# CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

**FORM COR-C/OH**

| | | | |
|---|---|---|---|
| **1** Filer ID (Ethics Commission Filers) 00080044 | **2** Total pages filed: 21 | | **OFFICE USE ONLY** |
| **3** CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR | FIRST: Fred | MI |
| | NICKNAME | LAST: Flickinger | SUFFIX |
| **4** ORIGINAL REPORT TYPE | ☐ January 15 | ☐ Runoff | ☐ Other (specify) |
| | ☒ July 15 | ☐ Exceeded modified reporting limit | |
| | ☐ 30th day before election | ☐ 15th day after campaign treasurer appointment (officeholder only) | |
| | ☐ 8th day before election | ☐ Final Report (Attach C/OH-FR) | |
| **5** ORIGINAL PERIOD COVERED | Month Day Year: 01/01/2026 | THROUGH | Month Day Year: 06/30/2026 |

Date Received: ELECTRONICALLY FILED 07/15/2026

Date Hand-delivered or Date Postmarked:

Receipt #: | Amount:

Date Processed:

Date Imaged:

**6** EXPLANATION OF CORRECTION

The wrong amount was entered for the final balance.

**7** AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

☒ **Semiannual reports:** I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

☐ **Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Fred Flickinger

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

**Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections**

# 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): 00080044

**2** Total pages filed: 21

**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: Fred | MI

NICKNAME | LAST: Flickinger | SUFFIX

**4** CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

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

4025 Feather Lakes Way PO Box 5445

Kingwood , TX 77325

**5** CAMPAIGN TREASURER NAME

MS / MRS / MR: Mr. | FIRST: Nick | MI

NICKNAME | LAST: Helyar | SUFFIX

**6** CAMPAIGN TREASURER ADDRESS (Residence or Business)

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

2368A Rice Blvd
Suite 417
Houston, TX 77005

**7** CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(713) 478-5039

**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): City Council Member, District E Harris

**12** OFFICE SOUGHT (if known): City Council Member, District E

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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


| **13** C / OH NAME | Flickinger, Fred | **14** Filer ID (Ethics Commission Filers) | 00080044 |
|---|---|---|---|

**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) | **$** 0.00 |
| | 2. | **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | **$** 33,100.00 |
| EXPENDITURE TOTALS | 3. | TOTAL UNITEMIZED POLITICAL EXPENDITURES | **$** 0.00 |
| | 4. | **TOTAL POLITICAL EXPENDITURES** | **$** 10,234.90 |
| CONTRIBUTION BALANCE | 5. | TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | **$** 80,761.95 |
| OUTSTANDING LOAN TOTALS | 6. | TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | **$** 103,000.00 |

**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.

Fred Flickinger

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) |
|---|---|
| Flickinger, Fred | 00080044 |

| **20** SCHEDULE SUBTOTALS<br>NAME OF SCHEDULE | | | SUBTOTAL AMOUNT |
|---|---|---|---|
| 1. | [X] | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | **$** 33,100.00 |
| 2. | [ ] | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | **$** |
| 3. | [ ] | SCHEDULE B: PLEDGED CONTRIBUTIONS | **$** |
| 4. | [ ] | SCHEDULE E: LOANS | **$** |
| 5. | [X] | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | **$** 8,483.53 |
| 6. | [ ] | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | **$** |
| 7. | [ ] | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | **$** |
| 8. | [X] | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | **$** 1,751.37 |
| 9. | [ ] | SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | **$** |
| 10. | [ ] | SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | **$** |
| 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: 1/8 Rpt: 5/21

