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): 00080039

2 Total pages filed: 93

OFFICE USE ONLY

Date Received: ELECTRONICALLY FILED 07/15/2026

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR | FIRST: Chris | MI

NICKNAME | LAST: Hollins | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

P.O. Box 56386

Houston, TX 77256

5 CAMPAIGN TREASURER NAME

MS / MRS / MR | FIRST | MI

NICKNAME | LAST | SUFFIX

6 CAMPAIGN TREASURER ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

7 CAMPAIGN TREASURER PHONE

AREA CODE | PHONE NUMBER | EXTENSION

8 REPORT TYPE

- ☐ January 15
- ☐ 30th day before election
- ☐ Runoff
- ☐ 15th day after campaign treasurer appointment (officeholder only)
- ☒ July 15
- ☐ 8th day before election
- ☐ Exceeded modified reporting limit
- ☐ Final Report (Attach C/OH-FR)

9 PERIOD COVERED

Month Day Year: 01/01/2026 THROUGH Month Day Year: 06/30/2026

10 ELECTION

ELECTION DATE: Month Day Year: 11/02/2027

ELECTION TYPE

- ☐ Primary
- ☐ Runoff
- ☐ Other
- ☒ General
- ☐ Special

11 OFFICE

OFFICE HELD (if any): Controller

12 OFFICE SOUGHT (if known): Controller

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

13 C / OH NAME	Hollins, Chris	**14** Filer ID (Ethics Commission Filers)	00080039

15 NOTICE FROM POLITICAL COMMITTEE(S)

☐ 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

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	**$** 0.00
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	**$** 193,244.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	**$** 0.00
	4.	**TOTAL POLITICAL EXPENDITURES**	**$** 98,993.09
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	**$** 607,360.29
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	**$** 0.00

17 AFFIDAVIT

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

Chris Hollins

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of_____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering | Printed name of officer administering | Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

18 FILER NAME	**19** Filer ID (Ethics Commission Filers)
Hollins, Chris	00080039

20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	[X]	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	**$** 193,064.00
2.	[X]	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	**$** 180.00
3.	[ ]	SCHEDULE B: PLEDGED CONTRIBUTIONS	**$**
4.	[ ]	SCHEDULE E: LOANS	**$**
5.	[X]	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	**$** 82,176.71
6.	[ ]	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	**$**
7.	[ ]	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	**$**
8.	[X]	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	**$** 9,293.15
9.	[X]	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	**$** 7,523.23
10.	[ ]	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	**$**
11.	[ ]	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	**$**
12.	[ ]	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	**$**

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 1/52 Rpt: 4/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
06/29/2026	Adjei, Denise	$25.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77044	
8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/26/2026	Allen Boone Humphries Robinson LLP	$1,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77027	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/27/2026	Allen, James	$250.00
	Contributor address; City; State; Zip Code: Houston, TX 77077	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/30/2026	Anderson, Dave	$5,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77254	
Principal occupation / Job title (See Instructions): Not Employed	Employer (See Instructions): Not Employed	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/31/2026	Antonoff, Aintre	$50.00
	Contributor address; City; State; Zip Code: Houston, TX 77006	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 2/52 Rpt: 5/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:_____) / **6** Contributor address; City; State; Zip Code	**7** Amount of Contribution ($)
02/28/2026	Antonoff, Aintre Houston, TX 77006	$50.00

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/13/2026	Antonoff, Aintre Houston, TX 77006	$10.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/13/2026	Antonoff, Aintre Houston, TX 77006	$10.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
03/13/2026	Antonoff, Aintre Houston, TX 77006	$10.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
04/13/2026	Antonoff, Aintre Houston, TX 77006	$10.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 3/52 Rpt: 6/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:_____) / **6** Contributor address; City; State; Zip Code	**7** Amount of Contribution ($)
05/13/2026	Antonoff, Aintre Houston, TX 77006	$10.00

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
06/13/2026	Antonoff, Aintre Houston, TX 77006	$10.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
06/25/2026	Arrington, Joe Cypress, TX 77433	$250.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/08/2026	Ashford, Andrea Houston, TX 77004	$50.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/08/2026	Ashford, Andrea Houston, TX 77004	$50.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 4/52 Rpt: 7/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / **6** Contributor address; City; State; Zip Code	**7** Amount of Contribution ($)
03/08/2026	Ashford, Andrea Houston, TX 77004	$50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of Contribution ($)
04/08/2026	Ashford, Andrea Houston, TX 77004	$50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of Contribution ($)
05/08/2026	Ashford, Andrea Houston, TX 77004	$50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of Contribution ($)
06/08/2026	Ashford, Andrea Houston, TX 77004	$50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of Contribution ($)
06/30/2026	BAC PAC Houston, TX 77046	$1,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 5/52 Rpt: 8/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
05/21/2026	Baldwin, Derrick	$1,000.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77071	
8 Principal occupation / Job title (See Instructions): Sales	**9** Employer (See Instructions): Novartis	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/06/2026	Bankhead, Dietrich	$500.00
	Contributor address; City; State; Zip Code: Houston, TX 77007	
Principal occupation / Job title (See Instructions): Engineer	Employer (See Instructions): KHEOPS	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/29/2026	Bass Bailey, Carolyn	$25.00
	Contributor address; City; State; Zip Code: Houston, TX 77019	
Principal occupation / Job title (See Instructions):	Employer (See Instructions):	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/11/2026	Beck, Deborah	$100.00
	Contributor address; City; State; Zip Code: Sugar Land, TX 77478	
Principal occupation / Job title (See Instructions): Not Employed	Employer (See Instructions): Not Employed	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/11/2026	Beck, Deborah	$100.00
	Contributor address; City; State; Zip Code: Sugar Land, TX 77478	
Principal occupation / Job title (See Instructions): Not Employed	Employer (See Instructions): Not Employed	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 6/52 Rpt: 9/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
03/11/2026	Beck, Deborah **6** Contributor address; City; State; Zip Code Sugar Land, TX 77478	$100.00

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Not Employed	Not Employed

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/11/2026	Beck, Deborah Contributor address; City; State; Zip Code Sugar Land, TX 77478	$100.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/11/2026	Beck, Deborah Contributor address; City; State; Zip Code Sugar Land, TX 77478	$100.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/11/2026	Beck, Deborah Contributor address; City; State; Zip Code Sugar Land, TX 77478	$100.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/06/2026	Benton, Levi Contributor address; City; State; Zip Code Houston, TX 77002	$1,000.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	Levi Benton & Associates PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 7/52 Rpt: 10/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
06/30/2026	Boesel, Minnette	$250.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77019	
8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/28/2026	Bolden, Brian	$25.00
	Contributor address; City; State; Zip Code: Liberty Hill, TX 78642	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/26/2026	Bracewell PAC	$5,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77002	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/30/2026	Brazier, Dean	$250.00
	Contributor address; City; State; Zip Code: Waxhaw, NC 28173	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/24/2026	Brock, Sharon	$250.00
	Contributor address; City; State; Zip Code: Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions): Not Employed	Employer (See Instructions): Not Employed	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 8/52 Rpt: 11/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
06/12/2026	Brock, Sharon	$250.00
	6 Contributor address; City; State; Zip Code: Sugar Land, TX 77498	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Not Employed	Not Employed

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/25/2026	Brooks, Richard	$250.00
	Contributor address; City; State; Zip Code: Houston, TX 77004	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/26/2026	Brotzen, Franz	$500.00
	Contributor address; City; State; Zip Code: Houston, TX 77005	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Rice University	Professor

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/09/2026	Burns, Bebe	$250.00
	Contributor address; City; State; Zip Code: Houston, TX 77006	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/10/2026	Byrd, Kahlil	$500.00
	Contributor address; City; State; Zip Code: New York, NY 10005	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Advisor	Invest America

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 9/52 Rpt: 12/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
06/25/2026	Byrd, Kahlil	$500.00
	6 Contributor address; City; State; Zip Code: Brooklyn, NY 11201	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Advisor	Invest America

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/30/2026	Cai, Ming Feng	$1,000.00
	Contributor address; City; State; Zip Code: Mont Belvieu, TX 77523	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Owner	Airi Ramen

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/06/2026	Cain, Greg	$15.00
	Contributor address; City; State; Zip Code: Houston, TX 77018	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/06/2026	Cain, Greg	$15.00
	Contributor address; City; State; Zip Code: Houston, TX 77018	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/06/2026	Cain, Greg	$15.00
	Contributor address; City; State; Zip Code: Houston, TX 77018	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 10/52 Rpt: 13/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
04/06/2026	Cain, Greg	$15.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77018	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/06/2026	Cain, Greg	$15.00
	Contributor address; City; State; Zip Code: Houston, TX 77018	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/06/2026	Cain, Greg	$15.00
	Contributor address; City; State; Zip Code: Houston, TX 77018	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/30/2026	Calderon, Eric	$500.00
	Contributor address; City; State; Zip Code: Houston, TX 77339	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Engineer	Raptor

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/18/2026	Caldwell, Katherine	$500.00
	Contributor address; City; State; Zip Code: Houston, TX 77002	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 11/52 Rpt: 14/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____) / **6** Contributor address; City; State; Zip Code	**7** Amount of Contribution ($)
03/26/2026	Calvert, Rogene Houston, TX 77025	$200.00

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
03/25/2026	Canady, Stacy Pearland, TX 77584	$250.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
06/30/2026	Cardenas, Ricky Houston, TX 77003	$30.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
06/12/2026	Carter, Marc Houston, TX 77007	$500.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	Harris County

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
03/17/2026	Chevalier, Felix Houston, TX 77021	$1,000.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	Cornerstone Government Affairs

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 12/52 Rpt: 15/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
03/24/2026	Clark, Barbara	$500.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77005	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Retired	Retired

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/06/2026	Clark, Janet	$1,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77005	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/23/2026	Clark, Michael	$3,500.00
	Contributor address; City; State; Zip Code: Houston, TX 77005	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Executive	Interflote-USA LLC

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/28/2026	Clarkson, Llayron	$5,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77054	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Engineer	Clarkson Aerospace Corp

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/22/2026	Cole, GeJuan	$1,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77018	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Director	Port Houston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 13/52 Rpt: 16/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:)	**7** Amount of Contribution ($)
01/28/2026	Collins, Peggy	$20.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77054	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
03/16/2026	Connor, John	$500.00
	Contributor address; City; State; Zip Code: Houston, TX 77030	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Engineer	GSI Environmental Inc.

