) \$ 200⁰⁰
Contributor address; City; State; Zip Code 6315 Ray Dr. Pasadena Tx 77505		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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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: 12
2 FILER NAME <i>Thomas Schoonbein</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>05/03/25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>JAMES ANDERSON</i>	7 Amount of contribution (\$) <i>\$100⁰⁰</i>
6 Contributor address; City; State; Zip Code <i>4950 ANTHONY LN PASADENA TX 77505</i>		
8 Principal occupation / Job title (See Instructions) <i>Police officer</i>		9 Employer (See Instructions) <i>City of PASADENA</i>
Date <i>05/04/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>William Bennett</i>	Amount of contribution (\$) <i>1000⁰⁰</i>
Contributor address; City; State; Zip Code <i>6110 LACEY OAK PASADENA TX 77505</i>		
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions) <i>N/A</i>
Date <i>05/05/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>RYAN TAYLOR</i>	Amount of contribution (\$) <i>\$1000⁰⁰</i>
Contributor address; City; State; Zip Code <i>949 OMAH ST TX 77009</i>		
Principal occupation / Job title (See Instructions) <i>TNT construction</i>		Employer (See Instructions) <i>Self Employed</i>
Date <i>05/06/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Community Leaders of America</i>	Amount of contribution (\$) <i>500⁰⁰</i>
Contributor address; City; State; Zip Code <i>3008 N 161st TERRACE OMAHA NE 68116</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Thomas Schoenbein</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>04/24/25</i>	5 Payee name <i>Facebook</i>	
6 Amount (\$) <i>\$100.00</i>	7 Payee address; City; State; Zip Code <i>1 Hacker Way Menlo Park CA 94025</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <i>Facebook AD</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>4/25/25</i>	Payee name <i>GEKA ENERGY</i>	
Amount (\$) <i>\$111.11</i>	Payee address; City; State; Zip Code <i>601 Travis St #1400 Houston TX 77002</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Office overhead</i>	Description <i>Electricity Campaign office</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>4/28/25</i>	Payee name <i>Facebook</i>	
Amount (\$) <i>\$100.00</i>	Payee address; City; State; Zip Code <i>1 Hacker Way Menlo Park CA 94025</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>Facebook 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 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

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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1	2 FILER NAME <i>THOMAS Schoenhein</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>04/29/25</i>	5 Payee name <i>CAMPAIGN HQ</i>	
6 Amount (\$) <i>\$ 9021⁰⁰</i>	7 Payee address; City; State; Zip Code <i>109 W Front St. Brooklyn TX 75221</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Other</i>	(b) Description <i>Voter outreach</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>04/30/25</i>	Payee name <i>Corporate Communications Center Inc</i>	
Amount (\$) <i>\$6730³⁸</i>	Payee address; City; State; Zip Code <i>4030 Harry Hines Blvd. Dallas TX 75219</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>CAMPAIGN Advertising</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>05/01/25</i>	Payee name <i>CO/ON COMPANY</i>	
Amount (\$) <i>\$1000⁰⁰</i>	Payee address; City; State; Zip Code <i>7941 Katy fwy #108 Houston TX 77024</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>CAMPAIGN Advertising</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

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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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <i>Thomas Schoenlein</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>05/01/25</i>		5 Payee name <i>Facebook</i>			
6 Amount (\$) <i>\$100⁰⁰</i>		7 Payee address; City; State; Zip Code <i>1 Hacker Way Menlo Park CA 94025</i>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>		(b) Description <i>Campaign Advertising</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	
Date <i>05/01/25</i>		Payee name <i>Johnny Tamale Cantina</i>			
Amount (\$) <i>\$200⁰⁰</i>		Payee address; City; State; Zip Code <i>4647 East Sam Houston Pkwy South Pasadena TX 77505</i>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Food/Beverage</i>		Description <i>Campaign 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 <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <i>05/01/25</i>		Payee name <i>Apollo Signs</i>			
Amount (\$) <i>\$460⁰⁶</i>		Payee address; City; State; Zip Code <i>5222 Cypress St Pasadena TX 77503</i>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>		Description <i>yard sign stakes</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	

