

# 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) <b>83701</b>	2 Total pages filed: <b>110</b>			
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	<b>OFFICE USE ONLY</b>		
	Mr.	J Christian				
NICKNAME	LAST	SUFFIX				
	Becerra					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE					
Change of Address	4311Pond Apple Place Richmond TX 77406					
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Received		
	(281 )	726-2910				
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Date Hand-delivered or Date Postmarked		
	Dr.	William Troy				
	NICKNAME	LAST	SUFFIX	Receipt #		
		Rodriguez		Amount \$		
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE					
(Residence or Business)	17034 University Blvd Sugar Land TX 77479					
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Processed		
	(281 )	494-9191				
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)					
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)					
10 PERIOD COVERED	Month	Day	Year	Month	Day	Year
	7	1	25	THROUGH	12	31 / 25
11 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month	Day	Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description
	3	3	26	<input type="checkbox"/> General	<input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)		
	434th District Judge			Fort Bend County Judge		
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.					
	COMMITTEE TYPE	COMMITTEE NAME				
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS				
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRESS				

JAN 15 2026 10:00

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME J Christian Becerra		16 Filer ID (Ethics Commission Filers) 83701
17 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)	\$ 94,171.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 95,623.77
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 8,210.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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

\_\_\_\_\_  
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by \_\_\_\_\_ 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

OR

(2) Unsworn Declaration

My name is J. Christian Becerra, and my date of birth is 06/29/1970

My address is 4311 Pond Apple Place, Richmond, TX, 77406, US

(street) (city) (state) (zip code) (country)

Executed in Fort Bend County, State of Texas, on the 15 day of Jan, 2026

(month) (year)

\_\_\_\_\_  
Signature of Candidate/Officeholder (Declarant)

**SUBTOTALS - C/OH**

**FORM C/OH  
COVER SHEET PG 3**

<b>19 FILER NAME</b> Becerra, J. Christian		<b>20 Filer ID (Ethics Commission Filers)</b> 83701
<b>21 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		<b>SUBTOTAL AMOUNT</b>
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 94,171.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 95,623.77
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$
12. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$ 27.05

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule <u>A1</u> Sch: 1/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 09/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Will	7 Amount of Contribution (\$)  \$2,500.00
6 Contributor address; City; State; Zip Code 23501 Cinco Ranch Blvd  Katy, TX 77494		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahmad, Adnan	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code 27919 Burchfield Grove Ln  Katy, TX 77494		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akhtar, Muhammed	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code 3911 Stable Course Dr  Richmond, TX 77407		
Contributor's Principal Occupation Manager		Contributor's Job Title Manager
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>A1</b> Sch: 2/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 10/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alyasin, Ahmad	7 Amount of Contribution (\$)  \$500.00
6 Contributor address; City; State; Zip Code 9000 Richmond  Houston, TX 77063		
8 Contributor's Principal Occupation Chairman		9 Contributor's Job Title Chairman
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arellano, Nester	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 535 FM 2977 #138  Richmond, TX 77469		
Contributor's Principal Occupation N/A		Contributor's Job Title N/A
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arredondo, Carlos	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 509 2nd Street  Rosenberg, TX 77469		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>A1</b> Sch: 3/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 10/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aryal, Bijay	7 Amount of Contribution (\$)  \$500.00
6 Contributor address; City; State; Zip Code 5511 Briscoe Bend Ln  Fuishear, TX 77441		
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Azam, Ahmad	Amount of Contribution (\$)  \$2,500.00
Contributor address; City; State; Zip Code 2803 Enriched Enclave Ct  Richmond, TX 77406		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Attorney		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bejarano, Andrew	Amount of Contribution (\$)  \$5,000.00
Contributor address; City; State; Zip Code 84 Audubon Hollow Lane  Houston, TX 77027		
Contributor's Principal Occupation Manager		Contributor's Job Title Manager
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule <b>A1</b> Sch: <b>4/40</b>
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 10/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bender, Daniel	7 Amount of Contribution (\$)  \$250.00
6 Contributor address; City; State; Zip Code 2518 Patrot Shell Ln  Richmond, TX 77406		
8 Contributor's Principal Occupation Fin. Advisor		9 Contributor's Job Title Fin. Advisor
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benes, Michael	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code 504 Bayou Dr  Richmond, TX 77469		
Contributor's Principal Occupation Appraisal		Contributor's Job Title Appraisal
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Big Rod's Towing	Amount of Contribution (\$)  \$2,500.00
Contributor address; City; State; Zip Code 1919 Main St  Rosenberg, TX 77471		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule <b>A1</b> Sch: 5/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 12/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Big Rod's Towing	7 Amount of Contribution (\$) \$2,500.00
6 Contributor address; City; State; Zip Code 1919 Main St  Rosenberg, TX 77471		
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broussard, Scott	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 21242 Redcrest Manor Dr  Richmond, TX 77406		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bushe, Benjamin	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 926 Coffee Mill Creek Lane  Rosenberg, TX 77471		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule <b>A1</b> Sch: 6/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caldwell, Jasmine	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 5839 Baldwin Elm St  Richmond , TX 77407		
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantu, Oto	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1708 Spring Green Blvd 120-362  Katy , TX 77494		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carreon, Abraham	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code 9033 Rue  Houston, TX 77074		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A 1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>A1</b> Sch: 7/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 09/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Wilvin	7 Amount of Contribution (\$) \$2,500.00
6 Contributor address; City; State; Zip Code 15 Cinque Terre Dr  Missouri City, TX 77459		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clouser Sr., Joel	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 3026 Pelican Cove  Missouri City, TX 77459		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cortes, Eddie	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Houston, TX 77001		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule <b>A1</b> Sch: 8/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 11/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cortes, Eddie	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code PO Box 114  Houston, TX 77001		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Culpepper, Shea	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code 8510 Babbling Brook Cr  Sugar Land, TX 77479		
Contributor's Principal Occupation Sales		Contributor's Job Title Clinical Professor
Contributor's employer/law firm Clinical Professor		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curimbaba, Sally	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code 313 2nd Street  Rosenberg, TX 77471		
Contributor's Principal Occupation Business Owner		Contributor's Job Title Business Owner
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule <b>A1</b> Sch: 9/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Myron	7 Amount of Contribution (\$)  \$500.00
6 Contributor address; City; State; Zip Code 7322 SW Frwy  Houston, TX 77074		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Myron	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code 7332 Southwest Freeway 555  Houston, TX 77074		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Day, Jessica	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code 122 W Davis St  Conroe, TX 77301		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>A1</b> Sch: 10/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doggett, Stephen	7 Amount of Contribution (\$) <span style="float: right;">\$500.00</span>
6 Contributor address; City; State; Zip Code 201 South 11th St  Richmond, TX 77469		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dowdy, Laura	Amount of Contribution (\$) <span style="float: right;">\$100.00</span>
Contributor address; City; State; Zip Code  TX		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faden, Cary	Amount of Contribution (\$) <span style="float: right;">\$1,000.00</span>
Contributor address; City; State; Zip Code 4307 Keating Court  Sugar Land , TX 77478		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

**The Instruction Guide explains how to complete this form.** 1 Total pages Schedule **A1**  
Sch: 11/40

**2 FILER NAME**  
Becerra, J. Christian (The Honorable) **3 Filer ID (Ethics Commission Filers)**  
00083701

<b>4 Date</b> 07/25/2025	<b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis-Besminster, Lauralie	<b>7 Amount of Contribution (\$)</b>  \$5.00
<b>6 Contributor address; City; State; Zip Code</b> 13603 Greywood Dr  Sugar Land, TX 77498		

<b>8 Contributor's Principal Occupation</b> Computer Tech	<b>9 Contributor's Job Title</b> Computer Tech
--	---

<b>10 Contributor's employer/law firm</b> N/A	<b>11 Law firm of contributor's spouse (if any)</b>
--	---

**12 If contributor is a child, law firm of parent(s) (if any)**

<b>Date</b> 08/29/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis-Besminster, Lauralie	<b>Amount of Contribution (\$)</b>  \$5.00
<b>Contributor address; City; State; Zip Code</b> 13603 Greywood Dr  Sugar Land, TX 77498		

<b>Contributor's Principal Occupation</b> Computer Tech	<b>Contributor's Job Title</b>
--	--------------------------------

<b>Contributor's employer/law firm</b>	<b>Law firm of contributor's spouse (if any)</b>
--	--