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
04/15/2026	Cook, Francis	$500.00
	Contributor address; City; State; Zip Code: Houston, TX 77021	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Owner	Cook Worldwide

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
03/18/2026	Cormier, Rufus	$250.00
	Contributor address; City; State; Zip Code: Houston, TX 77002	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
06/15/2026	Cormier, Rufus	$250.00
	Contributor address; City; State; Zip Code: Houston, TX 77002	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 14/52 Rpt: 17/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
04/30/2026	Council, Tony	$1,000.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77042	
8 Principal occupation / Job title (See Instructions): President	**9** Employer (See Instructions): TLC Engineering, Inc.	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/27/2026	Cox, Michael	$250.00
	Contributor address; City; State; Zip Code: Houston, TX 77004	
Principal occupation / Job title (See Instructions):	Employer (See Instructions):	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/12/2026	DeHart, Dalton	$30.00
	Contributor address; City; State; Zip Code: Houston, TX 77006	
Principal occupation / Job title (See Instructions):	Employer (See Instructions):	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/30/2026	DeVaughn, Reginald	$2,500.00
	Contributor address; City; State; Zip Code: Pearland, TX 77584	
Principal occupation / Job title (See Instructions): Clergy	Employer (See Instructions): Silverlake Church	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/22/2026	Deily, Linnet	$500.00
	Contributor address; City; State; Zip Code: Houston, TX 77056	
Principal occupation / Job title (See Instructions): Not Employed	Employer (See Instructions): Not Employed	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 15/52 Rpt: 18/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:)	**7** Amount of Contribution ($)
03/10/2026	Dodd, Deborah	$10.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77007	
8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)	

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
06/29/2026	Dodson, Carole	$250.00
	Contributor address; City; State; Zip Code: Houston, TX 77019	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
06/15/2026	Donnelly, Frank	$2,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77056	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
President	Kensinger Donnelly	

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
04/30/2026	Doss, Corbin	$250.00
	Contributor address; City; State; Zip Code: Chicago, IL 60612	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Engineer	Infrastructure Engineering Inc.	

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
06/30/2026	Doss, Corbin	$250.00
	Contributor address; City; State; Zip Code: Chicago, IL 60612	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Engineer	Infrastructure Engineering Inc.	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 16/52 Rpt: 19/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
01/02/2026	Fein, Martin	$250.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77056	
8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/28/2026	Feng, Jianwei	$2,500.00
	Contributor address; City; State; Zip Code: Bellaire, TX 77401	
Principal occupation / Job title (See Instructions): Physician	Employer (See Instructions): Dr. Jianwei Feng Medical Group	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/30/2026	Fontenot, Cecilia	$25.00
	Contributor address; City; State; Zip Code: Houston, TX 77033	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/10/2026	Fowler, Cynthia	$1,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77006	
Principal occupation / Job title (See Instructions): Not Employed	Employer (See Instructions): Not Employed	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/10/2026	Friedman, Barbara	$250.00
	Contributor address; City; State; Zip Code: Houston, TX 77002	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 17/52 Rpt: 20/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
03/26/2026	Furse, Anne	$500.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77005	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Philanthropist	Self-Employed

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/26/2026	Garza, Dax	$5,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77002	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	Dax F. Garza, PC

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/26/2026	Garza, Maggie	$5,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77002	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Real Estate Agent	Compass Real Estate

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/12/2026	George, Karen	$100.00
	Contributor address; City; State; Zip Code: Houston, TX 77005	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/30/2026	George, Karen	$50.00
	Contributor address; City; State; Zip Code: Houston, TX 77005	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 18/52 Rpt: 21/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
03/13/2026	Gerstenhaber, Suzanne	$250.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77056	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/30/2026	Girardeau III, Emerson	$250.00
	Contributor address; City; State; Zip Code: Houston, TX 77007	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/13/2026	Gite, Lloyd	$250.00
	Contributor address; City; State; Zip Code: Houston, TX 77004	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/29/2026	Golightly, Niel	$250.00
	Contributor address; City; State; Zip Code: Houston, TX 77005	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/29/2026	Goodman, Barry	$1,000.00
	Contributor address; City; State; Zip Code: Austin, TX 78732	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
President	The Goodman Corporation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 19/52 Rpt: 22/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:)	**7** Amount of Contribution ($)
03/23/2026	Gore, Lauren	$100.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77008	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
04/30/2026	Green, Demetris	$500.00
	Contributor address; City; State; Zip Code: Houston, TX 77054	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Physician	Demetris Green Sr., MD

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
01/29/2026	Green, Ronald	$1,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77021	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	Ronald Green & Associates PLLC

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
06/04/2026	Greenberg Traurig, P.A. PAC (X out-of-state PAC, ID#: C00266585)	$2,500.00
	Contributor address; City; State; Zip Code: Albany, NY 12207	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
06/29/2026	Gregg, Kerry	$1,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77003	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Marketing	LAN Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 20/52 Rpt: 23/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:) / **6** Contributor address; City; State; Zip Code	**7** Amount of Contribution ($)	**8** Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
06/30/2026	HOME-PAC Houston, TX 77064	$250.00		
01/02/2026	Hadnot-Varela, Queen Houston, TX 77084	$25.00		
03/23/2026	Hagemann, Christianne Houston, TX 77006	$250.00		
05/14/2026	Hall III, Benjamin Houston, TX 77024	$1,000.00	Lawyer	Hall Law Group PLLC
03/26/2026	Hamilton, Frances Ann Houston, TX 77004	$250.00		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 21/52 Rpt: 24/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / **6** Contributor address; City; State; Zip Code	**7** Amount of Contribution ($)
01/19/2026	Hanks, Liz Houston, TX 77008	$150.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/19/2026	Hanks, Liz Houston, TX 77008	$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of Contribution ($)
03/19/2026	Hanks, Liz Houston, TX 77008	$25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of Contribution ($)
04/19/2026	Hanks, Liz Houston, TX 77008	$25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of Contribution ($)
05/19/2026	Hanks, Liz Houston, TX 77008	$25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 22/52 Rpt: 25/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
06/19/2026	Hanks, Liz	$25.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77008	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/25/2026	Harris, Michael	$1,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77046	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	The Harris Law Firm

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/10/2026	Harrison, Toni	$250.00
	Contributor address; City; State; Zip Code: Houston, TX 77002	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/30/2026	Harvest & Hold LLC	$1,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77079	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/26/2026	Haymon, Cordell	$5,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77004	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 23/52 Rpt: 26/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
06/30/2026	Hicks, Sammy	$500.00
	6 Contributor address; City; State; Zip Code: Travelers Rest, SC 29690	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Construction	Harbor Services

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/25/2026	Hill, Nikki	$150.00
	Contributor address; City; State; Zip Code: Houston, TX 77046	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/28/2026	Hollins, Christine	$200.00
	Contributor address; City; State; Zip Code: Rosharon, TX 77583	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	Retired

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/28/2026	Hollins, Christine	$200.00
	Contributor address; City; State; Zip Code: Rosharon, TX 77583	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	Retired

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/28/2026	Hollins, Christine	$200.00
	Contributor address; City; State; Zip Code: Rosharon, TX 77583	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 24/52 Rpt: 27/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
04/28/2026	Hollins, Christine	$200.00
	6 Contributor address; City; State; Zip Code: Rosharon, TX 77583	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Retired	Retired

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/28/2026	Hollins, Christine	$200.00
	Contributor address; City; State; Zip Code: Rosharon, TX 77583	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	Retired

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/28/2026	Hollins, Christine	$200.00
	Contributor address; City; State; Zip Code: Rosharon, TX 77583	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	Retired

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/30/2026	Houck, Marcia	$15.00
	Contributor address; City; State; Zip Code: Houston, TX 77062	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/26/2026	Houston Police Officers' Union PAC	$2,500.00
	Contributor address; City; State; Zip Code: Houston, TX 77007	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 25/52 Rpt: 28/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor	**7** Amount of Contribution ($)
06/29/2026	[X] out-of-state PAC (ID#: C00027342) IBEW PAC Voluntary Fund	$1,000.00
	6 Contributor address; City; State; Zip Code: Washington, DC 20001	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)

Date	Full name of contributor	Amount of Contribution ($)
06/30/2026	[ ] out-of-state PAC (ID#:) Johnson, Albert	$1,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77039	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
President	Superior Shot Peening

Date	Full name of contributor	Amount of Contribution ($)
06/17/2026	[ ] out-of-state PAC (ID#:) Johnson, Harry	$500.00
	Contributor address; City; State; Zip Code: Houston, TX 77042	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	Law Office Of Harry Johnson