**2** FILER NAME: Flickinger, Fred

**3** Filer ID (Ethics Commission Filers): 00080044

| **4** Date | **5** Full name of contributor / out-of-state PAC (ID#:) | **7** Amount of Contribution ($) |
|---|---|---|
| 06/01/2026 | ACEC Houston PAC | $1,000.00 |
| | **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 ($) |
|---|---|---|
| 06/01/2026 | BAC PAC | $1,000.00 |
| | 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 ($) |
|---|---|---|
| 05/17/2026 | Biar, Andrew (Mr.) | $500.00 |
| | Contributor address; City; State; Zip Code: Houston, TX 77024 | |
| Principal occupation / Job title (See Instructions) | Employer (See Instructions) | |
| Public Affairs | Strategic Public Affairs | |

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 06/01/2026 | Bischof, Mike (Mr.) | $100.00 |
| | Contributor address; City; State; Zip Code: Friendswood, TX 77546 | |
| Principal occupation / Job title (See Instructions) | Employer (See Instructions) | |
| Purchasing | Powell Electric | |

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 06/01/2026 | Brinkley, Shannon (Mr.) | $1,100.00 |
| | Contributor address; City; State; Zip Code: Highlands, TX 77562 | |
| Principal occupation / Job title (See Instructions) | Employer (See Instructions) | |
| Manager | Pyro Source LLC | |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule A1: Sch: 2/8 Rpt: 6/21

**2** FILER NAME: Flickinger, Fred

**3** Filer ID (Ethics Commission Filers): 00080044

| **4** Date | **5** Full name of contributor / out-of-state PAC (ID#:) | **7** Amount of Contribution ($) |
|---|---|---|
| 03/31/2026 | Broad, Tom (Mr.) | $250.00 |
| | **6** Contributor address; City; State; Zip Code: Kingwood, TX 77345 | |

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

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 06/01/2026 | Castleberry, Benjamin (Mr.) | $250.00 |
| | Contributor address; City; State; Zip Code: Houston, TX 77024 | |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Engineer | Black & Veatch |

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 06/01/2026 | Centerpoint Energy | $1,000.00 |
| | Contributor address; City; State; Zip Code: Kingwood, TX 77210 | |

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

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 04/09/2026 | Christman, Casey (Ms.) | $100.00 |
| | Contributor address; City; State; Zip Code: Kingwood, TX 77345 | |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Executive Director | Houston Contractors Association |

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 06/01/2026 | Connor, Matthew (Mr.) | $500.00 |
| | Contributor address; City; State; Zip Code: Cypress, TX 77433 | |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Managing Principal | Arete Public Affairs |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule A1: Sch: 3/8 Rpt: 7/21

**2** FILER NAME: Flickinger, Fred

**3** Filer ID (Ethics Commission Filers): 00080044

| **4** Date | **5** Full name of contributor ☐ out-of-state PAC (ID#:_____) | **7** Amount of Contribution ($) |
|---|---|---|
| 04/13/2026 | Dasigenis, Ted (Mr.) | $100.00 |
| | **6** Contributor address; City; State; Zip Code: Cypress, TX 77433 | |
| **8** Principal occupation / Job title (See Instructions): Retired | **9** Employer (See Instructions): | |
| Date: 03/03/2026 | Full name of contributor ☐ out-of-state PAC (ID#:_____): De Leon, Gracie (Ms.) | Amount of Contribution ($): $500.00 |
| | Contributor address; City; State; Zip Code: Kingwood, TX 77339 | |
| Principal occupation / Job title (See Instructions): Realtor | Employer (See Instructions): Keller Williams Realty Northeast | |
| Date: 06/01/2026 | Full name of contributor ☐ out-of-state PAC (ID#:_____): Denson, Barbara (Mrs.) | Amount of Contribution ($): $500.00 |
| | Contributor address; City; State; Zip Code: Houston, TX 77077 | |
| Principal occupation / Job title (See Instructions): Retired | Employer (See Instructions): | |
| Date: 04/15/2026 | Full name of contributor ☐ out-of-state PAC (ID#:_____): Flanagan, Robert (Mr.) | Amount of Contribution ($): $1,000.00 |
| | Contributor address; City; State; Zip Code: Houston, TX 77018 | |
| Principal occupation / Job title (See Instructions): Retired | Employer (See Instructions): | |
| Date: 06/01/2026 | Full name of contributor ☐ out-of-state PAC (ID#:_____): Guide, Elizabeth (Ms.) | Amount of Contribution ($): $250.00 |
| | Contributor address; City; State; Zip Code: Kingwood, TX 77339 | |
| Principal occupation / Job title (See Instructions): Owner | Employer (See Instructions): Vertical Web LLC | |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule A1: Sch: 4/8 Rpt: 8/21