**If contributor is a child, law firm of parent(s) (if any)**

<b>Date</b> 09/29/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis-Besminster, Lauralie	<b>Amount of Contribution (\$)</b>  \$5.00
<b>Contributor address; City; State; Zip Code</b> 13603 Greywood Dr  Sugar Land, TX 77498		

<b>Contributor's Principal Occupation</b> Computer Tech	<b>Contributor's Job Title</b>
--	--------------------------------

<b>Contributor's employer/law firm</b>	<b>Law firm of contributor's spouse (if any)</b>
--	--

**If contributor is a child, law firm of parent(s) (if any)**

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>A1</b> Sch: 12/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 10/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis-Besminster, Lauralie	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code 13603 Greywood Dr  Sugar Land, TX 77498		
8 Contributor's Principal Occupation Computer Tech		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis-Besminster, Lauralie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code 13603 Greywood Dr  Sugar Land, TX 77498		
Contributor's Principal Occupation Computer Tech		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis-Besminster, Lauralie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code 13603 Greywood Dr  Sugar Land, TX 77498		
Contributor's Principal Occupation Computer Tech		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule <b>41</b> Sch: 13/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 09/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fry Law Firm PC	7 Amount of Contribution (\$)  \$2,500.00
6 Contributor address: City; State; Zip Code 1119 Oak Creek Dr  Richmond, TX 77469		
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamez, Nataliya	Amount of Contribution (\$)  \$300.00
Contributor address: City; State; Zip Code 4201 Main Street Suite 200-101  Houston, TX 77002		
Contributor's Principal Occupation Attorney		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamez, Nataliya	Amount of Contribution (\$)  \$300.00
Contributor address: City; State; Zip Code 4201 Main Street Suite 200-101  Houston, TX 77002		
Contributor's Principal Occupation Attorney		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>A1</b> Sch: 14/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 09/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamez, Nataliya	7 Amount of Contribution (\$) \$300.00
6 Contributor address; City; State; Zip Code 4201 Main Street Suite 200-101  Houston, TX 77002		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamez, Nataliya	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code 4201 Main Street Suite 200-101  Houston, TX 77002		
Contributor's Principal Occupation Attorney		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamez, Nataliya	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code 4201 Main Street Suite 200-101  Houston, TX 77002		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule <b>A1</b> Sch: 15/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 12/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamez, Nataliya	7 Amount of Contribution (\$)  \$300.00
6 Contributor address; City; State; Zip Code 4201 Main Street Suite 200-101  Houston, TX 77002		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, Mark	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 13407 McDoyle Rd  Houston , TX 77048		
Contributor's Principal Occupation N/A		Contributor's Job Title N/A
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales , Anna	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code 4014 Junker Street  Rosenberg , TX 77471		
Contributor's Principal Occupation Social Worker		Contributor's Job Title Social Worker
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>A1</b> Sch: 16/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guevara, Diana	7 Amount of Contribution (\$)  \$250.00
	6 Contributor address; City; State; Zip Code  Missouri City , TX 77459	
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadi, Husein	Amount of Contribution (\$)  \$2,500.00
	Contributor address; City; State; Zip Code 4110 Thistle Hill Ct  Sugar Land, TX 77479	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herd Law Firm	Amount of Contribution (\$)  \$2,500.00
	Contributor address; City; State; Zip Code 19500 Tomball Pkwy Suite 250  Houston, TX 77070	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A **2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule <b>41</b> Sch: 17/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 10/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrera, Xavier	7 Amount of Contribution (\$) <b>\$1,000.00</b>
6 Contributor address; City; State; Zip Code 1858 Westwood Dr  Stafford, TX 77477		
8 Contributor's Principal Occupation Managing Director		9 Contributor's Job Title Managing Director
10 Contributor's employer/law firm Elite Change Inc		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Alex	Amount of Contribution (\$) <b>\$250.00</b>
Contributor address; City; State; Zip Code 3911 Westerdale Dr  Weston Lake, TX 77441		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Alex	Amount of Contribution (\$) <b>\$500.00</b>
Contributor address; City; State; Zip Code 3911 Westerdale Dr  Weston Lakes, TX 77441		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A **2**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>41</b> Sch: 18/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 11/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) IPS Investigation & Polygraph 6 Contributor address; City; State; Zip Code 14202 Cally Circle  Needville, TX 77461	7 Amount of Contribution (\$)  \$5,000.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Iqbal , Javed Contributor address; City; State; Zip Code 1606 Brazos Traces Dr  Richmond, TX 77469	Amount of Contribution (\$)  \$100.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Iqbal , Javed Contributor address; City; State; Zip Code 1606 Brazos Traces Dr  Richmond, TX 77469	Amount of Contribution (\$)  \$150.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>A1</b> Sch: 19/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 11/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffery Strange Attorney at Law  6 Contributor address; City; State; Zip Code 200 S 10th St  TX 77469	7 Amount of Contribution (\$)  \$1,000.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jhaveri, Gaurav  Contributor address; City; State; Zip Code 7027 Argone Trail  Sugar Land, TX 77479	Amount of Contribution (\$)  \$251.00
Contributor's Principal Occupation Director Strategic Acct		Contributor's Job Title Director Strategic Acct
Contributor's employer/law firm Siemens		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan, Adeel  Contributor address; City; State; Zip Code 17022 Kaitlyn Kerria Ct  Richmond , TX 77407	Amount of Contribution (\$)  \$100.00
Contributor's Principal Occupation Physical Therapist		Contributor's Job Title Physical Therapist
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
if contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A2**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>41</b> Sch: 20/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 10/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiatta, David	7 Amount of Contribution (\$)  \$1,000.00
6 Contributor address; City; State; Zip Code 345 Commerce Green Blvd Suite 200  Sugar Land, TX 77478		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Libby	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 802 Foster Dr  Richmond, TX 77469		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
if contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Bryan	Amount of Contribution (\$)  \$1,000.00
Contributor address; City; State; Zip Code 3206 Trotwood Ln  Katy, TX 77494		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **41**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule <b>41</b> Sch: 21/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Offices of Domingo Garcia LLP  6 Contributor address; City; State; Zip Code 11551 Forest Central Dr Suite 300  Dallas, TX 75243	7 Amount of Contribution (\$)  \$500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee Cox Lawyer PLLC  Contributor address; City; State; Zip Code 201 S 11th St  Richmond, TX 77469	Amount of Contribution (\$)  \$1,500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarty, Stacy  Contributor address; City; State; Zip Code 711 Morton St  Richmond, TX 77469	Amount of Contribution (\$)  \$250.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>A1</b> Sch: 22/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 10/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClure, David	7 Amount of Contribution (\$)  \$250.00
6 Contributor address; City; State; Zip Code 4319 Maily Meadow Ln  Katy, TX 77450		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Elliott Attorney at Law	Amount of Contribution (\$)  \$2,500.00
Contributor address; City; State; Zip Code 1207 3rd Street  TX 77469		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike Díaz Attorney at Law	Amount of Contribution (\$)  \$4,500.00
Contributor address; City; State; Zip Code 1332 Cascade Falls  Friendswood, TX 77546		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A **L**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>41</b> Sch: 23/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 08/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Mandy	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 4502 Butler Springs Lane  Katy, TX 77494		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nahhas, Wisam	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 5237 Cornish St  Pasadena, TX 77505		
Contributor's Principal Occupation Manager		Contributor's Job Title Manager
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
if contributor is a child, law firm of parent(s) (if any)		
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nassif, Michael	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code 1446 N Medio River Circle  Sugar Land, TX 77478		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>A1</b> Sch: 24/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 09/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niazi, Shamroze	7 Amount of Contribution (\$)  \$100.00
6 Contributor address; City; State; Zip Code 6318 Canyon Chase Dr  Richmond, TX 77469		
8 Contributor's Principal Occupation IT		9 Contributor's Job Title IT
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Adrienne	Amount of Contribution (\$)  \$1,000.00
Contributor address; City; State; Zip Code 2750 Farm  Katy, TX 77494		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patel, Anil	Amount of Contribution (\$)  \$200.00
Contributor address; City; State; Zip Code 4703 Arrowhead Lake Dr  Missouri City, TX 77459		
Contributor's Principal Occupation N/A		Contributor's Job Title N/A
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

