

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: 16
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / <u>MR</u> FIRST MI William T	OFFICE USE ONLY	
	NICKNAME LAST SUFFIX Thomas Schoenbein Jr		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 6911 Silver Grove Ct Pasadena Tx 77505		
	Date Received 2025 APR - 3 9:01 CITY SECRETAR		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (832) 210-8075 N/A	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS / MRS / <u>MR</u> FIRST MI PAIGE O	Receipt # amount	
	NICKNAME LAST SUFFIX McInnis	Date Processed	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 15950 MANOR Square Houston Tx 77062		
	Date Imaged		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (281) 630-3381 N/A		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year Month Day Year 01 / 01 / 2025 THROUGH 03 / 24 / 2025		
11 ELECTION	ELECTION DATE Month Day Year 05 / 03 / 2025	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) PASADENA CITY Council District H	13 OFFICE SOUGHT (if known) MAYOR of PASADENA	
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.		
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS	

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PG 2**

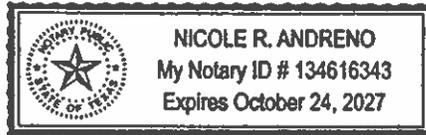
15 C/OH NAME		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ <u>0</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>25,605.67</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ <u>1303.42</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>31,803.29</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>25932.71</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>0</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.

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 2nd day of April, 2025, to certify which, witness my hand and seal of office.

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

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 25,605 ⁶⁷
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
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	\$ 31,803 ²⁹
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

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: 5
2 FILER NAME Thomas Schoenbein		3 Filer ID (Ethics Commission Filers)
4 Date 1/23/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 3 PASADENA TX UK	7 Amount of contribution (\$) \$ 5,000⁰⁰
6 Contributor address; City; State; Zip Code 2210 GRAND CORNER DR #130 KATH TX 77494		
8 Principal occupation / Job title (See Instructions) Investor		9 Employer (See Instructions) Self employed
Date 1/25/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shalley Fuller	Amount of contribution (\$) \$ 200⁰⁰
Contributor address; City; State; Zip Code 5726 Westrick Ln Pasadena Tx 77505		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 1/29/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M P JACKSON	Amount of contribution (\$) \$ 500⁰⁰
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 1/25/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JANE WILLIAMS	Amount of contribution (\$) \$ 1,000⁰⁰
Contributor address; City; State; Zip Code 301 Youpan Seabrook Tx 77586		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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: 5
2 FILER NAME Thomas Schoonbein		3 Filer ID (Ethics Commission Filers)
4 Date 2/20/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDALL MOODY	7 Amount of contribution (\$) \$ 200⁰⁰
6 Contributor address; City; State; Zip Code 4631 NATIONS PASADENA TX 77505		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 2/20/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petra Properties LP	Amount of contribution (\$) \$ 250⁰⁰
Contributor address; City; State; Zip Code Po Box 5355 Pasadena TX 77508		
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self employed
Date 2/25/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARBARA MORENO	Amount of contribution (\$) \$ 485⁰⁶
Contributor address; City; State; Zip Code 5502 Sierra Ct Pasadena TX 77505		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 2/26/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WISAM GHUNEIM	Amount of contribution (\$) \$ 2500⁰⁰
Contributor address; City; State; Zip Code 4319 Dow Way Pasadena TX 77505		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self employed
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <u>5</u>
2 FILER NAME <u>Thomas Schoenberg</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>2/26/25</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Mohamad Ghuneim</u>	7 Amount of contribution (\$) <u>\$ 2500⁰⁰</u>
6 Contributor address; City; State; Zip Code <u>10121 Windmill Lakes Blvd Apt 806 Houston TX 77075</u>		
8 Principal occupation / Job title (See Instructions) <u>Attorney</u>		9 Employer (See Instructions) <u>Self employed</u>
Date <u>2/27/25</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Event Tickets Fundraiser</u>	Amount of contribution (\$) <u>\$ 970⁶¹</u>
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions) <u>Event Fundraiser Tickets</u>		Employer (See Instructions) <u>.</u>
Date <u>2/28/25</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Robert Talton</u>	Amount of contribution (\$) <u>\$ 1000⁰⁰</u>
Contributor address; City; State; Zip Code <u>1501 N Primavera Dr. Pearland TX 77581</u>		
Principal occupation / Job title (See Instructions) <u>Retired</u>		Employer (See Instructions) <u>Retired</u>
Date <u>2/28/25</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Glenn West</u>	Amount of contribution (\$) <u>\$ 200⁰⁰</u>
Contributor address; City; State; Zip Code <u>1406 Pebble Banks Seabrook TX 77586</u>		
Principal occupation / Job title (See Instructions) <u>Police Officer</u>		Employer (See Instructions) <u>City of Houston</u>