**2** FILER NAME: Flickinger, Fred

**3** Filer ID (Ethics Commission Filers): 00080044

| **4** Date | **5** Full name of contributor / out-of-state PAC (ID#:) | **7** Amount of Contribution ($) |
|---|---|---|
| 06/01/2026 | HOME-PAC | $1,000.00 |
| | **6** Contributor address; City; State; Zip Code: Houston, TX 77064 | |
| **8** Principal occupation / Job title (See Instructions) | **9** Employer (See Instructions) | |
| | | |

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 04/15/2026 | Hall, Darrin (Mr.) | $500.00 |
| | Contributor address; City; State; Zip Code: Houston, TX 77002 | |
| Principal occupation / Job title (See Instructions) | Employer (See Instructions) | |
| Government Affairs | Arete Public Affairs | |

| Date | Full name of contributor / out-of-state PAC (ID#:) | Amount of Contribution ($) |
|---|---|---|
| 03/03/2026 | Houston 8 Team LLC | $500.00 |
| | 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 ($) |
|---|---|---|
| 06/01/2026 | Houston 8 Team LLC | $500.00 |
| | 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 ($) |
|---|---|---|
| 06/01/2026 | Houston Airport Association PAC | $5,000.00 |
| | Contributor address; City; State; Zip Code: Houston, TX 77041 | |
| 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: 5/8 Rpt: 9/21

**2** FILER NAME: Flickinger, Fred

**3** Filer ID (Ethics Commission Filers): 00080044

| **4** Date | **5** Full name of contributor ☐ out-of-state PAC (ID#:_____) | **7** Amount of Contribution ($) |
|---|---|---|
| 06/01/2026 | Houston Police Officers Union | $2,500.00 |
| | **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 ($) |
|---|---|---|
| 04/02/2026 | Huberty, Dan (Mr.) | $1,000.00 |
| | Contributor address; City; State; Zip Code: Humble, TX 77346 | |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| CEO | Moak Casey |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 04/13/2026 | Hughes, Andy (Mr.) | $100.00 |
| | Contributor address; City; State; Zip Code: Kingwood, TX 77339 | |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| GCO | BGT |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 06/01/2026 | Joiner, Carl (Mr.) | $500.00 |
| | Contributor address; City; State; Zip Code: Kemah, TX 77565 | |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Owner | Joiner & Associates |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 06/01/2026 | Kahn, Shapnik (Mr.) | $2,500.00 |
| | Contributor address; City; State; Zip Code: Houston, TX 77242 | |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Director of Operation | Talabi and Associates |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule A1: Sch: 6/8 Rpt: 10/21

**2** FILER NAME: Flickinger, Fred

**3** Filer ID (Ethics Commission Filers): 00080044

| **4** Date | **5** Full name of contributor ☐ out-of-state PAC (ID#:_____) | **7** Amount of Contribution ($) |
|---|---|---|
| 06/01/2026 | Kubosh, Paul (Mr.) | $500.00 |
| | **6** Contributor address; City; State; Zip Code: Houston, TX 77077 | |

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

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 04/13/2026 | Lauzon, Elizabeth (Mrs.) | $250.00 |
| | Contributor address; City; State; Zip Code: Houton, TX 77062 | |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Office Manager | PPI LLC |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 04/12/2026 | Leblanc, Ted (Mr.) | $500.00 |
| | Contributor address; City; State; Zip Code: Kingwood, TX 77345 | |

