



# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME <u>J Christian Becerra</u>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 22,975.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 16,208.02
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 9,164.62
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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, USA.

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

Executed in Fort Bend County, State of Texas, on the 2 day of February, 2026.

(month) (year)

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

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME <b>J Christian Becerra</b>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 22,975.00
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	\$ 16,208.02
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.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <b>J Christian Becerra</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>01/05/2026</b>	5 Full name of contributor out-of-state PAC (ID#: _____) <b>Mark Melchor</b> 6 Contributor address; City; State; Zip Code <b>20607 Cactus Lake Ln Houston TX 77407</b>	7 Amount of contribution (\$) <b>250.00</b>
8 Principal occupation / Job title (See Instructions) <b>Attorney</b>		9 Employer (See Instructions)
Date <b>01/08/2026</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Sgayjat Maredia</b> Contributor address; City; State; Zip Code <b>111842 Wilcrest Dr Houston TX 77031</b>	Amount of contribution (\$) <b>2,500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>01/10/2026</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Syed Razzaqi</b> Contributor address; City; State; Zip Code <b>11511 Haley Hollow Richmond TX 77407</b>	Amount of contribution (\$) <b>1,000.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>01/10/2026</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Syed N. Hassan</b> Contributor address; City; State; Zip Code <b>15018 Avalon Ave Clearwater FL 33760</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME J Christian Becerra		3 Filer ID (Ethics Commission Filers)
4 Date 1/10/26	5 Full name of contributor out-of-state PAC (ID#: _____) Tahir Bhatti	7 Amount of contribution (\$) 2100.-
	6 Contributor address; City; State; Zip Code 9703 Richmond Ave Houston TX 77042	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions)
Date 1/12/26	Full name of contributor out-of-state PAC (ID#: _____) Karl Schultz	Amount of contribution (\$) 250.-
	Contributor address; City; State; Zip Code 918 Mockingbird Way Sugarland TX 77478	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 1/12/26	Full name of contributor out-of-state PAC (ID#: _____) Michele Beard	Amount of contribution (\$) 25.-
	Contributor address; City; State; Zip Code 8711 Saratoga Dr Sugarland TX 77479	
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) LAMAR
Date 1/14/26	Full name of contributor out-of-state PAC (ID#: _____) Wendle Smith	Amount of contribution (\$) 1000.-
	Contributor address; City; State; Zip Code 7322 SW Frey 2010 Houston TX 77074	
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <b>J Christian Becerra</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>1/17/26</b>	5 Full name of contributor out-of-state PAC (ID#: _____) <b>Hakim Nachlab</b>	7 Amount of contribution (\$) <b>50.-</b>
	6 Contributor address; City; State; Zip Code <b>6300 Richmond 302 Houston TX 77057</b>	
8 Principal occupation / Job title (See Instructions) <b>FINANCE</b>		9 Employer (See Instructions)
Date <b>1/18/26</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>MARUTHI DEVARAKONDA</b>	Amount of contribution (\$) <b>500.-</b>
	Contributor address; City; State; Zip Code <b>3315 Reston Landing Katy TX 77494</b>	
Principal occupation / Job title (See Instructions) <b>Director</b>		Employer (See Instructions) <b>Baker Hugh</b>
Date	Full name of contributor out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME J Christian Becerra		3 Filer ID (Ethics Commission Filers)
4 Date 1/5/2026	5 Full name of contributor Johnny Carter out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) 200.00
6 Contributor address; City; State; Zip Code 2134 Canyon Crest Dr., Sugar Land TX 77479		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 1/11/26	Full name of contributor Syed Salman Razzagji out-of-state PAC (ID#: _____)	Amount of contribution (\$) 1000.00
Contributor address; City; State; Zip Code 6018 Creekridge Ct., Minnetonka, MN 55345		
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Self
Date 1/14/26	Full name of contributor Banister & Miller PLLC out-of-state PAC (ID#: _____)	Amount of contribution (\$) 5000.00
Contributor address; City; State; Zip Code 23410 Grand Reserve Dr. Ste 501 Katy, TX 77494		
Principal occupation / Job title (See Instructions) LAW FIRM		Employer (See Instructions)
Date 1/9/26	Full name of contributor Fry LAW FIRM PC out-of-state PAC (ID#: _____)	Amount of contribution (\$) 2500.00
Contributor address; City; State; Zip Code 1119 OAK CREEK DR Richmond, TX 77469		
Principal occupation / Job title (See Instructions) LAW FIRM		Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <b>J Christian Becerra</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>11/01/20</b>	5 Full name of contributor out-of-state PAC (ID#: _____) <b>SYED S. AHMED</b>	7 Amount of contribution (\$)  <b>200.00</b>
	6 Contributor address; City; State; Zip Code <b>10307 Bellago Ln. Richmond, TX 77407</b>	
8 Principal occupation / Job title (See Instructions) <b>Entrepreneur</b>		9 Employer (See Instructions) <b>Self</b>
Date <b>11/01/20</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Pervez Sultan</b>	Amount of contribution (\$)  <b>1000.00</b>
	Contributor address; City; State; Zip Code <b>16631 Decan Dr. Sugarland, TX 77498</b>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>11/01/20</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Sohail Syed</b>	Amount of contribution (\$)  <b>2000.00</b>
	Contributor address; City; State; Zip Code <b>5623 Grand Floval Blvd. Houston, TX 77041</b>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) <b>Self</b>
Date <b>11/01/20</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Mahaamad Malik</b>	Amount of contribution (\$)  <b>2000.00</b>
	Contributor address; City; State; Zip Code <b>2419 Sady Point Dr. Richmond, TX 77406</b>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) <b>Self</b>
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME J Christian Becerra		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#: _____) Fayyaz Bobby Sarwar	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 4118 Windy Orchard Dr.		