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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: 5
2 FILER NAME Thomas Schoenlein		3 Filer ID (Ethics Commission Filers)
4 Date 2/28/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rex Teter	7 Amount of contribution (\$) \$ 100⁰⁰
6 Contributor address; City; State; Zip Code 411 Yorkshire Ave Pasadena TX 77503		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 2/28/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Choss Miles	Amount of contribution (\$) \$ 100⁰⁰
Contributor address; City; State; Zip Code 3518 Dry Creek Dr. Pasadena TX 77505		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 2/28/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Raul & Judith Garcia	Amount of contribution (\$) \$ 800⁰⁰
Contributor address; City; State; Zip Code 4502 Sao Paulo St. Pasadena TX 77504		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 2/28/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) SAN JACINTO CONVENTION	Amount of contribution (\$) \$ 1000⁰⁰
Contributor address; City; State; Zip Code 5406 Genoa Red Bluff Pasadena TX 77505		
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: 5
2 FILER NAME Thomas Schoenbein		3 Filer ID (Ethics Commission Filers)
4 Date 3/3/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M.P. Jackson	7 Amount of contribution (\$) \$ 500⁰⁰
6 Contributor address; City; State; Zip Code PO Box ⁵⁴² Houston Tx 77325		
8 Principal occupation / Job title (See Instructions) officer		9 Employer (See Instructions) city of Pasadena
Date 3/3/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARK FRANCHEN	Amount of contribution (\$) \$ 300⁰⁰
Contributor address; City; State; Zip Code 4911 CAROLINE ST Seabrook Tx 77585		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 3/7/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PASADENA Police officers UNION	Amount of contribution (\$) \$ 3000⁰⁰
Contributor address; City; State; Zip Code PO Box 34267 Houston Tx 77234		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/7/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVID MIDDLETON	Amount of contribution (\$) \$ 5000⁰⁰
Contributor address; City; State; Zip Code 1702 Beachtown Dr. Galveston Tx 77550		
Principal occupation / Job title (See Instructions) Middleton oil company.		Employer (See Instructions) SELF EMPLOYED
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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 Schoerhein</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>4/1/25</i>	5 Payee name <i>Devine Promotions & Printing</i>	
6 Amount (\$) <i>\$3984¹⁸</i>	7 Payee address; City; State; Zip Code <i>5411 Brookgreen suite B Houston TX 77017</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <i>mail</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>3/31/25</i>	Payee name <i>ATT Internet</i>	
Amount (\$) <i>\$128⁸²</i>	Payee address; City; State; Zip Code <i>AT&T.COM</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>office overhead</i>	Description <i>Internet</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>3/31/25</i>	Payee name <i>Academy Sports & outdoors</i>	
Amount (\$) <i>\$299⁷²</i>	Payee address; City; State; Zip Code <i>4627 E Sam Houston Pkwy Pasadena TX 77505</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expenses</i>	Description <i>Canopies</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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 Schoenlein</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>3/27/25</i>	5 Payee name <i>Vista Print</i>	
6 Amount (\$) <i>388.59</i>	7 Payee address; City; State; Zip Code <i>Vista Print.com</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <i>Door Hangers</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>3/21/25</i>	Payee name <i>Sign Pros Unlimited</i>	
Amount (\$) <i>\$1648.77</i>	Payee address; City; State; Zip Code <i>4909 W Pasadena Blvd #3 Deer Park Tx 77536</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>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>3/17/25</i>	Payee name <i>GEXA ENERGY</i>	
Amount (\$) <i>\$115.75</i>	Payee address; City; State; Zip Code <i>GEXA ENERGY.COM</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Office Overhead</i>	Description <i>Electric Bill HQ</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>3/17/25</i>	5 Payee name <i>ATT Internet</i>	
6 Amount (\$) <i>\$115.75</i>	7 Payee address; City; State; Zip Code <i>ATT.COM</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Office overhead</i>	(b) Description <i>Internet</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>3/17/25</i>	Payee name <i>Vista Print</i>	
Amount (\$) <i>\$415.65</i>	Payee address; City; State; Zip Code <i>Vista Print.com</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>Door Hangers</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>3/17/25</i>	Payee name <i>4imprint</i>	
Amount (\$) <i>\$190.46</i>	Payee address; City; State; Zip Code <i>4imprint.com</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>BANNERS</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>3/6/25</i>	5 Payee name <i>TEXAS RoadHouse</i>	
6 Amount (\$) <i>\$61.62</i>	7 Payee address; <i># 2063 PASADENA TX</i>	City; State; Zip Code <i>77504</i>
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Food Expense</i>	(b) Description <i>Meeting</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>3/6/25</i>	Payee name <i>Vista Print</i>	
Amount (\$) <i>\$345.29</i>	Payee address; <i>Vista Print.com</i>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>Door Hangers</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>3/4/25</i>	Payee name <i>Apollo Signs</i>	
Amount (\$) <i>\$12781</i>	Payee address; <i>5222 Cypress St PASADENA TX</i>	City; State; Zip Code <i>77503</i>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>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 | 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 Schoenlein</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>2/28/25</i>	5 Payee name <i>ERNIE'S Cafe & Catering</i>	
6 Amount (\$) <i>\$1536 40</i>	7 Payee address; City; State; Zip Code <i>6834 Cedar Lawn Circle PASADENA TX 77503</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	(b) Description <i>Food</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>3/3/25</i>	Payee name <i>Vista Paint</i>	
Amount (\$) <i>\$111 20</i>	Payee address; City; State; Zip Code <i>Vista Paint.com</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>Door Hangars</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>3/4/25</i>	Payee name <i>Apollo Signs</i>	
Amount (\$) <i>\$1217 81</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>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