Date	Full name of contributor	Amount of Contribution ($)
04/30/2026	[ ] out-of-state PAC (ID#:) Jones, Previn	$250.00
	Contributor address; City; State; Zip Code: Humble, TX 77396	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor	Amount of Contribution ($)
03/10/2026	[ ] out-of-state PAC (ID#:) Jordan, Justin	$500.00
	Contributor address; City; State; Zip Code: Houston, TX 77089	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Self Employed	Slab House BBQ HTX

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 26/52 Rpt: 29/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
03/19/2026	Joseph, George	$2,500.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77019	
8 Principal occupation / Job title (See Instructions): CEO	**9** Employer (See Instructions): Positive Recovery Centers	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/28/2026	Kaplan, Lee	$1,100.00
	Contributor address; City; State; Zip Code: Houston, TX 77019	
Principal occupation / Job title (See Instructions): Attorney	Employer (See Instructions): Murphy Bell Stratton LLP	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/05/2026	Kaplan, Lee	$1,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77019	
Principal occupation / Job title (See Instructions): Attorney	Employer (See Instructions): Murphy Ball Stratton LLP	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/12/2026	Kennedy, Ann	$5,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77098	
Principal occupation / Job title (See Instructions): Retired	Employer (See Instructions): Retired	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/27/2026	Kenner, Sylvia	$200.00
	Contributor address; City; State; Zip Code: Indianapolis, IN 46278	
Principal occupation / Job title (See Instructions): Not Employed	Employer (See Instructions): Not Employed	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 27/52 Rpt: 30/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
02/27/2026	Kenner, Sylvia **6** Contributor address; City; State; Zip Code Indianapolis, IN 46278	$200.00

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Not Employed	Not Employed

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/27/2026	Kenner, Sylvia Contributor address; City; State; Zip Code Indianapolis, IN 46278	$200.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/03/2026	Kenner, Sylvia Contributor address; City; State; Zip Code Indianapolis, IN 46278	$200.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/27/2026	Kenner, Sylvia Contributor address; City; State; Zip Code Indianapolis, IN 46278	$200.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/27/2026	Kenner, Sylvia Contributor address; City; State; Zip Code Indianapolis, IN 46278	$200.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 28/52 Rpt: 31/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
06/30/2026	Kinh Chau, Vi	$2,500.00
	6 Contributor address; City; State; Zip Code: Richmond, TX 77469	
8 Principal occupation / Job title (See Instructions): Agent	**9** Employer (See Instructions): Prosperity Group Investments Of Houston, Inc.	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/06/2026	Krist, Kim	$250.00
	Contributor address; City; State; Zip Code: Houston, TX 77062	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/26/2026	Krudy, Evalyn	$250.00
	Contributor address; City; State; Zip Code: Houston, TX 77254	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/15/2026	Lawal, Kase	$5,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77056	
Principal occupation / Job title (See Instructions): CEO	Employer (See Instructions): CAMAC International Corporation	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/14/2026	Lee, Alice	$25.00
	Contributor address; City; State; Zip Code: Houston, TX 77096	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 29/52 Rpt: 32/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
03/14/2026	Lee, Alice	$25.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77096	
8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)	

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/14/2026	Lee, Alice	$25.00
	Contributor address; City; State; Zip Code: Houston, TX 77096	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/14/2026	Lee, Alice	$25.00
	Contributor address; City; State; Zip Code: Houston, TX 77096	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/14/2026	Lee, Alice	$25.00
	Contributor address; City; State; Zip Code: Houston, TX 77096	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/28/2026	Lee, Jody	$2,500.00
	Contributor address; City; State; Zip Code: Houston, TX 77005	
Principal occupation / Job title (See Instructions): Physician	Employer (See Instructions): Radiology Partners Inc.	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 30/52 Rpt: 33/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
04/01/2026	Logans, Andrea Renee	$2,000.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77056	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
CEO	Access Data Supply, Inc.

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/22/2026	Lowe, Rick	$2,500.00
	Contributor address; City; State; Zip Code: Houston, TX 77004	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Artist	Rick Lowe Art

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/30/2026	Ma, Wei	$2,500.00
	Contributor address; City; State; Zip Code: Houston, TX 77024	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Reservoir Engineer	SLB Energy

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/25/2026	Malveaux, Mark	$1,000.00
	Contributor address; City; State; Zip Code: Dallas, TX 75225	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	McCall Parkhurst

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/10/2026	Martin, Mary	$25.00
	Contributor address; City; State; Zip Code: Houston, TX 77057	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 31/52 Rpt: 34/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:)	**7** Amount of Contribution ($)
06/25/2026	Martin, Mary	$25.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77057	
8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)	

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
03/23/2026	McCord, Gillian	$200.00
	Contributor address; City; State; Zip Code: Houston, TX 77019	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
03/26/2026	McCreary, Jacki	$250.00
	Contributor address; City; State; Zip Code: Houston, TX 77005	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
03/18/2026	McDaniel, Bertrina	$50.00
	Contributor address; City; State; Zip Code: Houston, TX 77033	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
01/30/2026	McDonald, William	$25.00
	Contributor address; City; State; Zip Code: Houston, TX 77004	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 32/52 Rpt: 35/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:_____) / **6** Contributor address; City; State; Zip Code	**7** Amount of Contribution ($)
02/28/2026	McDonald, William Houston, TX 77004	$25.00
8 Principal occupation / Job title (See Instructions)		**9** Employer (See Instructions)
Date	Full name of contributor / out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
03/30/2026	McDonald, William Houston, TX 77004	$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor / out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
04/30/2026	McDonald, William Houston, TX 77004	$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor / out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
05/30/2026	McDonald, William Houston, TX 77004	$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor / out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
06/30/2026	McDonald, William Houston, TX 77004	$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 33/52 Rpt: 36/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:) / **6** Contributor address; City; State; Zip Code	**7** Amount of Contribution ($)
03/25/2026	McIntosh, Donna Houston, TX 77008	$250.00
8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)	
03/06/2026	Mezlo, Jon Drums, PA 18222	$50.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
03/30/2026	Millas, Dimitri Houston, TX 77008	$1,500.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Attorney	Norton Rose Fulbright	
05/29/2026	Miller, William Austin, TX 78703	$5,000.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Lobbyist	HillCo Partners	
03/13/2026	Milner, Christy Austin, TX 78759	$250.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 34/52 Rpt: 37/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
06/29/2026	Mintz, Silvia	$1,000.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77011	
8 Principal occupation / Job title (See Instructions): Attorney	**9** Employer (See Instructions): Law Office of Silvia Mintz	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/12/2026	Moore, Daryl	$250.00
	Contributor address; City; State; Zip Code: Houston, TX 77098	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/30/2026	Moore, Savant	$100.00
	Contributor address; City; State; Zip Code: Houston, TX 77020	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/18/2026	Muhammad, Kevin	$1,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77004	
Principal occupation / Job title (See Instructions): Appraiser Manager	Employer (See Instructions): Office of the County Engineers	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/24/2026	Murdaugh, Jim	$100.00
	Contributor address; City; State; Zip Code: houston, TX 77057	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 35/52 Rpt: 38/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor	**7** Amount of Contribution ($)
03/26/2026	[X] out-of-state PAC (ID#: C00366559) NRG Energy Inc. PAC	$1,000.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77010	
8 Principal occupation / Job title (See Instructions)		**9** Employer (See Instructions)

Date	Full name of contributor	Amount of Contribution ($)
06/30/2026	[X] out-of-state PAC (ID#: C00366559) NRG Energy Inc. PAC	$1,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77010	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor	Amount of Contribution ($)
03/03/2026	[ ] out-of-state PAC (ID#:) Narcisse, Jude	$100.00
	Contributor address; City; State; Zip Code: Pearland, TX 77584	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor	Amount of Contribution ($)
03/22/2026	[ ] out-of-state PAC (ID#:) Nelson III, Joe	$100.00
	Contributor address; City; State; Zip Code: Houston, TX 77006	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor	Amount of Contribution ($)
06/30/2026	[ ] out-of-state PAC (ID#:) Nguyen, Julie	$40.00
	Contributor address; City; State; Zip Code: Ringgold, GA 30736	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 36/52 Rpt: 39/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
03/26/2026	Norton Rose Fulbright US LLP Texas Committee	$2,500.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77010	
8 Principal occupation / Job title (See Instructions)		**9** Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/24/2026	Olive, Kenneth	$250.00
	Contributor address; City; State; Zip Code: Houston, TX 77096	
Principal occupation / Job title (See Instructions): Senior Advisor		Employer (See Instructions): Harris County

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/12/2026	Olive, Kenneth	$250.00
	Contributor address; City; State; Zip Code: Houston, TX 77096	
Principal occupation / Job title (See Instructions): Senior Advisor		Employer (See Instructions): Harris County

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/29/2026	Olive, Kenneth	$200.00
	Contributor address; City; State; Zip Code: Houston, TX 77096	
Principal occupation / Job title (See Instructions): Senior Advisor		Employer (See Instructions): Harris County

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/01/2026	Peavy, Judge John	$2,500.00
	Contributor address; City; State; Zip Code: Houston, TX 77288	
Principal occupation / Job title (See Instructions): Retired		Employer (See Instructions): Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 37/52 Rpt: 40/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:)	**7** Amount of Contribution ($)
03/26/2026	Pharmacy Courier Service LLC	$100.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77478	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
04/08/2026	Pharmacy Courier Service LLC	$100.00
	Contributor address; City; State; Zip Code: Houston, TX 77478	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
06/15/2026	Phillips, James	$1,000.00
	Contributor address; City; State; Zip Code: Katy, TX 77494	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	BakerHostetler