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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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Thomas Schoenbein</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>05/05/25</i>	5 Payee name <i>Facebook</i>	
6 Amount (\$) <i>\$100.00</i>	7 Payee address; City; State; Zip Code <i>1 Hacker Way Menlo Park CA 94025</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <i>Facebook Post Ad</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>05/05/25</i>	Payee name <i>chick-fil-A</i>	
Amount (\$) <i>\$283.51</i>	Payee address; City; State; Zip Code <i>5104 Fairmont Pkwy Pasadena TX 77505</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Food Beverage Expense</i>	Description <i>CAMPAIGN ELECTION DAY FOOD</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>05/05/25</i>	Payee name <i>Facebook</i>	
Amount (\$) <i>\$100.00</i>	Payee address; City; State; Zip Code <i>1 Hacker Way Menlo Park CA 94025</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>Facebook Post 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 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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Thomas Schoenbein</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>05/05/25</i>	5 Payee name <i>SARAH'S HOUSE</i>	
6 Amount (\$) <i>\$ 200.00</i>	7 Payee address; <i>711 Perla Rd</i>	City; State; Zip Code <i>PASADENA TX 77502</i>
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>CONTRIBUTION / DONATIONS</i>	(b) Description <i>FUNDRAISER</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>05/05/25</i>	Payee name <i>JOHNNY TAMALE CANTINA</i>	
Amount (\$) <i>\$ 793.23</i>	Payee address; <i>4647 E. SAM HOUSTON PKWY</i>	City; State; Zip Code <i>PASADENA TX 77505</i>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>EVENT EXPENSE</i>	Description <i>CAMPAIGN RALLY ELECTION NIGHT</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>05/05/25</i>	Payee name <i>COLON & COMPANY</i>	
Amount (\$) <i>\$ 5650.00</i>	Payee address; <i>7941 KATY FWY</i>	City; State; Zip Code <i>HOUSTON TX 77024</i>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>CAMPAIGN ADVERTISING</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

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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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Thomas Schoenlein</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>05/06/25</i>	5 Payee name <i>Colow ? Company</i>	
6 Amount (\$) <i>A 3700⁰⁰</i>	7 Payee address; City; State; Zip Code <i>7941 Katy Fwy Houston Tx 77024</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <i>Testing</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>5/20/25</i>	Payee name <i>Colow ? Company</i>	
Amount (\$) <i>\$ 500⁰⁰</i>	Payee address; City; State; Zip Code <i>7941 Katy Fwy Houston Tx 77024</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>Campaign Advertising</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>5/28/25</i>	Payee name <i>Pay Pal</i>	
Amount (\$) <i>\$ 410⁰⁰</i>	Payee address; City; State; Zip Code <i>2211 N. 15th Street SAN Jose CA 95131</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Fees</i>	Description <i>Fundraising Fees</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

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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 <i>Thomas Schoenbein</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>05/06/25</i>	5 Payee name <i>Colon : Company</i>	
6 Amount (\$) <i># 7600⁰⁰</i>	7 Payee address; City; State; Zip Code <i>7941 Katy Fwy Houston Tx 77024</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Other</i>	(b) Description <i>Voter Outreach</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>05/08/25</i>	Payee name <i>Colon : Company</i>	
Amount (\$) <i># 4500⁰⁰</i>	Payee address; City; State; Zip Code <i>7941 Katy Fwy Houston Tx 77024</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>Campaign Advertisement</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>05/12/25</i>	Payee name <i>Sign Pros</i>	
Amount (\$) <i># 1623⁷⁵</i>	Payee address; City; State; Zip Code <i>4909 W. Pasadena Blvd suite 102 Deer Park 77536</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>Campaign Signs</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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Thomas Schwenbein</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>0/5/12/25</i>	5 Payee name <i>GEXA ENERGY</i>	
6 Amount (\$) <i>\$ 154⁵²</i>	7 Payee address; City; State; Zip Code <i>601 TRAVIS ST #1400 HOUSTON TX 77002</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Office Overhead</i>	(b) Description <i>Electricity Bill Campaign HQ</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
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Date <i>05/16/25</i>	Payee name <i>SPANKYS PIZZA</i>		
Amount (\$) <i>\$ 385⁵⁴</i>	Payee address; City; State; Zip Code <i>4010 Sparger Hwy Pasadena TX 77504</i>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Food Beverage Expense</i>	Description <i>NATIONAL Police Week Event</i>	
	(c) <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
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Date <i>05/16/25</i>	Payee name <i>COLON COMPANY</i>		
Amount (\$) <i>\$ 5000⁰⁰</i>	Payee address; City; State; Zip Code <i>7941 Katy Fwy Houston TX 77024</i>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>CAMPAIGN Advertising</i>	
	(c) <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
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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 <i>THOMAS Schoonbein</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>05/19/25</i>	5 Payee name <i>Facebook</i>	
6 Amount (\$) <i>\$100⁰⁰</i>	7 Payee address; City; State; Zip Code <i>1 Hacker way Menlo Park CA 94025</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <i>Facebook AD</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>05/20/25</i>	Payee name <i>Colow : COMPANY</i>	
Amount (\$) <i>\$7500⁰⁰</i>	Payee address; City; State; Zip Code <i>7941 Katy Fwy Houston TX 77024</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>other</i>	Description <i>Voter Outreach</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>05/20/25</i>	Payee name <i>Colow : COMPANY</i>	
Amount (\$) <i>\$5000⁰⁰</i>	Payee address; City; State; Zip Code <i>7941 Katy Fwy Houston TX 77024</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>CAMPAIGN Advertising</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