**MONETARY POLITICAL CONTRIBUTIONS**

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>A1</b> Sch: 25/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 10/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phoenix, Joyce	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 4618 Nealwood Ct  Fresno, TX 77545		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Precision Auto Solution	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code 16420 W Bellfort  Sugar Land , TX 77498		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Qadir, Farah	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code 7519 Sonora Star Lane  Richmond, TX 77407		
Contributor's Principal Occupation Supply Chain		Contributor's Job Title Supply Chain
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>A1</b> Sch: 26/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raffoul, Leticia	7 Amount of Contribution (\$)  \$50.00
6 Contributor address; City; State; Zip Code  Richmond, TX 77407		
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rash, Sonia & Ronald	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code 7602 Bogard Ct  Sugar Land, TX 77479		
Contributor's Principal Occupation N/A		Contributor's Job Title N/A
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Razaqj, Salman	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code 11511 Haley Hollow  Richmod, TX 77407		
Contributor's Principal Occupation Business Owner		Contributor's Job Title Business Owner
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>41</b> Sch: 27/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 09/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Razzaqi, Syed S	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 6106 Stonebury Ct  Sugar Land, TX 77479		
8 Contributor's Principal Occupation N/A		9 Contributor's Job Title N/A
10 Contributor's employer/law firm N/A		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reveles, Mary	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 4310 Village Forest  Sugar Land, TX 77479		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Felix	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code 1609 Jenny Lane  Richmond, TX 77469		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

**MONETARY POLITICAL CONTRIBUTIONS**

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule <b>A1</b> Sch: 28/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 11/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Christopher	7 Amount of Contribution (\$) <span style="float: right;">\$100.00</span>
6 Contributor address; City; State; Zip Code 2703 Arabelle Grove  Houston, TX 77007		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard L Tate Attorney	Amount of Contribution (\$) <span style="float: right;">\$5,000.00</span>
Contributor address; City; State; Zip Code 206 2nd Street  Richmond , TX 77469-3128		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rizvi, Syed	Amount of Contribution (\$) <span style="float: right;">\$1,000.00</span>
Contributor address; City; State; Zip Code 4114 Stoneglen Terrace Ln  Sugar Land, TX 77479		
Contributor's Principal Occupation Business Owner		Contributor's Job Title Business Owner
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

**MONETARY POLITICAL CONTRIBUTIONS**

SCHEDULE **41**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>41</b> Sch: 29/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 09/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, William	7 Amount of Contribution (\$)  \$1,000.00
6 Contributor address; City; State; Zip Code 4144 Greystone Way 607  Sugar Land, TX 77478		
8 Contributor's Principal Occupation Dentist		9 Contributor's Job Title Dentist
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Dylan	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 4518 Pebblestone Dr  Missouri City , TX 77459		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Annie	Amount of Contribution (\$)  \$750.00
Contributor address; City; State; Zip Code 21615 Woodoak Ct  Katy, TX 77450		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>A1</b> Sch: 30/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 11/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Segura, Anthony  6 Contributor address; City; State; Zip Code 17206 Pentland  Richmond, TX 77407	7 Amount of Contribution (\$)  \$2,000.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sims , Brand  Contributor address; City; State; Zip Code 345 Commerce Green  Sugar Land, TX 77478	Amount of Contribution (\$)  \$250.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sims , Brandon  Contributor address; City; State; Zip Code 345 Commerce Green  Sugar Land, TX 77478	Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

**MONETARY POLITICAL CONTRIBUTIONS**

SCHEDULE **41**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>41</b> Sch: 31/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 08/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Phoebe	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 77 Sugar Creek Center Blvd  Sugar Land, TX 77478		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sulton, Perez	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 16631 Pecan Dr  Sugar Land, TX 77498		
Contributor's Principal Occupation N/A		Contributor's Job Title N/A
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TGM Printing	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 8711 Emerald Heights Ct  Houston, TX 77083		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

**MONETARY POLITICAL CONTRIBUTIONS**

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule <b>A1</b> Sch: 32/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tahir, Imran	7 Amount of Contribution (\$)  \$500.00
6 Contributor address; City; State; Zip Code 18939 Oakworth Meadow Ct  Richmond, TX 77407		
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tahir, Muhammad	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code 18939 Oakworth Meadow Ct  Richmond, TX 77404		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tang, Vincent	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code 440 Louisiana Suite 900  TX 77002		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Vincent Tang Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

**MONETARY POLITICAL CONTRIBUTIONS**

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>A1</b> Sch: 33/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 11/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teeter, Amanda	7 Amount of Contribution (\$) \$150.00
	6 Contributor address; City; State; Zip Code 25702 Madison Falls Ln  Katy, TX 77491	
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thakkar, Yogesh	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 5319 Iris Springs Ln  Sugar Land, TX 77479	
Contributor's Principal Occupation Tax Accountant		Contributor's Job Title Tax Accountant
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tomlinson, Amy	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 1911 La Magnolia Dr  Houston, TX 77023	
Contributor's Principal Occupation N/A		Contributor's Job Title N/A
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule <b>A1</b> Sch: 34/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 08/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tomlinson, Amy	7 Amount of Contribution (\$)  \$100.00
6 Contributor address; City; State; Zip Code 1911 La Magnolia Dr  Houston, TX 77023		
8 Contributor's Principal Occupation N/A		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tomlinson, Amy	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 1911 La Magnolia Dr  Houston, TX 77023		
Contributor's Principal Occupation N/A		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tomlinson, Amy	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 1911 La Magnolia Dr  Houston, TX 77023		
Contributor's Principal Occupation N/A		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>A1</b> Sch: 35/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 11/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tomlinson, Amy	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 1911 La Magnolia Dr  Houston, TX 77023		
8 Contributor's Principal Occupation N/A		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tomlinson, Amy	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1911 La Magnolia Dr  Houston, TX 77023		
Contributor's Principal Occupation N/A		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tu, Paul	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code 5414 Mornington Dr  Sugar Land, TX 77498		
Contributor's Principal Occupation Attorney		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule <b>A1</b> Sch: 36/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ureste, Shena	7 Amount of Contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code 7707 Bayou Green Lane  Sugar Land, TX 77479		
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Uschkrat, James	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 4514 Bermuda Dr  Sugar Land, TX 77479		
Contributor's Principal Occupation Retired		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vargas, Jesse	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 2003 Blake Lank Rd  Sugar Land, TX 77478		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule <b>A1</b> Sch: 37/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 11/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vela, William	7 Amount of Contribution (\$)  \$100.00
6 Contributor address; City; State; Zip Code 2510 Water Rest  Sugar Land, TX 77479		
8 Contributor's Principal Occupation N/A		9 Contributor's Job Title N/A
10 Contributor's employer/law firm N/A		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vendt, Frank	Amount of Contribution (\$)  \$1,000.00
Contributor address; City; State; Zip Code 1104 Thompson Rd  Richmond, TX 77469		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vij, Vikram	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code 2501 Dry Bank Lane  Pearland, TX 77584		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule <b>A1</b> Sch: 38/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 09/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wadhawan, Manik	7 Amount of Contribution (\$)  \$1,000.00
6 Contributor address; City; State; Zip Code 4510 Oak Forest Dr  Missouri City, TX 77459		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washington, Anthony	Amount of Contribution (\$)  \$1,000.00
Contributor address; City; State; Zip Code 2601 Cartwright Rd #166  Missouri City, TX 77459		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Dana	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 1215 Summer Brook  Sugar Land, TX 77478		
Contributor's Principal Occupation Realtor		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
if contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule <b>A1</b> Sch: 39/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 10/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, O'Neil	7 Amount of Contribution (\$) \$500.00
6 Contributor address: City; State; Zip Code 1539 Lake Pauline Ct  Richmond, TX 77406		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Charles	Amount of Contribution (\$) \$5,000.00
Contributor address: City; State; Zip Code 314 9th Street  Richmond, TX 77469		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zamora, Maggie	Amount of Contribution (\$) \$100.00
Contributor address: City; State; Zip Code 1223 Shannon Valley Dr  Houston, TX 77077		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

**MONETARY POLITICAL CONTRIBUTIONS**

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule <b>A1</b> Sch: 40/40
2 FILER NAME Becerra, J. Christian (The Honorable)		3 Filer ID (Ethics Commission Filers) 00083701
4 Date 09/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zand, Dean	7 Amount of Contribution (\$) <b>\$200.00</b>
6 Contributor address; City; State; Zip Code 2407 park Square Dr  Missouri City , TX 77459		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