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
03/10/2026	Phillips, James	$250.00
	Contributor address; City; State; Zip Code: Katy, TX 77494	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	BakerHostetler

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
04/30/2026	Pierre, James	$150.00
	Contributor address; City; State; Zip Code: Houston, TX 77002	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 38/52 Rpt: 41/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:_____) / **6** Contributor address; City; State; Zip Code	**7** Amount of Contribution ($)	**8** Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
01/03/2026	Plumboy, Pearl Missouri City, TX 77489	$50.00		
02/03/2026	Plumboy, Pearl Missouri City, TX 77489	$50.00		
03/03/2026	Plumboy, Pearl Missouri City, TX 77489	$50.00		
04/03/2026	Plumboy, Pearl Missouri City, TX 77489	$50.00		
05/03/2026	Plumboy, Pearl Missouri City, TX 77489	$50.00		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 39/52 Rpt: 42/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
06/03/2026	Plumboy, Pearl	$50.00
	6 Contributor address; City; State; Zip Code: Missouri City, TX 77489	
8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/30/2026	Porter, Alison	$250.00
	Contributor address; City; State; Zip Code: Houston, TX 77098	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/30/2026	Porter, Cathy	$5.00
	Contributor address; City; State; Zip Code: Katy, TX 77450	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/30/2026	Price, Bryant	$250.00
	Contributor address; City; State; Zip Code: Houston, TX 77006	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/02/2026	Rasheed, Kamal	$500.00
	Contributor address; City; State; Zip Code: Houston, TX 77047	
Principal occupation / Job title (See Instructions): CEO	Employer (See Instructions): Rashieyeid	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 40/52 Rpt: 43/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:)	**7** Amount of Contribution ($)
06/30/2026	Reed, Robin **6** Contributor address; City; State; Zip Code: Houston, TX 77027	$100.00

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
03/26/2026	Reichert, Christopher Contributor address; City; State; Zip Code: Bellaire, TX 77401	$250.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
03/09/2026	Rhodes, George Contributor address; City; State; Zip Code: Bellaire, TX 77401	$250.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
06/30/2026	Roberts, Jean Contributor address; City; State; Zip Code: Houston, TX 77048	$50.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
01/10/2026	Roberts, Jean Contributor address; City; State; Zip Code: Houston, TX 77048	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 41/52 Rpt: 44/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
02/10/2026	Roberts, Jean **6** Contributor address; City; State; Zip Code Houston, TX 77048	$20.00
8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)	
Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/10/2026	Roberts, Jean Contributor address; City; State; Zip Code Houston, TX 77048	$20.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/10/2026	Roberts, Jean Contributor address; City; State; Zip Code Houston, TX 77048	$20.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/10/2026	Roberts, Jean Contributor address; City; State; Zip Code Houston, TX 77048	$20.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/10/2026	Roberts, Jean Contributor address; City; State; Zip Code Houston, TX 77048	$20.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 42/52 Rpt: 45/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
05/12/2026	Robinson, Spurgeon	$500.00
	6 Contributor address; City; State; Zip Code: Pearland, TX 77584	
8 Principal occupation / Job title (See Instructions): Consultant	**9** Employer (See Instructions): MPACT Strategic Consulting LLC	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/28/2026	Roy, Devin	$250.00
	Contributor address; City; State; Zip Code: Manvel, TX 77578	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/29/2026	Rucker, Willetta	$150.00
	Contributor address; City; State; Zip Code: Houston, TX 77021	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/25/2026	Sadler, Kelley	$500.00
	Contributor address; City; State; Zip Code: Houston, TX 77003	
Principal occupation / Job title (See Instructions): Instructor	Employer (See Instructions): Sam Houston State University	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/30/2026	Sadler, Kelley	$100.00
	Contributor address; City; State; Zip Code: Houston, TX 77003	
Principal occupation / Job title (See Instructions): Instructor	Employer (See Instructions): Sam Houston State University	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 43/52 Rpt: 46/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:)	**7** Amount of Contribution ($)
06/04/2026	Sam, Deandre	$1,250.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77021	
8 Principal occupation / Job title (See Instructions): Owner	**9** Employer (See Instructions): A-Rocket Moving & Storage	
Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
06/23/2026	Samuels, Benjamin	$5,000.00
	Contributor address; City; State; Zip Code: Bellaire, TX 77401	
Principal occupation / Job title (See Instructions): Not Employed	Employer (See Instructions): Not Employed	
Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
03/10/2026	Schneider, Richard	$250.00
	Contributor address; City; State; Zip Code: Wilmington, DE 19810	
Principal occupation / Job title (See Instructions):	Employer (See Instructions):	
Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
06/29/2026	Scurry, Floyd	$500.00
	Contributor address; City; State; Zip Code: Cypress, TX 77433	
Principal occupation / Job title (See Instructions): Executive Vice President	Employer (See Instructions): Cobb, Fendley & Associates, Inc.	
Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
03/13/2026	Selman, Cathryn	$500.00
	Contributor address; City; State; Zip Code: Houston, TX 77019	
Principal occupation / Job title (See Instructions): Not Employed	Employer (See Instructions): Not Employed	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 44/52 Rpt: 47/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
03/24/2026	Selman, Cathryn	$500.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77019	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Not Employed	Not Employed

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/27/2026	Simmons, Bertrand	$250.00
	Contributor address; City; State; Zip Code: Pearland, TX 77584	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Insurance Agent	State Farm Insurance

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/27/2026	Simmons, Bertrand	$100.00
	Contributor address; City; State; Zip Code: Pearland, TX 77584	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Insurance Agent	State Farm Insurance

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/27/2026	Simmons, Bertrand	$100.00
	Contributor address; City; State; Zip Code: Pearland, TX 77584	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Insurance Agent	State Farm Insurance

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/27/2026	Simmons, Bertrand	$100.00
	Contributor address; City; State; Zip Code: Pearland, TX 77584	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Insurance Agent	State Farm Insurance

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 45/52 Rpt: 48/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
06/22/2026	Simpson-White, Elcenia	$250.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77031	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
05/02/2026	Smith, Brian	$2,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77021	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Construction	BSCI-Inc.

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/25/2026	Smith, Josephine	$500.00
	Contributor address; City; State; Zip Code: Houston, TX 77019	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/30/2026	Soheili, Aydin	$200.00
	Contributor address; City; State; Zip Code: Houston, TX 77027	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/12/2026	Sorola-Pohlman, Lenora	$100.00
	Contributor address; City; State; Zip Code: Houston, TX 77008	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 46/52 Rpt: 49/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
04/30/2026	Sowells, Jerry	$2,000.00
	6 Contributor address; City; State; Zip Code: Cypress, TX 77433	
8 Principal occupation / Job title (See Instructions): Engineer	**9** Employer (See Instructions): Sowells Consulting Engineers	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/29/2026	Sun, Chuanwen	$2,000.00
	Contributor address; City; State; Zip Code: Katy, TX 77494	
Principal occupation / Job title (See Instructions): Director	Employer (See Instructions): Southwestern National Bank	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/30/2026	Sun, Chuanwen	$2,000.00
	Contributor address; City; State; Zip Code: Katy, TX 77494	
Principal occupation / Job title (See Instructions): Director	Employer (See Instructions): Southwestern National Bank	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/30/2026	Susman, Harry	$2,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77024	
Principal occupation / Job title (See Instructions): Attorney	Employer (See Instructions): Susman Godfrey	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/18/2026	Sutton, Kia	$2,000.00
	Contributor address; City; State; Zip Code: Evanston, IL 60201	
Principal occupation / Job title (See Instructions): VP of Business Development	Employer (See Instructions): Infrastructure Engineering Inc.	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 47/52 Rpt: 50/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
06/30/2026	TREPAC-Texas REALTORS PAC	$10,000.00
	6 Contributor address; City; State; Zip Code: Austin, TX 78768	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/25/2026	Tait, Eric	$2,500.00
	Contributor address; City; State; Zip Code: Houston, TX 77005	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/06/2026	Taylor, Walker	$1,000.00
	Contributor address; City; State; Zip Code: Houston, TX 77006	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	Chevron U.S.A. Inc.