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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 <i>Thomas Schaebein</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>5/27/25</i>	5 Payee name <i>FOX-BRYANT</i>
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6 Amount (\$) <i>\$13,956</i>	7 Payee address: <i>855 W Street St2 Lincoln NE 68508</i>	City:	State:	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Other</i>	(b) Description <i>Voter outreach</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
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Date <i>5/27/25</i>	Payee name <i>Colon : Company</i>
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Amount (\$) <i>\$9000</i>	Payee address: <i>7941 Katy Fwy Houston TX 77024</i>	City:	State:	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Other</i>	Description <i>Voter outreach</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
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Date <i>5/28/25</i>	Payee name <i>Brabender Corp</i>
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Amount (\$) <i>\$1170</i>	Payee address: <i>1218 Grandview Ave Pittsburgh PA 15211</i>	City:	State:	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>Campaign Advertising</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
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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 <i>Thomas Schoenbein</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>05/20/25</i>	5 Payee name <i>Colon? Company</i>	
6 Amount (\$) <i>\$ 629⁰⁰</i>	7 Payee address: <i>7941 Katy Fwy Houston Tx 77024</i>	City: State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Other</i>	(b) Description <i> voter outreach</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>05/20/25</i>	Payee name <i>BRABENDER COX</i>	
Amount (\$) <i>\$ 7500⁰⁰</i>	Payee address: <i>1218 GRANDVIEW AVE PITTSBURGH PA. 15211</i>	City: State: Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>Campaign Adver</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>05/22/25</i>	Payee name <i>Peppers Beef & Seafood</i>	
Amount (\$) <i>\$ 898.44</i>	Payee address: <i>3604 Fairmont Ave</i>	City: State: Zip Code <i>PASADENA Tx 77504</i>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Food/Beverages</i>	Description <i>Campaign 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 <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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Thomas Schoenbein</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>05/23/25</i>	5 Payee name <i>Color Company</i>	
6 Amount (\$) <i>\$ 5500⁰⁰</i>	7 Payee address; City; State; Zip Code <i>7941 Katy Fwy Houston TX 77024</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <i>Campaign Advertising</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>05/23/25</i>	Payee name <i>Apollo Signs</i>	
Amount (\$) <i>\$ 2949⁸¹</i>	Payee address; City; State; Zip Code <i>5222 Cypress St Pasadena TX 77503</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>CAMPAIGN SIGNS</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>05/27/25</i>	Payee name <i>Facebook</i>	
Amount (\$) <i>\$ 100⁰⁰</i>	Payee address; City; State; Zip Code <i>1 Wacker Way Menlo Park CA 94025</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Facebook 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

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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 ¹ | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Thomas Schenkbein</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>5/27/25</i>	5 Payee name <i>BRABENDER COX</i>	
6 Amount (\$) <i>\$ 7500⁰⁰</i>	7 Payee address; City; State; Zip Code <i>1218 Grandview Ave Pittsburgh PA 15211</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <i>Campaign Advertising</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>5/27/25</i>	Payee name <i>Coloni Company</i>	
Amount (\$) <i>\$ 4455⁰⁰</i>	Payee address; City; State; Zip Code <i>7941 Katy Fwy Houston TX 77024</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>Campaign Advertising</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>5/27/25</i>	Payee name <i>Coloni Company</i>	
Amount (\$) <i>\$ 5000⁰⁰</i>	Payee address; City; State; Zip Code <i>7941 Katy Fwy Houston TX 77024</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Consulting</i>	Description <i>Campaign Consulting</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

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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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Thomas Schorobain</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>5/27/25</i>	5 Payee name <i>Facebook</i>	
6 Amount (\$) <i>\$ 100⁰⁰</i>	7 Payee address; City; State; Zip Code <i>1 Hacker Way Menlo Park CA 94025</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <i>ADS Campaign</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>5/27/25</i>	Payee name <i>Facebook</i>
Amount (\$) <i>\$ 100⁰⁰</i>	Payee address; City; State; Zip Code <i>1 Hacker Way Menlo Park CA 94025</i>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>
	Description <i>ADS Campaign</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>5/27/25</i>	Payee name <i>Facebook</i>
Amount (\$) <i>\$ 100⁰⁰</i>	Payee address; City; State; Zip Code <i>1 Hacker Way Menlo Park CA 94025</i>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>
	Description <i>ADS Campaign</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

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