# 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: <b>65</b>	2 FILER NAME Becerra, J. Christian	3 Filer ID (Ethics Commission Filers) 00083701
4 Date 11/06/2025	5 Payee name 12 Oaks Parking	
6 Amount (\$) \$18.00	7 Payee address; City; State; Zip Code 5085 Westheimer  Houston, TX 77056	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/06/2025	Payee name AMG State Valet	
Amount (\$) \$10.83	Payee address; City; State; Zip Code 3100 Post Oak  Houston, TX 77056	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/26/2025	Payee name Academy	
Amount (\$) \$37.05	Payee address; City; State; Zip Code  Richmond, TX 77469	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Exp
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: <b>65</b>		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 09/30/2025		5 Payee name Act Blue			
6 Amount (\$) \$1,530.69		7 Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/31/2025		Payee name Act Blue			
Amount (\$) \$188.44		Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 11/30/2025		Payee name Act Blue			
Amount (\$) \$175.79		Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# 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: <b>65</b>		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 12/31/2025		5 Payee name Act Blue			
6 Amount (\$) \$19.75		7 Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/14/2025		Payee name Aguilar, Ray			
Amount (\$) \$200.00		Payee address; City; State; Zip Code  TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation for Seniors FB Fair	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/27/2025		Payee name Alexandria Foundation			
Amount (\$) \$300.00		Payee address; City; State; Zip Code Po Box 31241  Houston, TX 77231			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsor Golf	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# 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: <b>45</b>		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 08/21/2025		5 Payee name Alings			
6 Amount (\$) \$61.82		7 Payee address; City; State; Zip Code 6542 US 90 Alt  Sugar Land, TX 77498			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Exp - Meeting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/25/2025		Payee name Alings			
Amount (\$) \$67.76		Payee address; City; State; Zip Code 6542 US 90 Alt  Sugar Land, TX 77498			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/01/2025		Payee name Almazan, Lucio			
Amount (\$) \$100.00		Payee address; City; State; Zip Code  TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BBQ Cookoff 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: <b>65</b>	2 FILER NAME Becerra, J. Christian	3 Filer ID (Ethics Commission Filers) 00083701
4 Date 07/07/2025	5 Payee name Amazon	
6 Amount (\$) \$10.76	7 Payee address; City; State; Zip Code 410 Terry Avenue N  Seattle, TX 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Exp
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/21/2025	Payee name Amazon	
Amount (\$) \$12.98	Payee address; City; State; Zip Code 410 Terry Avenue N  Seattle, TX 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Exp
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/01/2025	Payee name Amazon	
Amount (\$) \$64.89	Payee address; City; State; Zip Code 410 Terry Avenue N  Seattle, TX 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for event
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: <b>65</b>		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 07/07/2025		5 Payee name American Caribbean Chamber Commerce			
6 Amount (\$) \$349.00		7 Payee address; City; State; Zip Code 6201 Bonhomme Suite 214N  Houston, TX 77036			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Back to School Donation	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/08/2025		Payee name American Caribbean Chamber Commerce			
Amount (\$) \$300.00		Payee address; City; State; Zip Code 6201 Bonhomme Suite 214N  Houston, TX 77036			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation - Turkeys	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/08/2025		Payee name American Caribbean Chamber Commerce			
Amount (\$) \$200.00		Payee address; City; State; Zip Code 6201 Bonhomme Suite 214N  Houston, TX 77036			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# 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: <b>65</b>	2 FILER NAME Becerra, J. Christian	3 Filer ID (Ethics Commission Filers) 00083701
4 Date 11/19/2025	5 Payee name Arredondo, Carlos	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code PO Box 1481  Richmond , TX 77406	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 12/02/2025	Payee name Avalon Diner !!!	
Amount (\$) \$30.00	Payee address; City; State; Zip Code 12810 Southwest Freeway  Stafford, TX 77477	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 11/13/2025	Payee name Becerra, Elizath	
Amount (\$) \$300.00	Payee address; City; State; Zip Code  TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Exp Nov
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.

<b>1</b> Total pages Schedule F1:  65	<b>2</b> FILER NAME Becerra, J. Christian	<b>3</b> Filer ID (Ethics Commission Filers) 00083701
<b>4</b> Date 10/14/2025	<b>5</b> Payee name BikeRide	
<b>6</b> Amount (\$) \$22.55	<b>7</b> Payee address; City; State; Zip Code 1600 Pearl St  Boulder, CO 80302	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fort Bend DA Bike Ride, Survivors Donation
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought      Office held
Date 11/17/2025	Payee name Black Hawk County Club	
Amount (\$) \$30.65	Payee address; City; State; Zip Code 12610 FM 1464  Richmond, TX 77407	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting
Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought      Office held
Date 11/17/2025	Payee name Black Hawk County Club	
Amount (\$) \$53.13	Payee address; City; State; Zip Code 12610 FM 1464  Richmond, TX 77407	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting
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: <b>65</b>		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 10/09/2025		5 Payee name Black Rock Coffe			
6 Amount (\$) \$8.63		7 Payee address; City; State; Zip Code 19205 W Bellfort RD  Richmond, TX 77469			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/07/2025		Payee name Blockhouse Coffee			
Amount (\$) \$26.45		Payee address; City; State; Zip Code 611 Jackson St Ste C  Richmond, TX 77469			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Meeting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/01/2025		Payee name Blockhouse Coffee			
Amount (\$) \$35.48		Payee address; City; State; Zip Code 611 Jackson St Ste C  Richmond, TX 77469			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting	
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.

<b>1</b> Total pages Schedule F1:  65	<b>2</b> FILER NAME  Becerra, J. Christian	<b>3</b> Filer ID (Ethics Commission Filers)  00083701
<b>4</b> Date  10/16/2025	<b>5</b> Payee name  Brasserie	
<b>6</b> Amount (\$)  \$11.50	<b>7</b> Payee address; City; State; Zip Code  1962 W Gray  Houston, TX 77019	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Food/Beverage Expense	<b>(b)</b> Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Campaign Meeting
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date  10/17/2025	Payee name  Brasserie	
Amount (\$)  \$74.05	Payee address; City; State; Zip Code  1962 W Gray  Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Food/Beverage Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Campaign Meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date  11/21/2025	Payee name  Butt, Rani	
Amount (\$)  \$250.00	Payee address; City; State; Zip Code  TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Photography
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: <b>65</b>		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 10/01/2025		5 Payee name CSPAC LLC			
6 Amount (\$) \$500.00		7 Payee address; City; State; Zip Code 11418 Oak Ridge Cout  Sugar Land, TX 77498			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/04/2025		Payee name CSPAC LLC			
Amount (\$) \$500.00		Payee address; City; State; Zip Code 11418 Oak Ridge Cout  Sugar Land, TX 77498			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/08/2025		Payee name CSPAC LLC			
Amount (\$) \$500.00		Payee address; City; State; Zip Code 11418 Oak Ridge Cout  Sugar Land, TX 77498			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting	
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  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Printing Expense               | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor  | Travel Out of District                     |
| Credit Card Payment  | Legal Services                |                                | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <u>25</u>	<b>2</b> FILER NAME Becerra, J. Christian	<b>3</b> Filer ID (Ethics Commission Filers) 00083701
<b>4</b> Date 10/02/2025	<b>5</b> Payee name CVS	
<b>6</b> Amount (\$) \$59.30	<b>7</b> Payee address; City; State; Zip Code 11950 Mason Rd  Richmond, TX 77460	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gift Card Donation
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 08/18/2025	Payee name Cervates, Rosemary	
Amount (\$) \$200.00	Payee address; City; State; Zip Code  TX	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Parade
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 10/14/2025	Payee name Cortinas, Chris	
Amount (\$) \$800.00	Payee address; City; State; Zip Code  TX	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
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: <b>65</b>		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 12/11/2025		5 Payee name Dillards			
6 Amount (\$) \$138.56		7 Payee address: City; State; Zip Code 16517 SW Freeway  Sugar Land, TX 77479			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Exp	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/28/2025		Payee name Elite Change			
Amount (\$) \$5,000.00		Payee address: City; State; Zip Code 5445 Alameda Rd., Suite 307  Houston, TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Exp	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/23/2025		Payee name Elite Change			
Amount (\$) \$6,000.00		Payee address: City; State; Zip Code 5445 Alameda Rd., Suite 307  Houston, TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting	
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.