8 Principal occupation / Job title (See Instructions) Advisor		9 Employer (See Instructions) Sahbi Inc.
Date 11/16/26	Full name of contributor out-of-state PAC (ID#: _____) Nataliya Gamez	Amount of contribution (\$) 300.00
Contributor address; City; State; Zip Code 4201 Main St. Houston TX 77002 ste 200		
Principal occupation / Job title (See Instructions) Atty		Employer (See Instructions) Self
Date	Full name of contributor out-of-state PAC (ID#: _____) <del>Lauralise Francis - Besminster</del>	Amount of contribution (\$)
Contributor address; City; State; Zip Code <del>13603 Greenwood Dr. Sugar Land TX 77498</del>		
Principal occupation / Job title (See Instructions) <del>Comp Tech</del>		Employer (See Instructions)
Date 11/6/26	Full name of contributor out-of-state PAC (ID#: _____) Amy Tomlinson	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1911 La Magnolia Dr. Houston TX 77023		
Principal occupation / Job title (See Instructions) A Homog		Employer (See Instructions) Self
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME J Christian Becerra	3 Filer ID (Ethics Commission Filers)
4 Date 1/1/26	5 Payee name Felicia J. Thomas	
6 Amount (\$) 500.-	7 Payee address; City; State; Zip Code 311 Raleigh Row Missouri City TX 77459 <small>Check if individual's residence address.</small>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Exp	(b) Description Consulting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 1/4/26	Payee name CSPAC LLC	
Amount (\$) 500.-	Payee address; City; State; Zip Code 11418 Oak Lake Ridge Ct Sugar Land TX 77498 <small>Check if individual's residence address.</small>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Exp	Description Consulting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 1/5/26	Payee name M3 Graphics	
Amount (\$) 4490.08	Payee address; City; State; Zip Code 11730 S. Wilcrest Houston TX 77099 <small>Check if individual's residence address.</small>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing	Description YARD Sign
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME J Christian Becerra	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 1/9/26	<b>5</b> Payee name Theresa Collins	
<b>6</b> Amount (\$) 320.-	<b>7</b> Payee address; City; State; Zip Code  Check if individual's residence address.	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Donation	<b>(b)</b> Description Donation Tax Give Away
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 1/22/26	Payee name Act Blue	
Amount (\$) 357.50	Payee address; City; State; Zip Code PO Box 441146 Somerville MA 02144 Check if individual's residence address.	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description Fees
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 1/6/26	Payee name Starbucks	
Amount (\$) 10.42	Payee address; City; State; Zip Code 28421 SW Freeway Rosenberg Tx 77469 Check if individual's residence address.	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) FOOD BEV EXP	Description Campaign Meeting
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME J Christian Becerra	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 1/7/26	<b>5</b> Payee name DAMS	
<b>6</b> Amount (\$) 204.57	<b>7</b> Payee address; City; State; Zip Code 22402 Bellaire Blvd Richmond TX 77401 <small>Check if individual's residence address.</small>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Campaign Exp	<b>(b)</b> Description Supplies
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 1/13/26	Payee name StarBuck	
Amount (\$) 9.90	Payee address; City; State; Zip Code 28421 SW Fray Rosenberg TX 77469 <small>Check if individual's residence address.</small>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food Bev Exp	Description Campaign Meeting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 1/14/26	Payee name Burt Levine	
Amount (\$) 300.-	Payee address; City; State; Zip Code  TX <small>Check if individual's residence address.</small>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Campaign Exp	Description Campaign Exp
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME J Christian Becerra	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 1/14/26	<b>5</b> Payee name Zlite Change	
<b>6</b> Amount (\$) 7761.-	<b>7</b> Payee address; City; State; Zip Code 5445 Alameda Rd Hou Tx 77004 <small>Check if individual's residence address.</small>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Exp	<b>(b)</b> Description Campaign Exp
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 1/15/26	Payee name Angela C. Vasquez	
Amount (\$) 78.75	Payee address; City; State; Zip Code  <small>Check if individual's residence address.</small>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Meals on wheels
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 1/20/26	Payee name Starbuck	
Amount (\$) 12.04	Payee address; City; State; Zip Code 28421 SW Freeway Roseberg Tx 77469 <small>Check if individual's residence address.</small>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) FOOD BEV Exp	Description Campaign Meeting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME J Christian Becerra	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 1/20/26	<b>5</b> Payee name TOWANA BRYANT	
<b>6</b> Amount (\$) 250.-	<b>7</b> Payee address; City; State; Zip Code	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Campaign Exp	<b>(b)</b> Description Campaign Exp
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>
Date 1/21/26	Payee name AAA Capital Group	
Amount (\$) 1397.-	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Campaign Exp	Description Campaign Exp
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>
Date 1/21/26	Payee name Dtripe	
Amount (\$) 22.20	Payee address; City; State; Zip Code 354 Dyster Point Blvd SAN FRANCISCO CA 94080	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description Fees
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>

**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>JChristian Becerra</u>	Filer ID #
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- 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.
- 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.
- 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.
- 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.
- I am filing this affidavit with the FED Election Office report due on \_\_\_\_\_. 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 JChristian Becerra, and my date of birth is 6/24/1970.

My address is 4311 FORD APPLE PLACE, RICHMOND, TX, 77406, USA  
(street) (city) (state) (zip code) (country)

Executed in Fort Bend County, State of TX, on the 2 day of February, 2026  
(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**