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/17/2026	Tezeno, Diane	$50.00
	Contributor address; City; State; Zip Code: Missouri City, TX 77489	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/07/2026	Thompson, Michele	$250.00
	Contributor address; City; State; Zip Code: Houston, TX 77005	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 48/52 Rpt: 51/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
06/30/2026	Totemeier, Aaron	$500.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77008	
8 Principal occupation / Job title (See Instructions): Principal Technical Leader	**9** Employer (See Instructions): EPRI	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/30/2026	Troutman Pepper Locke LLP	$500.00
	Contributor address; City; State; Zip Code: Atlanta, GA 30308	
Principal occupation / Job title (See Instructions):	Employer (See Instructions):	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/10/2026	Veselka, Larry	$2,500.00
	Contributor address; City; State; Zip Code: Houston, TX 77005	
Principal occupation / Job title (See Instructions): Lawyer	Employer (See Instructions): Steptoe LLP	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/25/2026	Veselka, Larry	$2,500.00
	Contributor address; City; State; Zip Code: Houston, TX 77005	
Principal occupation / Job title (See Instructions): Lawyer	Employer (See Instructions): Steptoe LLP	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/30/2026	Vines, Angela	$100.00
	Contributor address; City; State; Zip Code: Houston, TX 77047	
Principal occupation / Job title (See Instructions):	Employer (See Instructions):	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 49/52 Rpt: 52/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:)	**7** Amount of Contribution ($)
06/30/2026	Vinson, Alia	$250.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77019	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
04/30/2026	Vital, Carlos	$2,000.00
	Contributor address; City; State; Zip Code: Friendswood, TX 77546	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Physician	Vital Allergy & Asthma Center

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
02/18/2026	Waddell, Emanuel	$19.00
	Contributor address; City; State; Zip Code: High Point, NC 27265	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
06/29/2026	Wahren, Catalina	$50.00
	Contributor address; City; State; Zip Code: Houston, TX 77018	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
03/31/2026	Wald, Jerome	$10.00
	Contributor address; City; State; Zip Code: Houston, TX 77098	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 50/52 Rpt: 53/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:)	**7** Amount of Contribution ($)
03/06/2026	Walker, Geoffrey	$5,000.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77098	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
Retired	Retired

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
04/30/2026	Walker, William	$500.00
	Contributor address; City; State; Zip Code: Houston, TX 77047	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Engineer	TMEIC Corp Americas

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
03/09/2026	White, Andrea	$500.00
	Contributor address; City; State; Zip Code: Houston, TX 77024	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
04/30/2026	Wiggins, Quintin	$500.00
	Contributor address; City; State; Zip Code: Houston, TX 77071	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
CEO	EQQuickbooks.com

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
03/26/2026	Wigington, Norm	$100.00
	Contributor address; City; State; Zip Code: Houston, TX 77025	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 51/52 Rpt: 54/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:) / **6** Contributor address; City; State; Zip Code	**7** Amount of Contribution ($)	**8** Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
03/25/2026	Williams, Phillip Houston, TX 77027	$500.00	Surgeon	Baylor College of Medicine
05/06/2026	Wilson, Gerald Fresno, TX 77545	$350.00		
05/06/2026	Wilson, Gerald Fresno, TX 77545	$5.00		
06/29/2026	Wolchansky, Irene Houston, TX 77096	$10.00		
05/08/2026	Wong, Wilson Sugar Land, TX 77479	$1,000.00	Houston Area Manager	IEA Engineering

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 52/52 Rpt: 55/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
06/29/2026	Woo, Cynthia	$2,500.00
	6 Contributor address; City; State; Zip Code: Houston, TX 77005	
8 Principal occupation / Job title (See Instructions): Physician	**9** Employer (See Instructions): Radiology Partners Inc.	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
06/30/2026	Zhang, Xiaohu	$1,500.00
	Contributor address; City; State; Zip Code: Bellaire, TX 77401	
Principal occupation / Job title (See Instructions): Professor	Employer (See Instructions): MD Anderson	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/24/2026	Zilkha, Cornelia	$2,500.00
	Contributor address; City; State; Zip Code: Houston, TX 77019	
Principal occupation / Job title (See Instructions): Philanthropist	Employer (See Instructions): Zilkha Foundation	

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: Sch: 1/1 Rpt: 56/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS — **$**

5 Date: 03/26/2026

6 Full name of contributor: Walker, Geoffrey ☐ out-of-state PAC (ID#:_____)

7 Contributor address; City; State; Zip Code: Houston, TX 77098

8 Amount of contribution ($): $180.00

9 In-kind contribution description: Event refreshments

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions): Retired

11 Employer (FOR NON-JUDICIAL) (See instructions): Retired

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)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/15 Rpt: 57/93	Hollins, Chris	00080039

4 Date	5 Payee name
01/02/2026	ActBlue

6 Amount ($)	7 Payee address; City; State; Zip Code
$107.87	366 Summer St. Somerville, MA 02144

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Fees	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online donation fees

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

Date	Payee name
02/03/2026	ActBlue

Amount ($)	Payee address; City; State; Zip Code
$27.98	366 Summer St. Somerville, MA 02144

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Fees	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online donation fees

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

Date	Payee name
02/04/2026	ActBlue

Amount ($)	Payee address; City; State; Zip Code
$692.81	366 Summer St. Somerville, MA 02144

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Fees	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online donation fees

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/15 Rpt: 58/93	Hollins, Chris	00080039

4 Date	5 Payee name
03/03/2026	ActBlue

6 Amount ($)	7 Payee address; City; State; Zip Code
$1,041.70	366 Summer St. Somerville, MA 02144

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Fees	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online donation fees

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

Date	Payee name
04/01/2026	ActBlue

Amount ($)	Payee address; City; State; Zip Code
$190.82	366 Summer St. Somerville, MA 02144

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Fees	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online donation fees

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

Date	Payee name
05/02/2026	ActBlue

Amount ($)	Payee address; City; State; Zip Code
$260.65	366 Summer St. Somerville, MA 02144

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Fees	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online donation fees

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 3/15 Rpt: 59/93	Hollins, Chris	00080039

4 Date	5 Payee name
06/03/2026	ActBlue

6 Amount ($)	7 Payee address; City; State; Zip Code
$704.22	366 Summer St. Somerville, MA 02144

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Fees	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online donation fees

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

Date	Payee name
04/17/2026	Bitly, Inc.

Amount ($)	Payee address; City; State; Zip Code
$268.64	85 5th Ave. New York, NY 10003

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Office Overhead/Rental Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online link software

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

Date	Payee name
01/15/2026	Constant Contact

Amount ($)	Payee address; City; State; Zip Code
$91.68	890 Winter St., Suite 300 Waltham, MA 02451

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Office Overhead/Rental Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Email distribution software

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/15 Rpt: 60/93	Hollins, Chris	00080039

4 Date	5 Payee name
02/18/2026	Constant Contact

6 Amount ($)	7 Payee address; City; State; Zip Code
$91.68	890 Winter St., Suite 300 Waltham, MA 02451

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Office Overhead/Rental Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Email distribution software

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

Date	Payee name
03/16/2026	Constant Contact

Amount ($)	Payee address; City; State; Zip Code
$91.68	890 Winter St., Suite 300 Waltham, MA 02451

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Office Overhead/Rental Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Email distribution software

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

Date	Payee name
04/15/2026	Constant Contact

Amount ($)	Payee address; City; State; Zip Code
$91.68	890 Winter St., Suite 300 Waltham, MA 02451

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Office Overhead/Rental Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Email distribution software

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 5/15 Rpt: 61/93	Hollins, Chris	00080039

4 Date	5 Payee name
05/15/2026	Constant Contact

6 Amount ($)	7 Payee address; City; State; Zip Code
$91.68	890 Winter St., Suite 300 Waltham, MA 02451

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Office Overhead/Rental Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Email distribution software

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

Date	Payee name
06/15/2026	Constant Contact

Amount ($)	Payee address; City; State; Zip Code
$91.68	890 Winter St., Suite 300 Waltham, MA 02451

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Office Overhead/Rental Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Email distribution software

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

Date	Payee name
02/23/2026	Eaker, Ethan

Amount ($)	Payee address; City; State; Zip Code
$500.00	4848 Pin Oak Park, #527 Houston, TX 77081

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Salaries/Wages/Contract Labor	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign stipend

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 6/15 Rpt: 62/93	Hollins, Chris	00080039

4 Date	5 Payee name
03/24/2026	Eaker, Ethan

6 Amount ($)	7 Payee address; City; State; Zip Code
$250.00	4848 Pin Oak Park, #527 Houston, TX 77081

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Salaries/Wages/Contract Labor	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign stipend

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

Date	Payee name
06/07/2026	Eaker, Ethan

Amount ($)	Payee address; City; State; Zip Code
$750.00	4848 Pin Oak Park, #527 Houston, TX 77081

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Salaries/Wages/Contract Labor	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign stipend

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

Date	Payee name
01/02/2026	Google.com

Amount ($)	Payee address; City; State; Zip Code
$53.73	1600 Amphitheatre Parkway Mountain View, CA 94043

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Office Overhead/Rental Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Google workspace

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 7/15 Rpt: 63/93	Hollins, Chris	00080039

4 Date	5 Payee name
01/02/2026	Google.com

6 Amount ($)	7 Payee address; City; State; Zip Code
$13.83	1600 Amphitheatre Parkway Mountain View, CA 94043

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Office Overhead/Rental Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Google workspace

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

Date	Payee name
03/03/2026	Grant Martin Campaigns

Amount ($)	Payee address; City; State; Zip Code
$11,499.00	2383 Bush St. San Francisco, CA 94115

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Advertising Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Direct mail and fees

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

Date	Payee name
03/24/2026	Grant Martin Campaigns

Amount ($)	Payee address; City; State; Zip Code
$11,499.00	2383 Bush St. San Francisco, CA 94115

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Advertising Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Direct mail and fees

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 8/15 Rpt: 64/93	Hollins, Chris	00080039

4 Date	5 Payee name
02/17/2026	Harris County Democratic Convention PAC

6 Amount ($)	7 Payee address; City; State; Zip Code
$2,500.00	13114 Waldemere Dr. Houston, TX 77077

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Donation for County Convention

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

Date	Payee name
01/02/2026	Harris County Democratic Party

Amount ($)	Payee address; City; State; Zip Code
$31.67	4619 Lyons Ave. Houston, TX 77020

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Sustaining membership dues

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

Date	Payee name
04/14/2026	Houston Black American Democrats

Amount ($)	Payee address; City; State; Zip Code
$500.00	P.O. Box 88374 Houston, TX 77288

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Donation

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 9/15 Rpt: 65/93	Hollins, Chris	00080039

4 Date	5 Payee name
05/08/2026	Kwik Kopy

6 Amount ($)	7 Payee address; City; State; Zip Code
$37.89	1405 Waugh Dr. Houston, TX 77019

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Printing Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Printing event host board