<b>1</b> Total pages Schedule F1:  LB	<b>2</b> FILER NAME Becerra, J. Christian	<b>3</b> Filer ID (Ethics Commission Filers) 00083701
<b>4</b> Date 10/14/2025	<b>5</b> Payee name Elite Change	
<b>6</b> Amount (\$) \$6,000.00	<b>7</b> Payee address; City; State; Zip Code 5445 Alameda Rd., Suite 307  Houston , TX	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 11/07/2025	Payee name Elite Change	
Amount (\$) \$6,000.00	Payee address; City; State; Zip Code 5445 Alameda Rd., Suite 307  Houston , TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/08/2025	Payee name Elite Change	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 5445 Alameda Rd., Suite 307  Houston , TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
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: <b>63</b>	2 FILER NAME Becerra, J. Christian	3 Filer ID (Ethics Commission Filers) 00083701
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4 Date 12/15/2025	5 Payee name Elite Change
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6 Amount (\$) \$2,000.00	7 Payee address; City; State; Zip Code 5445 Alameda Rd., Suite 307  Houston , TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2025	Payee name Elite Change
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Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 5445 Alameda Rd., Suite 307  Houston , TX
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/28/2025	Payee name Elkins High School
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Amount (\$) \$104.00	Payee address; City; State; Zip Code 7007 Knights Court  Missouri City , TX 77459
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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: <b>45</b>		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 11/28/2025		5 Payee name Elkins High School			
6 Amount (\$) \$55.00		7 Payee address; City; State; Zip Code 7007 Knights Court  Missouri City , TX 77459			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donations	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/17/2025		Payee name Enrich Gymnastics			
Amount (\$) \$2,000.00		Payee address; City; State; Zip Code 1661 Blaisdale Rd  Richmond , TX 77406			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 12/30/2025		Payee name Evans, Cierra			
Amount (\$) \$1,397.25		Payee address; City; State; Zip Code  TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Exp	
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: <b>65</b>		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 11/24/2025		5 Payee name Ever Ready Lodge 506			
6 Amount (\$) \$150.00		7 Payee address; City; State; Zip Code 429 West St  Rosenberg, TX 77471			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/27/2025		Payee name Exchange Club of Fort Bend			
Amount (\$) \$250.00		Payee address; City; State; Zip Code 4800 Sugar Grove Blvd.  Sugar Land, TX 77477			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 10/16/2025		Payee name Expose Excellence Youth Foundation			
Amount (\$) \$500.00		Payee address; City; State; Zip Code 4203 Glenshadow Ct.  Katy, TX 77494			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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.

<b>1</b> Total pages Schedule F1: <p style="text-align:center; font-size: 1.2em;">65.</p>	<b>2</b> FILER NAME Becerra, J. Christian	<b>3</b> Filer ID (Ethics Commission Filers) 00083701
<b>4</b> Date 07/28/2025	<b>5</b> Payee name Extra Space 1945	
<b>6</b> Amount (\$) \$189.00	<b>7</b> Payee address; City; State; Zip Code 7940 W Grand Parkway  Richmond, TX 77406	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Storage for Signs - Political Exp
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/28/2025	Candidate/Officeholder name Extra Space 1945	
Amount (\$) \$189.00	Office sought 7940 W Grand Parkway  Richmond, TX 77406	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Storage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/23/2025	Candidate/Officeholder name Extra Space 1945	
Amount (\$) \$189.00	Office sought 7940 W Grand Parkway  Richmond, TX 77406	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Storage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# 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: <b>65</b>		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 10/24/2025		5 Payee name Extra Space 1945			
6 Amount (\$) \$189.00		7 Payee address; City; State; Zip Code 7940 W Grand Parkway  Richmond, TX 77406			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Storage for signs	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/01/2025		Payee name Extra Space 1945			
Amount (\$) \$189.00		Payee address; City; State; Zip Code 7940 W Grand Parkway  Richmond, TX 77406			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Storage for signs	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/24/2025		Payee name Extra Space 1945			
Amount (\$) \$189.00		Payee address; City; State; Zip Code 7940 W Grand Parkway  Richmond, TX 77406			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Storage for signs.	
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: <b>63</b>	2 FILER NAME Becerra, J. Christian	3 Filer ID (Ethics Commission Filers) 00083701
4 Date 09/19/2025	5 Payee name First Watch	
6 Amount (\$) \$46.40	7 Payee address; City; State; Zip Code 9920 Highway 90A  Sugar Land, TX 77479	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/08/2025	Payee name Fort Bend County Pride	
Amount (\$) \$500.00	Payee address; City; State; Zip Code  TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 10/14/2025	Payee name Fort Bend Democratic Party	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code  TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Texas Democratic
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: <b>65</b>	2 FILER NAME Becerra, J. Christian	3 Filer ID (Ethics Commission Filers) 00083701
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4 Date 11/26/2025	5 Payee name Fort Bend Democratic Party
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6 Amount (\$) \$1,250.00	7 Payee address; City; State; Zip Code  TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/23/2025	Payee name Fort Bend Democratic Party
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Amount (\$) \$1,680.00	Payee address; City; State; Zip Code  TX
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/23/2025	Payee name Fort Bend Democratic Party
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Amount (\$) \$1,680.00	Payee address; City; State; Zip Code  TX
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texas Democratic Party - Donation
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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: <b>65</b>		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 11/03/2025		5 Payee name Fort Bend Family Promise			
6 Amount (\$) \$20.00		7 Payee address; City; State; Zip Code 4645 Cartwright Road  Missouri City , TX 77459			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/03/2025		Payee name Fort Bend Family Promise			
Amount (\$) \$20.00		Payee address; City; State; Zip Code 4645 Cartwright Road  Missouri City , TX 77459			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 11/03/2025		Payee name Fort Bend Family Promise			
Amount (\$) \$25.00		Payee address; City; State; Zip Code 4645 Cartwright Road  Missouri City , TX 77459			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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.

<b>1</b> Total pages Schedule F1: Sch: 23/65		<b>2</b> FILER NAME Becerra, J. Christian		<b>3</b> Filer ID (Ethics Commission Filers) 00083701	
<b>4</b> Date 10/09/2025		<b>5</b> Payee name Fort Bend Hope			
<b>6</b> Amount (\$) \$1,500.00		<b>7</b> Payee address; City; State; Zip Code 927 3rd Street  Rosenberg, TX 77471			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsor	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/27/2025		Payee name Fort Bend Hope			
Amount (\$) \$100.00		Payee address; City; State; Zip Code 927 3rd Street  Rosenberg, TX 77471			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/08/2025		Payee name Friends of North Rosenber			
Amount (\$) \$200.00		Payee address; City; State; Zip Code 1908 Avenue E  Rosenberg, TX 77471			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# 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: 24/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 08/22/2025		5 Payee name GCAFLCIO.ORG			
6 Amount (\$) \$500.00		7 Payee address; City: State: Zip Code 2506 Sutherland St  Houston, TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/23/2025		Payee name Garner, Rodrick (Judge)			
Amount (\$) \$40.00		Payee address; City: State: Zip Code  TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ticket for Event	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/09/2025		Payee name Gigi's Playhouse Sugar Land			
Amount (\$) \$100.00		Payee address; City: State: Zip Code 13003 Southwest Frwy  Stafford , TX 77471			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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: Sch: 25/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 11/10/2025		5 Payee name GiveButter			
6 Amount (\$) \$182.89		7 Payee address; City; State; Zip Code  TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/10/2025		Payee name Griffin, Jacquelyn			
Amount (\$) \$100.00		Payee address; City; State; Zip Code  TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 07/31/2025		Payee name H-E-B			
Amount (\$) \$18.80		Payee address; City; State; Zip Code 10161 W Grand Parkway  Richmond, TX 77407			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Water - Political Exp	
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: 26/65	2 FILER NAME Becerra, J. Christian	3 Filer ID (Ethics Commission Filers) 00083701
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4 Date 07/14/2025	5 Payee name Hall, Pastor
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6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code  TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Summer Camp
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/15/2025	Payee name Hando
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Amount (\$) \$137.00	Payee address; City; State; Zip Code 518 W 11th Street Suite 500  Houston, TX 77008
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/08/2025	Payee name Haraz Coffee
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Amount (\$) \$13.00	Payee address; City; State; Zip Code 13582 University Blvd Suite 100  Sugar Land, TX 77479
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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: 27/65	2 FILER NAME Becerra, J. Christian	3 Filer ID (Ethics Commission Filers) 00083701
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4 Date 10/31/2025	5 Payee name Haraz Coffee
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6 Amount (\$) \$7.57	7 Payee address; City; State; Zip Code 13582 University Blvd Suite 100  Sugar Land, TX 77479
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/14/2025	Payee name Haraz Coffee
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Amount (\$) \$15.59	Payee address; City; State; Zip Code 13582 University Blvd Suite 100  Sugar Land, TX 77479
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2025	Payee name Haraz Coffee
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Amount (\$) \$25.44	Payee address; City; State; Zip Code 13582 University Blvd Suite 100  Sugar Land, TX 77479
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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: 28/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 11/24/2025		5 Payee name Haraz Coffee			
6 Amount (\$) \$14.88		7 Payee address; City; State; Zip Code 13582 University Blvd Suite 100  Sugar Land, TX 77479			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/26/2025		Payee name Harland Clarke			
Amount (\$) \$27.30		Payee address; City; State; Zip Code 15955 La Cantera Parkway  San Antonio, TX 78256			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Check Order	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/12/2025		Payee name Hispanic Heritage Allowance			
Amount (\$) \$1,500.00		Payee address; City; State; Zip Code  TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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: Sch: 29/65	2 FILER NAME Becerra, J. Christian	3 Filer ID (Ethics Commission Filers) 00083701
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4 Date 07/23/2025	5 Payee name Hope Foundation
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6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code PO Box 2011  Richmond, TX 77406
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation - 5K scholarship
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/16/2025	Payee name Instacart
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Amount (\$) \$87.15	Payee address; City; State; Zip Code 92 South Park Ave  San Francisco, CA 94105
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Event
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/02/2025	Payee name invictus Strategy
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Amount (\$) \$4,750.00	Payee address; City; State; Zip Code 101 Colonial Dr  Garland, TX 75043
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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.