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

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 04/13/2026 | Millas, Dimitri (Mr.) | $500.00 |
| | Contributor address; City; State; Zip Code: Houston, TX 77008 | |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Attorney | Norton, Rose, Fullbright |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 06/01/2026 | Norton Rose Fulbright US LLP Texas Committee | $500.00 |
| | Contributor address; City; State; Zip Code: Houston, TX 77010 | |

| 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: 7/8 Rpt: 11/21

**2** FILER NAME: Flickinger, Fred

**3** Filer ID (Ethics Commission Filers): 00080044

| **4** Date | **5** Full name of contributor | **7** Amount of Contribution ($) |
|---|---|---|
| 04/13/2026 | Reyes, Gregg (Mr.) | $1,500.00 |
| | **6** Contributor address; City; State; Zip Code: Houston, TX 77042 | |
| **8** Principal occupation / Job title (See Instructions): President & COO | **9** Employer (See Instructions): Reytec Construction Resources | |

| Date | Full name of contributor | Amount of Contribution ($) |
|---|---|---|
| 06/01/2026 | Risinger, Debra (Mrs.) | $100.00 |
| | Contributor address; City; State; Zip Code: Houston, TX 77059 | |
| Principal occupation / Job title (See Instructions): Retired | Employer (See Instructions): | |

| Date | Full name of contributor | Amount of Contribution ($) |
|---|---|---|
| 05/07/2026 | Saunders, Milan (Mr.) | $2,000.00 |
| | Contributor address; City; State; Zip Code: Kingwood, TX 77339 | |
| Principal occupation / Job title (See Instructions): Director | Employer (See Instructions): Plains State Bank | |

| Date | Full name of contributor | Amount of Contribution ($) |
|---|---|---|
| 03/26/2026 | Tufail, Asim (Mr.) | $1,000.00 |
| | Contributor address; City; State; Zip Code: Houston, TX 77007 | |
| Principal occupation / Job title (See Instructions): Engineer | Employer (See Instructions): Blackline | |

| Date | Full name of contributor | Amount of Contribution ($) |
|---|---|---|
| 03/03/2026 | United Airlines Political Action Committee | $1,000.00 |
| | Contributor address; City; State; Zip Code: Chicago, IL 60606 | |
| 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: 8/8 Rpt: 12/21

**2** FILER NAME: Flickinger, Fred

**3** Filer ID (Ethics Commission Filers): 00080044

| **4** Date | **5** Full name of contributor ☐ out-of-state PAC (ID#:_____) | **7** Amount of Contribution ($) |
|---|---|---|
| 04/23/2026 | Villareal, Massey (Mr.) | $500.00 |
| | **6** Contributor address; City; State; Zip Code: Sugarland, TX 77478 | |

| **8** Principal occupation / Job title (See Instructions) | **9** Employer (See Instructions) |
|---|---|
| Owner | PTG Precision Group |

| Date | Full name of contributor ☐ out-of-state PAC (ID#:_____) | Amount of Contribution ($) |
|---|---|---|
| 06/01/2026 | Vincent, Darrol (Mr.) | $2,500.00 |
| | Contributor address; City; State; Zip Code: Kingwood, TX 77345 | |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Vice President | Jerdon Enterprise |

# 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: 1/7 Rpt: 13/21 | Flickinger, Fred | 00080044 |

| 4 Date | 5 Payee name |
|---|---|
| 03/28/2026 | Anedot |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $40.30 | P.O. Box 84314<br>Baton Rouge, LA 70884 |

| 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.<br>☐ Check if Austin, TX, officeholder living expense<br>Credit Card Processing |

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

| Date | Payee name |
|---|---|
| 04/01/2026 | Anedot |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $10.30 | P.O. Box 84314<br>Baton Rouge, LA 70884 |

| 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.<br>☐ Check if Austin, TX, officeholder living expense<br>Credit Card Processing |