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

Date	Payee name
05/08/2026	Kwik Kopy

Amount ($)	Payee address; City; State; Zip Code
$70.36	1405 Waugh Dr. Houston, TX 77019

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Printing Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Printing event host board

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

Date	Payee name
06/30/2026	Millas, Dimitri

Amount ($)	Payee address; City; State; Zip Code
$1,500.00	REDACTED PER 254.0401, ELEC. CODE Houston, TX 77008

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Loan Repayment/Reimbursement	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Refund contribution received during blackout period

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 10/15 Rpt: 66/93	Hollins, Chris	00080039

4 Date	5 Payee name
03/18/2026	NGP VAN

6 Amount ($)	7 Payee address; City; State; Zip Code
$5,876.34	655 15th St. NW Washington, DC 20005

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Office Overhead/Rental Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign database software

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

Date	Payee name
05/11/2026	NGP VAN

Amount ($)	Payee address; City; State; Zip Code
$3,917.56	655 15th St. NW Washington, DC 20005

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Office Overhead/Rental Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign database software

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

Date	Payee name
06/04/2026	NGP VAN

Amount ($)	Payee address; City; State; Zip Code
$1,958.78	655 15th St. NW Washington, DC 20005

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Office Overhead/Rental Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign database software

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 11/15 Rpt: 67/93	Hollins, Chris	00080039

4 Date	5 Payee name
06/30/2026	Norton Rose Fulbright US LLP Texas Comm.

6 Amount ($)	7 Payee address; City; State; Zip Code
$2,500.00	1550 Lamar Suite 2000 Houston, TX 77010

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Loan Repayment/Reimbursement	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Refund contribution received during blackout period

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

Date	Payee name
06/07/2026	Odus Evbagharu for Texas Campaign

Amount ($)	Payee address; City; State; Zip Code
$5,000.00	P.O. Box 840613 Houston, TX 77284

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Donation

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

Date	Payee name
05/28/2026	Soaring Phoenix

Amount ($)	Payee address; City; State; Zip Code
$400.00	5829 W. Sam Houston Parkway N., #904 Houston, TX 77041

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Dragon & Lion Dance event entertainment

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 12/15 Rpt: 68/93	Hollins, Chris	00080039

4 Date	5 Payee name
01/02/2026	Stripe

6 Amount ($)	7 Payee address; City; State; Zip Code
$162.09	354 Oyster Point Blvd. South San Francisco, CA 94080

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Fees	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online donation fees

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

Date	Payee name
02/03/2026	Stripe

Amount ($)	Payee address; City; State; Zip Code
$44.22	354 Oyster Point Blvd. South San Francisco, CA 94080

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Fees	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online donation fees

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

Date	Payee name
03/03/2026	Stripe

Amount ($)	Payee address; City; State; Zip Code
$1,315.19	354 Oyster Point Blvd. South San Francisco, CA 94080

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Fees	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online donation fees

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 13/15 Rpt: 69/93	Hollins, Chris	00080039

4 Date	5 Payee name
04/01/2026	Stripe

6 Amount ($)	7 Payee address; City; State; Zip Code
$285.59	354 Oyster Point Blvd. South San Francisco, CA 94080

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Fees	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online donation fees

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

Date	Payee name
05/02/2026	Stripe

Amount ($)	Payee address; City; State; Zip Code
$387.54	354 Oyster Point Blvd. South San Francisco, CA 94080

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Fees	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online donation fees

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

Date	Payee name
06/03/2026	Stripe

Amount ($)	Payee address; City; State; Zip Code
$1,033.03	354 Oyster Point Blvd. South San Francisco, CA 94080

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Fees	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online donation fees

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 14/15 Rpt: 70/93	Hollins, Chris	00080039

4 Date	5 Payee name
01/25/2026	Strong Strategies, LLC

6 Amount ($)	7 Payee address; City; State; Zip Code
$3,529.64	P.O. Box 56386 Houston, TX 77256

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Consulting Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Fundraising & compliance services

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

Date	Payee name
02/23/2026	Strong Strategies, LLC

Amount ($)	Payee address; City; State; Zip Code
$3,682.83	P.O. Box 56386 Houston, TX 77256

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Consulting Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Fundraising & compliance services

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

Date	Payee name
03/24/2026	Strong Strategies, LLC

Amount ($)	Payee address; City; State; Zip Code
$3,510.92	P.O. Box 56386 Houston, TX 77256

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Consulting Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Fundraising & compliance services

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 15/15 Rpt: 71/93	Hollins, Chris	00080039

4 Date	5 Payee name
05/09/2026	Strong Strategies, LLC

6 Amount ($)	7 Payee address; City; State; Zip Code
$11,809.97	P.O. Box 56386 Houston, TX 77256

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Consulting Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Fundraising & compliance services

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

Date	Payee name
06/30/2026	Strong Strategies, LLC

Amount ($)	Payee address; City; State; Zip Code
$3,532.76	P.O. Box 56386 Houston, TX 77256

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Consulting Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Fundraising & compliance services

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

Date	Payee name
06/30/2026	Walker, Geoffrey

Amount ($)	Payee address; City; State; Zip Code
$180.00	REDACTED PER 254.0401, ELEC. CODE Houston, TX 77098

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Loan Repayment/Reimbursement	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Refund contribution amount over limits

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

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	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
	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 F4: Sch: 1/19 Rpt: 72/93	**2** FILER NAME Hollins, Chris		**3** Filer ID (Ethics Commission Filers) 00080039
4 CREDIT CARD ISSUER	Name of financial institution Chase Bank	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**

6 PAYMENT	(a) Amount Charged $87.17	(b) Date of Charge 05/12/2026	(c) Date(s) Credit Card Issuer Paid 06/04/2026
7 PAYEE	(a) Payee name Family Dollar		(b) Payee address; City, State, Zip Code 10747 Homestead Rd Houston, TX 77016
8 PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Office supplies
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $14.81	(b) Date of Charge 02/26/2026	(c) Date(s) Credit Card Issuer Paid 03/04/2026
PAYEE	(a) Payee name Amazon		(b) Payee address; City, State, Zip Code 410 Terry Ave. North Seattle, WA 98109
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Table cloths for Womens History event
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $113.66	(b) Date of Charge 02/19/2026	(c) Date(s) Credit Card Issuer Paid 03/04/2026
PAYEE	(a) Payee name Chic-fil-A		(b) Payee address; City, State, Zip Code 500 Dallas St Houston, TX 77002
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food for Black History event
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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
	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 F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/19 Rpt: 73/93	Hollins, Chris	00080039

4 CREDIT CARD ISSUER	Name of financial institution	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD
	see previous	$

6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
	$227.32	02/19/2026	03/04/2026

7 PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code
	Chic-fil-A	711 Louisiana St Houston, TX 77002

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
[X] Political [ ] Non-Political	Food/Beverage Expense	Food for Black History event

(c) [ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense

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

PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
	$270.58	02/19/2026	03/04/2026

PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code
	Costco	3836 Richmond Ave Houston, TX 77027

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
[X] Political [ ] Non-Political	Event Expense	Supplies for Black History event

(c) [ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense

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

PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
	$167.63	05/06/2026	06/04/2026

PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code
	Costco	3836 Richmond Ave Houston, TX 77027

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
[X] Political [ ] Non-Political	Food/Beverage Expense	Food for AAPI event

(c) [ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense

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

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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
	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 F4: Sch: 3/19 Rpt: 74/93	**2** FILER NAME Hollins, Chris		**3** Filer ID (Ethics Commission Filers) 00080039
4 CREDIT CARD ISSUER	Name of financial institution see previous	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**

6 PAYMENT	(a) Amount Charged $25.96	(b) Date of Charge 05/06/2026	(c) Date(s) Credit Card Issuer Paid 06/04/2026
7 PAYEE	(a) Payee name Costco		(b) Payee address; City, State, Zip Code 21802 Townsen Blvd West Humble, TX 77338
8 PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Supplies for AAPI event
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $2,413.00	(b) Date of Charge 02/19/2026	(c) Date(s) Credit Card Issuer Paid 03/04/2026
PAYEE	(a) Payee name Gatlin's BBQ		(b) Payee address; City, State, Zip Code 3510 Ella Blvd Houston, TX 77018
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food for Black History event
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $23.82	(b) Date of Charge 05/06/2026	(c) Date(s) Credit Card Issuer Paid 06/04/2026
PAYEE	(a) Payee name Hobby Lobby		(b) Payee address; City, State, Zip Code 10516 Katy Fwy, Suite F Houston, TX 77043
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Frames for event
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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
	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 F4: Sch: 4/19 Rpt: 75/93	**2** FILER NAME Hollins, Chris	**3** Filer ID (Ethics Commission Filers) 00080039

4 CREDIT CARD ISSUER	Name of financial institution see previous	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**

6 PAYMENT	(a) Amount Charged $77.81	(b) Date of Charge 05/03/2026	(c) Date(s) Credit Card Issuer Paid 05/04/2026
7 PAYEE	(a) Payee name HomeGoods		(b) Payee address; City, State, Zip Code 5540 Weslayan St Houston, TX 77005
8 PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Supplies for AAPI event
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $53.50	(b) Date of Charge 01/13/2026	(c) Date(s) Credit Card Issuer Paid 02/04/2026
PAYEE	(a) Payee name Houston Club		(b) Payee address; City, State, Zip Code 910 Louisiana St 49th Floor Houston, TX 77002
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Donor meeting
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $39.63	(b) Date of Charge 02/03/2026	(c) Date(s) Credit Card Issuer Paid 02/04/2026
PAYEE	(a) Payee name Houston Club		(b) Payee address; City, State, Zip Code 910 Louisiana St 49th Floor Houston, TX 77002
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Donor meeting
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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
	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 F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 5/19 Rpt: 76/93	Hollins, Chris	00080039