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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>3/6/25</i>	5 Payee name <i>Vista Print</i>	
6 Amount (\$) <i>345²⁹</i>	7 Payee address; City; State; Zip Code <i>Vista Print . com</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <i>Don. Hanger</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>3/7/25</i>	Payee name <i>Pasadena Chamber of Commerce</i>	
Amount (\$) <i>3250⁰⁰</i>	Payee address; City; State; Zip Code <i>4334 Fairmont Pasadena Tx 77504</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	Description <i>Meet the candidate Chamber Luncheon</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>3/10/25</i>	Payee name <i>Office Depot</i>	
Amount (\$) <i>\$ 8551</i>	Payee address; City; State; Zip Code <i>3931 Fairway Plaza Dr Pasadena Tx 77505</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Office Overhead</i>	Description <i>Ink/Toner</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 | 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 Schoenbar</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>3/17/25</i>	5 Payee name <i>4 imprint</i>	
6 Amount (\$) <i>\$190.46</i>	7 Payee address; City; State; Zip Code <i>4 imprint.com</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <i>Event had 6 pts</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>3/12/25</i>	Payee name <i>Vista Print</i>	
Amount (\$) <i>\$415.65</i>	Payee address; City; State; Zip Code <i>Vista Print.com</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>Don Hangers</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>2/17/25</i>	Payee name <i>AT&T</i>	
Amount (\$) <i>\$133.70</i>	Payee address; City; State; Zip Code <i>AT&T Houston TX</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>off. overhead</i>	Description <i>Internet</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 | 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 | | | |

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1 Total pages Schedule F1:	2 FILER NAME <i>Thomas Schoenbein</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>3/21/25</i>	5 Payee name <i>Sign Pro's Unlimited</i>	
6 Amount (\$) <i>164877</i>	7 Payee address; <i>4909 W PASADENA Blvd Dear Park TX 77536</i>	City; State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <i>SIGNS</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>3/26/25</i>	Payee name <i>CORPORATE COMMUNICATIONS Centa Inc</i>	
Amount (\$) <i>\$578654</i>	Payee address; <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>Printing Expense</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>3/31/25</i>	Payee name <i>AT&T</i>	
Amount (\$) <i>\$12833</i>	Payee address; <i>AT&T.COM</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Office Overhead</i>	Description <i>Internet</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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