<b>1</b> Total pages Schedule F1: Sch: 30/65 i . :	<b>2</b> FILER NAME Becerra, J. Christian	<b>3</b> Filer ID (Ethics Commission Filers) 00083701
<b>4</b> Date 10/01/2025	<b>5</b> Payee name Invictus Strategy	
<b>6</b> Amount (\$) \$2,750.00	<b>7</b> Payee address; City; State; Zip Code 101 Colonial Dr  Garland , TX 75043	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/22/2025	Payee name Invictus Strategy	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 101 Colonial Dr  Garland , TX 75043	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/25/2025	Payee name Invictus Strategy	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 101 Colonial Dr  Garland , TX 75043	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete <u>ONLY</u> 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: 31/65 F		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 10/22/2025		5 Payee name invictus Strategy			
6 Amount (\$) \$1,750.00		7 Payee address; City; State; Zip Code 101 Colonial Dr  Garland , TX 75043			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/15/2025		Payee name Invictus Strategy			
Amount (\$) \$2,000.00		Payee address; City; State; Zip Code 101 Colonial Dr  Garland , TX 75043			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/11/2025		Payee name JN Taylor			
Amount (\$) \$50.00		Payee address; City; State; Zip Code 3522 S Mason Drive  Katy, TX 77450			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Exp	
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: 32/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 10/27/2025		5 Payee name Kancan			
6 Amount (\$) \$169.00		7 Payee address; City; State; Zip Code 3480 E 26th Street  Vernon, CA 90058			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Exp	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/11/2025		Payee name Karma Kolache			
Amount (\$) \$69.22		Payee address; City; State; Zip Code 235 Minonite Rd  Rosenberg, TX 77471			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Exp	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/04/2025		Payee name Kingdom Builders Cathedral			
Amount (\$) \$200.00		Payee address; City; State; Zip Code  TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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: Sch: 33/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 10/08/2025		5 Payee name Kingdom Builders Cathedral			
6 Amount (\$) \$250.00		7 Payee address; City; State; Zip Code  TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/25/2025		Payee name LC Floral Designs			
Amount (\$) \$500.00		Payee address; City; State; Zip Code 204 US 90  Richmond, TX 77406			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event - Florals	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/20/2025		Payee name Las Mananitas			
Amount (\$) \$43.95		Payee address; City; State; Zip Code 9825 Mason  Richmond, TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign exp - Meeting	
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: 34/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 11/24/2025		5 Payee name LePeep Restaurant			
6 Amount (\$) \$41.35		7 Payee address; City; State; Zip Code 9807 Katy Frwy  Houston, TX 77024			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/11/2025		Payee name Levine, Burt			
Amount (\$) \$300.00		Payee address; City; State; Zip Code  TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Exp	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/08/2025		Payee name Levine, Burt			
Amount (\$) \$300.00		Payee address; City; State; Zip Code  TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting	
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: 35/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 11/10/2025		5 Payee name Levine, Burt			
6 Amount (\$) \$300.00		7 Payee address; City; State; Zip Code  TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/10/2025		Payee name Levine, Burt			
Amount (\$) \$300.00		Payee address; City; State; Zip Code  TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 07/23/2025		Payee name Literacy Council of Fort Bend County			
Amount (\$) \$206.00		Payee address; City; State; Zip Code 12530 Emily Ct  Sugar Land, TX 77478			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# 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.

<b>1</b> Total pages Schedule F1: Sch: 36/65	<b>2</b> FILER NAME Becerra, J. Christian	<b>3</b> Filer ID (Ethics Commission Filers) 00083701
<b>4</b> Date 09/12/2025	<b>5</b> Payee name Literacy Council of Fort Bend County	
<b>6</b> Amount (\$) \$200.00	<b>7</b> Payee address; City; State; Zip Code 12530 Emily Ct  Sugar Land, TX 77478	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/19/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$250.00	Payee name Little, Janice (Dr.)  Payee address; City; State; Zip Code  TX	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/31/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$200.00	Payee name Lone Star Exchange Club  Payee address; City; State; Zip Code 310 Morton St  Richmond, TX 77469	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# 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.

<b>1</b> Total pages Schedule F1: Sch: 37/65		<b>2</b> FILER NAME Becerra, J. Christian		<b>3</b> Filer ID (Ethics Commission Filers) 00083701	
<b>4</b> Date 07/11/2025		<b>5</b> Payee name Los Gallitos			
<b>6</b> Amount (\$) \$167.00		<b>7</b> Payee address; City; State; Zip Code 20420 Southwest Freeway  Richmond, TX 77469			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Meeting	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/28/2025		Payee name Los Tios			
Amount (\$) \$55.00		Payee address; City; State; Zip Code  Sugar Land, TX 77478			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 09/04/2025		Payee name Lucho			
Amount (\$) \$86.00		Payee address; City; State; Zip Code 3637 W Alabama  Houston, TX 77027			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Exp	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# 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: 38/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 09/27/2025		5 Payee name Lupitas Bakery			
6 Amount (\$) \$41.83		7 Payee address; City; State; Zip Code 2600 Avenue I  Rosenberg, TX 77471			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to School	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/27/2025		Payee name Lupitas Bakery			
Amount (\$) \$189.19		Payee address; City; State; Zip Code 2600 Avenue I  Rosenberg, TX 77471			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation 1st Responders Dat	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/02/2025		Payee name M3 Graphics			
Amount (\$) \$1,022.34		Payee address; City; State; Zip Code 11730 S Wilcrest Dr  Houston, TX 77099			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs & T-Shirts	
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: 39/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 08/08/2025		5 Payee name M3 Graphics			
6 Amount (\$) \$311.29		7 Payee address; City; State; Zip Code 11730 S Wilcrest Dr  Houston, TX 77099			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing Exp	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/14/2025		Payee name M3 Graphics			
Amount (\$) \$434.00		Payee address; City; State; Zip Code 11730 S Wilcrest Dr  Houston, TX 77099			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/16/2025		Payee name M3 Graphics			
Amount (\$) \$1,431.42		Payee address; City; State; Zip Code 11730 S Wilcrest Dr  Houston, TX 77099			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tshirts	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# 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: 40/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 08/18/2025		5 Payee name MBAHouston.Org			
6 Amount (\$) \$150.00		7 Payee address; City; State; Zip Code  TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/29/2025		Payee name Martinez, Erica			
Amount (\$) \$30.00		Payee address; City; State; Zip Code  TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Tamales	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/22/2025		Payee name McKinney's			
Amount (\$) \$19.49		Payee address; City; State; Zip Code 34 CR 2751  Hughes Spring , TX 75656			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting	
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.