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

| Date | Payee name |
|---|---|
| 04/06/2026 | Anedot |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $40.30 | P.O. Box 84314<br>Baton Rouge, LA 70884 |

| 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.<br>☐ Check if Austin, TX, officeholder living expense<br>Credit Card Processing |

| 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: 2/7 Rpt: 14/21 | Flickinger, Fred | 00080044 |

| 4 Date | 5 Payee name |
|---|---|
| 04/14/2026 | Anedot |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $4.30 | P.O. Box 84314<br>Baton Rouge, LA 70884 |

| 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.<br>☐ Check if Austin, TX, officeholder living expense<br>Credit Card Processing |

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

| Date | Payee name |
|---|---|
| 04/15/2026 | Anedot |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $20.30 | P.O. Box 84314<br>Baton Rouge, LA 70884 |

| 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.<br>☐ Check if Austin, TX, officeholder living expense<br>Credit Card Processing |

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

| Date | Payee name |
|---|---|
| 04/16/2026 | Anedot |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $99.50 | P.O. Box 84314<br>Baton Rouge, LA 70884 |

| 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.<br>☐ Check if Austin, TX, officeholder living expense<br>Credit Card Processing |

| 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: 3/7 Rpt: 15/21 | Flickinger, Fred | 00080044 |

| 4 Date | 5 Payee name |
|---|---|
| 04/20/2026 | Anedot |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $60.60 | P.O. Box 84314<br>Baton Rouge, LA 70884 |

| 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.<br>☐ Check if Austin, TX, officeholder living expense<br>Credit Card Processing |

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

| Date | Payee name |
|---|---|
| 04/28/2026 | Anedot |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $20.30 | P.O. Box 84314<br>Baton Rouge, LA 70884 |

| 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.<br>☐ Check if Austin, TX, officeholder living expense<br>Credit Card Processing |

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

| Date | Payee name |
|---|---|
| 05/12/2026 | Anedot |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $80.30 | P.O. Box 84314<br>Baton Rouge, LA 70884 |

| 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.<br>☐ Check if Austin, TX, officeholder living expense<br>Credit Card Processing |

| 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: 4/7 Rpt: 16/21 | Flickinger, Fred | 00080044 |

| 4 Date | 5 Payee name |
|---|---|
| 05/20/2026 | Anedot |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $20.30 | P.O. Box 84314<br><br>Baton Rouge, LA 70884 |

| 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.<br>☐ Check if Austin, TX, officeholder living expense<br>Credit Card Processing |

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

| Date | Payee name |
|---|---|
| 06/30/2026 | Flickinger, Fred (Mr.) |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $1,751.37 | 4025 Feather Lakes Way<br><br>Kingwood, TX 77345 |

| 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.<br>☐ Check if Austin, TX, officeholder living expense<br>Reimburse Credit Card expenses |

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

| Date | Payee name |
|---|---|
| 01/06/2026 | Houston Livestock Show and Rodeo |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $62.50 | 3 NRG Park<br><br>Houston, TX 77054 |

| 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.<br>☐ Check if Austin, TX, officeholder living expense<br>Advertise |

| 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: 5/7 Rpt: 17/21 | Flickinger, Fred | 00080044 |

| 4 Date | 5 Payee name |
|---|---|
| 01/13/2026 | Kingwood Area Republican Women |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $3,000.00 | P.O. Box 5906<br>Kingwood, TX 77325 |

| 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.<br>☐ Check if Austin, TX, officeholder living expense<br>Paint the Town Red Sponsorship |

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

| Date | Payee name |
|---|---|
| 06/01/2026 | Plains State Bank |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $6.00 | P.O. Box 62005<br>Houston, TX 77205 |

| 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.<br>☐ Check if Austin, TX, officeholder living expense<br>Fees |