4 CREDIT CARD ISSUER	Name of financial institution	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD
	see previous	$

6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
	$52.34	02/18/2026	03/04/2026

7 PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code
	Houston Club	910 Louisiana St 49th Floor Houston, TX 77002

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
[X] Political [ ] Non-Political	Food/Beverage Expense	Donor meeting

(c) [ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense

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

PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
	$72.71	02/25/2026	03/04/2026

PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code
	Houston Club	910 Louisiana St 49th Floor Houston, TX 77002

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
[X] Political [ ] Non-Political	Food/Beverage Expense	Donor meeting

(c) [ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense

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

PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
	$42.30	03/16/2026	04/04/2026

PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code
	Houston Club	910 Louisiana St 49th Floor Houston, TX 77002

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
[X] Political [ ] Non-Political	Food/Beverage Expense	Donor meeting

(c) [ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense

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

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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
	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 F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 6/19 Rpt: 77/93	Hollins, Chris	00080039

4 CREDIT CARD ISSUER	Name of financial institution	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD
	see previous	$

6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
	$51.78	03/26/2026	04/04/2026

7 PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code
	Houston Club	910 Louisiana St 49th Floor Houston, TX 77002

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
[X] Political [ ] Non-Political	Food/Beverage Expense	Donor meeting

(c) [ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense

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

PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
	$22.65	02/19/2026	03/04/2026

PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code
	Starbucks	910 Louisiana St Houston, TX 77002

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
[X] Political [ ] Non-Political	Food/Beverage Expense	Coffee for Black History event

(c) [ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense

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

PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
	$48.91	03/25/2026	04/04/2026

PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code
	Houston Club	910 Louisiana St 49th Floor Houston, TX 77002

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
[X] Political [ ] Non-Political	Food/Beverage Expense	Donor meeting

(c) [ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense

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

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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
	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 F4: Sch: 7/19 Rpt: 78/93	**2** FILER NAME Hollins, Chris	**3** Filer ID (Ethics Commission Filers) 00080039

4 CREDIT CARD ISSUER	Name of financial institution see previous	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**

6 PAYMENT	(a) Amount Charged $65.49	(b) Date of Charge 03/27/2026	(c) Date(s) Credit Card Issuer Paid 04/04/2026
7 PAYEE	(a) Payee name Houston Club		(b) Payee address; City, State, Zip Code 910 Louisiana St 49th Floor Houston, TX 77002
8 PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Donor meeting
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $47.63	(b) Date of Charge 04/01/2026	(c) Date(s) Credit Card Issuer Paid 04/04/2026
PAYEE	(a) Payee name Houston Club		(b) Payee address; City, State, Zip Code 910 Louisiana St 49th Floor Houston, TX 77002
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Donor meeting
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $34.98	(b) Date of Charge 04/02/2026	(c) Date(s) Credit Card Issuer Paid 04/04/2026
PAYEE	(a) Payee name Houston Club		(b) Payee address; City, State, Zip Code 910 Louisiana St 49th Floor Houston, TX 77002
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Donor meeting
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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
	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 F4: Sch: 8/19 Rpt: 79/93	**2** FILER NAME Hollins, Chris	**3** Filer ID (Ethics Commission Filers) 00080039

4 CREDIT CARD ISSUER	Name of financial institution see previous	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**

6 PAYMENT	(a) Amount Charged $32.38	(b) Date of Charge 04/08/2026	(c) Date(s) Credit Card Issuer Paid 05/04/2026
7 PAYEE	(a) Payee name Houston Club		(b) Payee address; City, State, Zip Code 910 Louisiana St 49th Floor Houston, TX 77002
8 PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Donor meeting
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $52.62	(b) Date of Charge 04/14/2026	(c) Date(s) Credit Card Issuer Paid 05/04/2026
PAYEE	(a) Payee name Houston Club		(b) Payee address; City, State, Zip Code 910 Louisiana St 49th Floor Houston, TX 77002
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Donor meeting
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $53.06	(b) Date of Charge 04/20/2026	(c) Date(s) Credit Card Issuer Paid 05/04/2026
PAYEE	(a) Payee name Houston Club		(b) Payee address; City, State, Zip Code 910 Louisiana St 49th Floor Houston, TX 77002
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Donor meeting
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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
	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 F4: Sch: 9/19 Rpt: 80/93	**2** FILER NAME Hollins, Chris		**3** Filer ID (Ethics Commission Filers) 00080039
4 CREDIT CARD ISSUER	Name of financial institution see previous	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**

6 PAYMENT	(a) Amount Charged $47.29	(b) Date of Charge 05/08/2026	(c) Date(s) Credit Card Issuer Paid 06/04/2026
7 PAYEE	(a) Payee name Houston Club		(b) Payee address; City, State, Zip Code 910 Louisiana St 49th Floor Houston, TX 77002
8 PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Donor meeting
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $1,925.00	(b) Date of Charge 05/05/2026	(c) Date(s) Credit Card Issuer Paid 06/04/2026
PAYEE	(a) Payee name Mai Colachi		(b) Payee address; City, State, Zip Code 15425 Southwest Fwy Sugar Land, TX 77478
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food for AAPI event
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $156.91	(b) Date of Charge 02/19/2026	(c) Date(s) Credit Card Issuer Paid 03/04/2026
PAYEE	(a) Payee name Marshall's		(b) Payee address; City, State, Zip Code 1540 West Gray St Houston, TX 77019
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Supplies for Black History event
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 10/19 Rpt: 81/93	Hollins, Chris		00080039
4 CREDIT CARD ISSUER	Name of financial institution: see previous	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**

6 PAYMENT	(a) Amount Charged: $474.60	(b) Date of Charge: 04/23/2026	(c) Date(s) Credit Card Issuer Paid: 05/04/2026
7 PAYEE	(a) Payee name: Pappadeaux		(b) Payee address; City, State, Zip Code: 1001 Avenida De las Americas Ste. E Houston, TX 77010
8 PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule): Food/Beverage Expense		(b) Description: Influencer Dinner
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged: $7.98	(b) Date of Charge: 01/12/2026	(c) Date(s) Credit Card Issuer Paid: 02/04/2026
PAYEE	(a) Payee name: Randalls		(b) Payee address; City, State, Zip Code: 2225 Louisiana St Houston, TX 77002
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule): Office Overhead/Rental Expense		(b) Description: Water for office
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged: $11.97	(b) Date of Charge: 01/16/2026	(c) Date(s) Credit Card Issuer Paid: 02/04/2026
PAYEE	(a) Payee name: Randalls		(b) Payee address; City, State, Zip Code: 2225 Louisiana St Houston, TX 77002
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule): Office Overhead/Rental Expense		(b) Description: Water for office
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 11/19 Rpt: 82/93	**2** FILER NAME Hollins, Chris		**3** Filer ID (Ethics Commission Filers) 00080039
4 CREDIT CARD ISSUER	Name of financial institution see previous	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**

6 PAYMENT	(a) Amount Charged $28.94	(b) Date of Charge 04/23/2026	(c) Date(s) Credit Card Issuer Paid 05/04/2026
7 PAYEE	(a) Payee name Randalls		(b) Payee address; City, State, Zip Code 2225 Louisiana St Houston, TX 77002
8 PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Office supplies
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $8.28	(b) Date of Charge 05/13/2026	(c) Date(s) Credit Card Issuer Paid 06/04/2026
PAYEE	(a) Payee name Randalls		(b) Payee address; City, State, Zip Code 2225 Louisiana St Houston, TX 77002
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Water for office
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $66.23	(b) Date of Charge 05/26/2026	(c) Date(s) Credit Card Issuer Paid 06/04/2026
PAYEE	(a) Payee name Randalls		(b) Payee address; City, State, Zip Code 2225 Louisiana St Houston, TX 77002
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Office supplies
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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
	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 F4: Sch: 12/19 Rpt: 83/93	**2** FILER NAME Hollins, Chris		**3** Filer ID (Ethics Commission Filers) 00080039
4 CREDIT CARD ISSUER	Name of financial institution see previous	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**

6 PAYMENT	(a) Amount Charged $14.97	(b) Date of Charge 06/04/2026	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Randalls		(b) Payee address; City, State, Zip Code 2225 Louisiana St Houston, TX 77002
8 PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Water for office
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $7.98	(b) Date of Charge 06/06/2026	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Randalls		(b) Payee address; City, State, Zip Code 2225 Louisiana St Houston, TX 77002
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Water for office
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $23.65	(b) Date of Charge 05/26/2026	(c) Date(s) Credit Card Issuer Paid 06/04/2026
PAYEE	(a) Payee name Starbucks		(b) Payee address; City, State, Zip Code 711 Louisiana Suite R-204 Houston, TX 77002
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Coffee for AAPI event
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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
	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 F4: Sch: 13/19 Rpt: 84/93	**2** FILER NAME Hollins, Chris	**3** Filer ID (Ethics Commission Filers) 00080039