<b>1</b> Total pages Schedule F1: Sch: 41/65	<b>2</b> FILER NAME Becerra, J. Christian	<b>3</b> Filer ID (Ethics Commission Filers) 00083701
<b>4</b> Date 07/03/2025	<b>5</b> Payee name Memories by Elvia	
<b>6</b> Amount (\$) \$300.00	<b>7</b> Payee address; City; State; Zip Code  TX	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photos at June Event
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 09/30/2025	Payee name NAACP - Unit 6262	
Amount (\$) \$229.95	Payee address; City; State; Zip Code PO Box 1053  Missouri City , TX 77459	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 12/17/2025	Payee name NAACP - Unit 6262	
Amount (\$) \$560.00	Payee address; City; State; Zip Code PO Box 1053  Missouri City , TX 77459	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete <u>ONLY</u> 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: 42/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 07/03/2025		5 Payee name Navarro, Millie			
6 Amount (\$) \$1,500.00		7 Payee address; City; State; Zip Code  TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Exp - June Event	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/27/2025		Payee name Omni Houston Valet			
Amount (\$) \$25.00		Payee address; City; State; Zip Code Riverway Dr  Houston , TX 77056			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/10/2025		Payee name Owen, Melissa			
Amount (\$) \$150.00		Payee address; City; State; Zip Code  TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation - Toys for Students	
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: 43/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 10/01/2025		5 Payee name P.F. Chang			
6 Amount (\$) \$66.89		7 Payee address; City; State; Zip Code 2120 Lone Star Dr  Sugar Land, TX 77478			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/29/2025		Payee name Pappasitos			
Amount (\$) \$90.00		Payee address; City; State; Zip Code 13750 SW Freeway  Sugar Land, TX 77479			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/06/2025		Payee name Penny Quarter			
Amount (\$) \$62.64		Payee address; City; State; Zip Code 1424 Westheimer  Houston, TX 77006			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting	
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: 44/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 07/03/2025		5 Payee name Perfect Touch			
6 Amount (\$) \$862.50		7 Payee address; City; State; Zip Code 4709 SH 36 Unit 8  Rosenberg, TX 77471			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Decoration at June event	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/22/2025		Payee name Pickens, Rose			
Amount (\$) \$250.00		Payee address; City; State; Zip Code  TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation - School	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/19/2025		Payee name Pier 36			
Amount (\$) \$50.00		Payee address; City; State; Zip Code 1410 E Hwy 90A #200  Richmond, TX 77406			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting	
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: 45/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 09/26/2025		5 Payee name Pier 36			
6 Amount (\$) \$37.00		7 Payee address; City; State; Zip Code 1410 E Hwy 90A #200  Richmond, TX 77406			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/17/2025		Payee name ProPark			
Amount (\$) \$11.25		Payee address; City; State; Zip Code 1001 McKinney Suite 450 Houston, TX 77002			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/03/2025		Payee name Quinn, Kevin			
Amount (\$) \$750.00		Payee address; City; State; Zip Code  TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video	
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: 46/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 08/18/2025		5 Payee name Raise-365			
6 Amount (\$) \$54.34		7 Payee address; City; State; Zip Code PO Box 892  Needville, TX 77461			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation - Education	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/03/2025		Payee name Reed , Millie			
Amount (\$) \$275.00		Payee address; City; State; Zip Code  TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 09/25/2025		Payee name Rolling Dough			
Amount (\$) \$35.09		Payee address; City; State; Zip Code 1827 Richmond Pkwy,  Richmond, TX 77469			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting	
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: 47/65	2 FILER NAME Becerra, J. Christian	3 Filer ID (Ethics Commission Filers) 00083701
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4 Date 07/31/2025	5 Payee name Rosenberg National Little League
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6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 3701 Fountain Drive  Rosenberg, TX 77471
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/15/2025	Payee name Rosenberg National Little League
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Amount (\$) \$350.00	Payee address; City; State; Zip Code 3701 Fountain Drive  Rosenberg, TX 77471
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/03/2025	Payee name Royal G Photo Booth
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Amount (\$) \$400.00	Payee address; City; State; Zip Code 5111 OakBriar Ln  Rosenberg, TX 77469
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photo Booth at June Event
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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: 48/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 07/02/2025		5 Payee name Safari Texas			
6 Amount (\$) \$5,315.31		7 Payee address; City; State; Zip Code 11627 FM 1464  Richmond, TX 77407			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense June Event - Kickoff	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/10/2025		Payee name Safari Texas			
Amount (\$) \$48.00		Payee address; City; State; Zip Code 11627 FM 1464  Richmond, TX 77407			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual State of Schools	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/24/2025		Payee name Safari Texas			
Amount (\$) \$18.00		Payee address; City; State; Zip Code 11627 FM 1464  Richmond, TX 77407			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event	
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 49/65	2 FILER NAME Becerra, J. Christian	3 Filer ID (Ethics Commission Filers) 00083701
4 Date 09/25/2025	5 Payee name Sam's Club	
6 Amount (\$) \$44.31	7 Payee address; City; State; Zip Code  TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sam's purchase to Donate to School
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 09/03/2025	Payee name Senior Pepe's Cocina	
Amount (\$) \$41.70	Payee address; City; State; Zip Code 17101 W Grand Parkway Suite 100  Sugar Land , TX 77479	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 09/08/2025	Payee name Senior Pepe's Cocina	
Amount (\$) \$77.98	Payee address; City; State; Zip Code 17101 W Grand Parkway Suite 100  Sugar Land , TX 77479	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting
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: 50/65 :		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 11/18/2025		5 Payee name Shipley			
6 Amount (\$) \$30.41		7 Payee address; City; State; Zip Code 10815 West Grand Pkwy Suite 100  Richmond, TX 77407			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/15/2025		Payee name Shipley			
Amount (\$) \$126.48		Payee address; City; State; Zip Code 10815 West Grand Pkwy Suite 100  Richmond, TX 77407			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Exp	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/28/2025		Payee name Siddique, Anudeh			
Amount (\$) \$500.00		Payee address; City; State; Zip Code 2413 Edgewood Dr.  Missouri City , TX 77459			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Exp	
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: 51/65	2 FILER NAME Becerra, J. Christian	3 Filer ID (Ethics Commission Filers) 00083701
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4 Date 09/05/2025	5 Payee name Smith , Ashley
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6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code  TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Jackson Elementary School
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/05/2025	Payee name Smith , Ashley
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Amount (\$) \$150.00	Payee address; City; State; Zip Code  TX
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation - Jackson Elementary School
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/14/2025	Payee name Soliz Casa de Taco
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Amount (\$) \$57.76	Payee address; City; State; Zip Code 303 Dulles Ave  Stafford , TX 77477
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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: 52/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 11/07/2025		5 Payee name Soliz Casa de Taco			
6 Amount (\$) \$61.86		7 Payee address; City; State; Zip Code 303 Dulles Ave  Stafford, TX 77477			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/22/2025		Payee name Soliz Casa de Taco			
Amount (\$) \$61.55		Payee address; City; State; Zip Code 303 Dulles Ave  Stafford, TX 77477			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/20/2025		Payee name Spec's			
Amount (\$) \$63.78		Payee address; City; State; Zip Code 4102 FM 762  Richmond, TX 77469			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Event	
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: 53/65 :		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 07/14/2025		5 Payee name SquareSpace			
6 Amount (\$) \$18.19		7 Payee address; City; State; Zip Code 8 Clarkston  New York, NY 10013			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Exp	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/28/2025		Payee name SquareSpace			
Amount (\$) \$38.38		Payee address; City; State; Zip Code 8 Clarkston  New York, NY 10013			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/08/2025		Payee name SquareSpace			
Amount (\$) \$10.66		Payee address; City; State; Zip Code 8 Clarkston  New York, NY 10013			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website	
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.

<b>1</b> Total pages Schedule F1: Sch: 54/65	<b>2</b> FILER NAME Becerra, J. Christian	<b>3</b> Filer ID (Ethics Commission Filers) 00083701
<b>4</b> Date 08/12/2025	<b>5</b> Payee name SquareSpace	
<b>6</b> Amount (\$) \$18.19	<b>7</b> Payee address; City; State; Zip Code 8 Clarkston  New York, NY 10013	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought      Office held
Date 08/26/2025	Payee name SquareSpace	
Amount (\$) \$38.38	Payee address; City; State; Zip Code 8 Clarkston  New York, NY 10013	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought      Office held
Date 09/08/2025	Payee name SquareSpace	
Amount (\$) \$10.66	Payee address; City; State; Zip Code 8 Clarkston  New York, NY 10013	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website
Complete <u>ONLY</u> 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.