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

| Date | Payee name |
|---|---|
| 06/01/2026 | Plains State Bank |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $6.00 | P.O. Box 62005<br>Houston, TX 77205 |

| 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.<br>☐ Check if Austin, TX, officeholder living expense<br>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: 6/7 Rpt: 18/21 | Flickinger, Fred | 00080044 |

| 4 Date | 5 Payee name |
|---|---|
| 03/02/2026 | Tankersley, Kate |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| $2,255.00 | 14810 Bramblewood<br>Houston, TX 77079 |

| 8 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.<br>☐ Check if Austin, TX, officeholder living expense<br>Fundraiser |

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

| Date | Payee name |
|---|---|
| 03/02/2026 | Tankersley, Kate |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $276.16 | 14810 Bramblewood<br>Houston, TX 77079 |

| 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.<br>☐ Check if Austin, TX, officeholder living expense<br>Fundraiser |

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

| Date | Payee name |
|---|---|
| 03/07/2026 | The Life Center Church |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| $500.00 | 1100 Indiana Street<br>Houston, TX 77015 |

| 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.<br>☐ Check if Austin, TX, officeholder living expense<br>SD4 Precinct Convention Sponsor |

| 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: Sch: 7/7 Rpt: 19/21 | **2** FILER NAME Flickinger, Fred | **3** Filer ID (Ethics Commission Filers) 00080044 |
| **4** Date 06/23/2026 | **5** Payee name USPS | |
| **6** Amount ($) $230.00 | **7** Payee address; City; State; Zip Code 4025 Feather Lakes Way<br>Kingwood, TX 77325 | |
| **8** **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) Postage | **(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense P.O. Box rental |
| **9** 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: 1/2 Rpt: 20/21 | **2** FILER NAME Flickinger, Fred | | **3** Filer ID (Ethics Commission Filers) 00080044 |
| **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 $1,060.55 | (b) Date of Charge 03/18/2026 | (c) Date(s) Credit Card Issuer Paid |
| **7 PAYEE** | (a) Payee name Escape It Houston | | (b) Payee address; City, State, Zip Code 20801 Gulf Freeway<br>Webster, TX 77598 |
| **8 PURPOSE OF EXPENDITURE** [X] Political [ ] Non-Political | (a) Category (See Categories listed at the top of this schedule) Event Expense | | (b) Description Venue for Fundraiser |
| | (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 $332.00 | (b) Date of Charge 01/10/2026 | (c) Date(s) Credit Card Issuer Paid |
| **PAYEE** | (a) Payee name Parry's Pizza | | (b) Payee address; City, State, Zip Code 4331 Kingwood Dr<br>Kingwood, TX 77345 |
| **PURPOSE OF EXPENDITURE** [X] Political [ ] Non-Political | (a) Category (See Categories listed at the top of this schedule) Event Expense | | (b) Description Lunch for HPARD employees Median Madness |
| | (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 $78.00 | (b) Date of Charge 05/15/2026 | (c) Date(s) Credit Card Issuer Paid |
| **PAYEE** | (a) Payee name USPS | | (b) Payee address; City, State, Zip Code 4025 Feather Lakes Way<br>Kingwood, TX 77339 |
| **PURPOSE OF EXPENDITURE** [X] Political [ ] Non-Political | (a) Category (See Categories listed at the top of this schedule) Postage | | (b) Description Postage - Thank You cards |
| | (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: 2/2 Rpt: 21/21 | **2** FILER NAME Flickinger, Fred | | **3** Filer ID (Ethics Commission Filers) 00080044 |
| **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 $280.82 / (b) Date of Charge 04/08/2026 | (c) Date(s) Credit Card Issuer Paid | |
| **7 PAYEE** | (a) Payee name: Kingwood Meat Market | (b) Payee address; City, State, Zip Code: 4303 Rustic Woods<br>Kingwood, TX 77345 | |
| **8 PURPOSE OF EXPENDITURE** [X] Political [ ] Non-Political | (a) Category (See Categories listed at the top of this schedule): Food/Beverage Expense | (b) Description: Pastry Day City Council | |
| | (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 |