4 CREDIT CARD ISSUER	Name of financial institution: see previous	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**

6 PAYMENT	(a) Amount Charged: $248.59	(b) Date of Charge: 03/28/2026	(c) Date(s) Credit Card Issuer Paid: 04/04/2026
7 PAYEE	(a) Payee name: Tacos A Go Go		(b) Payee address; City, State, Zip Code: 3704 Main St Houston, TX 77002
8 PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule): Food/Beverage Expense		(b) Description: Breakfast for Morehouse College Student Leadership
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged: $273.86	(b) Date of Charge: 05/08/2026	(c) Date(s) Credit Card Issuer Paid: 06/04/2026
PAYEE	(a) Payee name: Tacos A Go Go		(b) Payee address; City, State, Zip Code: 3704 Main St Houston, TX 77002
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule): Food/Beverage Expense		(b) Description: Food for Teacher Appreciation Week
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged: $64.93	(b) Date of Charge: 02/26/2026	(c) Date(s) Credit Card Issuer Paid: 03/04/2026
PAYEE	(a) Payee name: Whole Foods Market		(b) Payee address; City, State, Zip Code: 701 Waugh Dr Houston, TX 77019
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule): Event Expense		(b) Description: Flowers for Womens History event
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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
	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 F4: Sch: 14/19 Rpt: 85/93	**2** FILER NAME Hollins, Chris		**3** Filer ID (Ethics Commission Filers) 00080039
4 CREDIT CARD ISSUER	Name of financial institution see previous	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**

6 PAYMENT	(a) Amount Charged $34.99	(b) Date of Charge 05/06/2026	(c) Date(s) Credit Card Issuer Paid 06/04/2026
7 PAYEE	(a) Payee name HEB		(b) Payee address; City, State, Zip Code 16000 Woodland Hill Dr Humble, TX 77246
8 PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Supplies for AAPI event
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $43.30	(b) Date of Charge 05/07/2026	(c) Date(s) Credit Card Issuer Paid 06/04/2026
PAYEE	(a) Payee name Starbucks		(b) Payee address; City, State, Zip Code 910 Louisiana St Houston, TX 77002
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Coffee for AAPI event
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $552.80	(b) Date of Charge 06/09/2026	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Southwest Airlines		(b) Payee address; City, State, Zip Code 2702 Love Field Dr Dallas, TX 75235
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Round trip flight to and from Washington DC for work meetings
	(c) [X] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 15/19 Rpt: 86/93	**2** FILER NAME Hollins, Chris		**3** Filer ID (Ethics Commission Filers) 00080039
4 CREDIT CARD ISSUER	Name of financial institution see previous	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**

6 PAYMENT	(a) Amount Charged $17.06	(b) Date of Charge 06/10/2026	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Lyft		(b) Payee address; City, State, Zip Code 185 Berry St, Ste 400 San Francisco, CA 94107
8 PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Car service during work travel in Washington, DC
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $20.20	(b) Date of Charge 06/10/2026	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Lyft		(b) Payee address; City, State, Zip Code 185 Berry St, Ste 400 San Francisco, CA 94107
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Car service during work travel in Washington, DC
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $19.76	(b) Date of Charge 06/10/2026	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Lyft		(b) Payee address; City, State, Zip Code 185 Berry St, Ste 400 San Francisco, CA 94107
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Car service during work travel in Washington, DC
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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
	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 F4: Sch: 16/19 Rpt: 87/93	**2** FILER NAME Hollins, Chris		**3** Filer ID (Ethics Commission Filers) 00080039
4 CREDIT CARD ISSUER	Name of financial institution see previous	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**

6 PAYMENT	(a) Amount Charged $23.91	(b) Date of Charge 06/11/2026	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Lyft		(b) Payee address; City, State, Zip Code 185 Berry St, Ste 400 San Francisco, CA 94107
8 PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Car service during work travel in Washington, DC
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $442.47	(b) Date of Charge 06/09/2026	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Airbnb		(b) Payee address; City, State, Zip Code 888 Brannan St San Francisco, CA 94103
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Lodging during Washington DC travel
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $588.00	(b) Date of Charge 06/10/2026	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Intercontinental The Willard Hotel		(b) Payee address; City, State, Zip Code 1401 Pennsylvania Ave NW Washington, DC 20004
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Lodging during Washington DC travel
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 17/19 Rpt: 88/93	**2** FILER NAME Hollins, Chris		**3** Filer ID (Ethics Commission Filers) 00080039
4 CREDIT CARD ISSUER	Name of financial institution see previous	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**

6 PAYMENT	(a) Amount Charged $23.69	(b) Date of Charge 06/10/2026	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Lyft		(b) Payee address; City, State, Zip Code 185 Berry St, Ste 400 San Francisco, CA 94107
8 PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Car service during work travel in Washington, DC
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $12.30	(b) Date of Charge 06/10/2026	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Lyft		(b) Payee address; City, State, Zip Code 185 Berry St, Ste 400 San Francisco, CA 94107
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Car service during work travel in Washington, DC
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $9.88	(b) Date of Charge 06/10/2026	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Lyft		(b) Payee address; City, State, Zip Code 185 Berry St, Ste 400 San Francisco, CA 94107
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Car service during work travel in Washington, DC
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 18/19 Rpt: 89/93	**2** FILER NAME Hollins, Chris		**3** Filer ID (Ethics Commission Filers) 00080039
4 CREDIT CARD ISSUER	Name of financial institution see previous	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**

6 PAYMENT	(a) Amount Charged $18.95	(b) Date of Charge 06/10/2026	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Lyft		(b) Payee address; City, State, Zip Code 185 Berry St, Ste 400 San Francisco, CA 94107
8 PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Car service during work travel in Washington, DC
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $9.94	(b) Date of Charge 06/11/2026	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Lyft		(b) Payee address; City, State, Zip Code 185 Berry St, Ste 400 San Francisco, CA 94107
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Car service during work travel in Washington, DC
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name		(b) Payee address; City, State, Zip Code
PURPOSE OF EXPENDITURE [ ] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule)		(b) Description
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	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
	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 F4: Sch: 19/19 Rpt: 90/93	**2** FILER NAME Hollins, Chris		**3** Filer ID (Ethics Commission Filers) 00080039
4 CREDIT CARD ISSUER	Name of financial institution: American Express	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**
6 PAYMENT	(a) Amount Charged: $22.98	(b) Date of Charge: 06/10/2026	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name: Uber	(b) Payee address; City, State, Zip Code: 1515 3rd St San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule): Travel Out of District	(b) Description: Car service during work travel in Washington, DC	
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.	[ ] Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/2 Rpt: 91/93	Hollins, Chris	00080039

4 Date	5 Payee name
02/04/2026	Chase Cardmember Services

6 Amount ($)	7 Payee address; City; State; Zip Code
$113.08 [X] Reimbursement from political contributions intended	P.O. Box 6294 Carol Stream, IL 60197

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Credit Card Payment	[ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense Credit card payment

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

Date	Payee name
03/04/2026	Chase Cardmember Services

Amount ($)	Payee address; City; State; Zip Code
$3,408.91 [X] Reimbursement from political contributions intended	P.O. Box 6294 Carol Stream, IL 60197

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Credit Card Payment	[ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense Credit card payment

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

Date	Payee name
04/04/2026	Chase Cardmember Services

Amount ($)	Payee address; City; State; Zip Code
$539.68 [X] Reimbursement from political contributions intended	P.O. Box 6294 Carol Stream, IL 60197

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Credit Card Payment	[ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense Credit card payment

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

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/2 Rpt: 92/93	Hollins, Chris	00080039

4 Date	5 Payee name
05/04/2026	Chase Cardmember Services

6 Amount ($)	7 Payee address; City; State; Zip Code
$719.41 [X] Reimbursement from political contributions intended	P.O. Box 6294 Carol Stream, IL 60197

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Credit Card Payment	[ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense Credit card payment

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

Date	Payee name
06/04/2026	Chase Cardmember Services

Amount ($)	Payee address; City; State; Zip Code
$2,742.15 [X] Reimbursement from political contributions intended	P.O. Box 6294 Carol Stream, IL 60197

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Credit Card Payment	[ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense Credit card payment

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

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.

1 Total pages Schedule T: Sch: 1/1 Rpt: 93/93

2 FILER NAME: Hollins, Chris

3 Filer ID (Ethics Commission Filers): 00080039

4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee: Southwest Airlines

5 Contribution / Expenditure reported on:

- [ ] Schedule A2
- [ ] Schedule B
- [ ] Schedule B(J)
- [ ] Schedule C2
- [ ] Schedule D
- [ ] Schedule F1
- [ ] Schedule F2
- [X] Schedule F4
- [ ] Schedule G
- [ ] Schedule H
- [ ] Schedule COH-UC

6 Dates of Travel: 06/09/2026 – 06/09/2026

7 Name of person(s) traveling: Hollins, Chris

8 Departure city or name of departure location: Houston, TX

9 Destination city or name of destination location: Washington, DC

10 Means of transportation: Commercial Airplane

11 Purpose of travel (including name of conference, seminar, or other event): Travel to Washington DC

Name of Contributor / Corporation or Labor Organization / Pledgor /Payee: Southwest Airlines

Contribution / Expenditure reported on:

- [ ] Schedule A2
- [ ] Schedule B
- [ ] Schedule B(J)
- [ ] Schedule C2
- [ ] Schedule D
- [ ] Schedule F1
- [ ] Schedule F2
- [X] Schedule F4
- [ ] Schedule G
- [ ] Schedule H
- [ ] Schedule COH-UC

Dates of Travel: 06/11/2026 – 06/11/2026

Name of person(s) traveling: Hollins, Chris

Departure city or name of departure location: Washington, DC

Destination city or name of destination location: Houston, TX

Means of transportation: Commercial Airplane

Purpose of travel (including name of conference, seminar, or other event): Travel from Washington DC