<b>1</b> Total pages Schedule F1: Sch: 55/65		<b>2</b> FILER NAME Becerra, J. Christian		<b>3</b> Filer ID (Ethics Commission Filers) 00083701	
<b>4</b> Date 09/12/2025		<b>5</b> Payee name SquareSpace			
<b>6</b> Amount (\$) \$18.19		<b>7</b> Payee address; City; State; Zip Code 8 Clarkston  New York, NY 10013			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 09/26/2025		Payee name SquareSpace			
Amount (\$) \$38.38		Payee address; City; State; Zip Code 8 Clarkston  New York, NY 10013			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/14/2025		Payee name SquareSpace			
Amount (\$) \$18.19		Payee address; City; State; Zip Code 8 Clarkston  New York, NY 10013			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# 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: 56/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 10/27/2025		5 Payee name SquareSpace			
6 Amount (\$) \$38.38		7 Payee address; City; State; Zip Code 8 Clarkston  New York, NY 10013			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/10/2025		Payee name SquareSpace			
Amount (\$) \$10.66		Payee address; City; State; Zip Code 8 Clarkston  New York, NY 10013			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/12/2025		Payee name SquareSpace			
Amount (\$) \$18.19		Payee address; City; State; Zip Code 8 Clarkston  New York, NY 10013			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website	
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: 57/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 10/08/2025		5 Payee name SquareSpace			
6 Amount (\$) \$10.66		7 Payee address; City; State; Zip Code 8 Clarkston  New York, NY 10013			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/31/2025		Payee name Stafford MSD			
Amount (\$) \$250.00		Payee address; City; State; Zip Code 1625 Staffordshire Rd  Stafford, TX 77477			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation - Sponsorship Golf	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/22/2025		Payee name Starbucks Coffee			
Amount (\$) \$6.79		Payee address; City; State; Zip Code 28421 Southwest Frwy  Rosenberg, TX 77469			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting	
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: 58/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 11/04/2025		5 Payee name Starbucks Coffee			
6 Amount (\$) \$6.90		7 Payee address; City; State; Zip Code 28421 Southwest Frwy  Rosenberg, TX 77469			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/31/2025		Payee name Stripe			
Amount (\$) \$95.15		Payee address; City; State; Zip Code 354 Oyster Point Blvd  San Francisco , CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing and Platform Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/31/2025		Payee name Stripe			
Amount (\$) \$97.60		Payee address; City; State; Zip Code 354 Oyster Point Blvd  San Francisco , CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing and Platform Fee	
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: 59/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 09/30/2025		5 Payee name Stripe			
6 Amount (\$) \$70.05		7 Payee address; City; State; Zip Code 354 Oyster Point Blvd  San Francisco , CA 94080			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing and Platform Fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/31/2025		Payee name Stripe			
Amount (\$) \$537.65		Payee address; City; State; Zip Code 354 Oyster Point Blvd  San Francisco , CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing and Platform Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/30/2025		Payee name Stripe			
Amount (\$) \$47.43		Payee address; City; State; Zip Code 354 Oyster Point Blvd  San Francisco , CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing and Platform Fee	
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: 60/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 12/31/2025		5 Payee name Stripe			
6 Amount (\$) \$20.75		7 Payee address; City; State; Zip Code 354 Oyster Point Blvd  San Francisco , CA 94080			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing and Platform Fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/01/2025		Payee name Stripe			
Amount (\$) \$85.40		Payee address; City; State; Zip Code 354 Oyster Point Blvd  San Francisco , CA 94080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing & Platform Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/21/2025		Payee name Summer Moon			
Amount (\$) \$12.70		Payee address; City; State; Zip Code  TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Coffee	
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: 61/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 12/29/2025		5 Payee name Sushi Hana			
6 Amount (\$) \$100.21		7 Payee address; City; State; Zip Code 5610 W Grand Parkway  Richmond, TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/15/2025		Payee name Sweet Paris			
Amount (\$) \$12.69		Payee address; City; State; Zip Code 1511 City Walk  Sugar Land, TX 77478			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/11/2025		Payee name TDR Cookers			
Amount (\$) \$500.00		Payee address; City; State; Zip Code  TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FT Bend County Fair BBQ - 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: Sch: 62/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 11/14/2025		5 Payee name Terry High School			
6 Amount (\$) \$250.00		7 Payee address; City; State; Zip Code 5500 Avenue N  Rosenberg, TX 77471			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Terry HS ProGrad	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/14/2025		Payee name Texas Proper Dry Goods & Interior			
Amount (\$) \$75.76		Payee address; City; State; Zip Code 5503 FM 359, Ste B  Richmond, TX 77406			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Exp	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/21/2025		Payee name Texas Proper Dry Goods & Interior			
Amount (\$) \$50.00		Payee address; City; State; Zip Code 5503 FM 359, Ste B  Richmond, TX 77406			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Exp	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# 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: 63/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 11/18/2025		5 Payee name Thomas, Felicia Jane			
6 Amount (\$) \$200.00		7 Payee address; City; State; Zip Code  TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/11/2025		Payee name Tisac, Edwin			
Amount (\$) \$20.00		Payee address; City; State; Zip Code  TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 09/22/2025		Payee name Tornado Taco			
Amount (\$) \$15.87		Payee address; City; State; Zip Code 2461 FM 1092  Missouri City, TX 77459			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting	
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: 64/65		2 FILER NAME Becerra, J. Christian		3 Filer ID (Ethics Commission Filers) 00083701	
4 Date 07/04/2025		5 Payee name Villarreal, Ralph			
6 Amount (\$) \$1,750.00		7 Payee address; City; State; Zip Code  TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Kickoff Food	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/07/2025		Payee name Wallace, Toni			
Amount (\$) \$38.50		Payee address; City; State; Zip Code  TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Exp	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/07/2025		Payee name Wang, Antony			
Amount (\$) \$1,750.00		Payee address; City; State; Zip Code 2822 Oakland Dr.  Richmond, TX 77469			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Maintenance	
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: 65/65	2 FILER NAME Becerra, J. Christian	3 Filer ID (Ethics Commission Filers) 00083701
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4 Date 11/10/2025	5 Payee name Willis, Kimberly
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6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code  TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation - Church
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/25/2025	Payee name Zepeda, Mary
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Amount (\$) \$300.00	Payee address; City; State; Zip Code  TX
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation School Lunches
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

**SCHEDULE K**

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: <b>1</b>
2 FILER NAME <b>Becerra, J Christian</b>		3 Filer ID (Ethics Commission Filers) <b>83701</b>
4 Date  <b>10/02/2025</b>	5 Name of person from whom amount is received <b>Academy</b>	8 Amount (\$)  <b>27.05</b>
	6 Address of person from whom amount is received; City: State: Zip Code <b>Richmond TX 77469</b>	
7 Purpose for which amount is received <b>Refund</b>		Check if political contribution returned to filer
Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City: State: Zip Code	
	Purpose for which amount is received	Check if political contribution returned to filer
Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City: State: Zip Code	
	Purpose for which amount is received	Check if political contribution returned to filer
Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City: State: Zip Code	
	Purpose for which amount is received	Check if political contribution returned to filer

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**



## AFFIDAVIT FOR CANDIDATE OR OFFICEHOLDER: ELECTRONIC FILING EXEMPTION

*An exemption affidavit must be submitted with each paper report.*

*Beginning on January 1, 2026, a candidate or officeholder who has accepted more than \$34,890 in political contributions or made more than \$34,890 in political expenditures in any calendar year must file all subsequent reports electronically.*

OFFICE USE ONLY	
Date Received	
Date Hand-delivered or Date Postmarked	
Receipt #	Amount \$
Date Processed	
Date Imaged	

Filer name <u>J Christian Becerra</u>	Filer ID # <u>83701</u>
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1. I swear or affirm that I have not accepted more than \$34,890 in political contributions or made more than \$34,890 in political expenditures in a calendar year.
2. I further swear or affirm that I do not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
3. I further swear or affirm that no person acting as my agent or consultant, and no person with whom I contract, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
4. I further swear or affirm that I understand that I am required to file my campaign finance reports electronically if I, my agent or consultant, or a person with whom I contract exceeds \$34,890 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
5. I am filing this affidavit with the FBC Electoral report due on 1/15/26.  
I understand that this affidavit is required to be filed with each campaign finance report for which I am claiming an exemption from electronic filing.

**Please complete either option below:**

**(1) Affidavit**

NOTARY STAMP/SEAL

\_\_\_\_\_  
Signature of Filer

Sworn to and subscribed before me by \_\_\_\_\_ 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

OR

**(2) Unsworn Declaration**

My name is J Christian Becerra, and my date of birth is 06/29/1970  
My address is 4311 Bend Apple Pl. Richmond TX 77406 US  
(street) (city) (state) (zip code) (country)  
Executed in Fort Bend County, State of Texas, on the 15 day of January, 20 26  
(month) (year)

\_\_\_\_\_  
Signature of Filer (Declarant)

**FILERS WHO ARE EXEMPT FROM THE ELECTRONIC FILING REQUIREMENT  
ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER**