JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed: 11

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR: Mr. | FIRST: Stephen | MI: R.
NICKNAME | LAST: Longoria | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
54 Sugar Creek Ctr., Suite 204
Sugar Land, TX 77478
☐ Change of Address

5 CANDIDATE/ OFFICEHOLDER PHONE
AREA CODE: (281) PHONE NUMBER: 743-2103 | EXTENSION

6 CAMPAIGN TREASURER NAME
MS / MRS / MR: Mr. | FIRST: Sardar | MI: Q.
NICKNAME | LAST: Imam | SUFFIX

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
19 Saint Christopher Ct.
Sugar Land, TX 77479

8 CAMPAIGN TREASURER PHONE
AREA CODE: (281) PHONE NUMBER: 467-9545 | EXTENSION

9 REPORT TYPE
[ ] January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (Officeholder Only)
[X] July 15 ☐ 8th day before election ☐ Exceeded Modified Reporting Limit ☐ Final Report (Attach C/OH - FR)

10 PERIOD COVERED
Month / Day / Year: 01 / 01 / 2026 THROUGH 06 / 30 / 2026

11 ELECTION
ELECTION DATE: Month 11 / Day 03 / Year 26
ELECTION TYPE: ☐ Primary ☐ Runoff ☐ Other Description _____ [X] General ☐ Special

12 OFFICE
OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)
Judge - Fort Bend County Court at Law No. 6

14 NOTICE FROM POLITICAL COMMITTEE(S)
☐ Additional Pages

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. *THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT.* CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE: ☐ GENERAL ☐ SPECIFIC
COMMITTEE NAME
COMMITTEE ADDRESS
COMMITTEE CAMPAIGN TREASURER NAME
COMMITTEE CAMPAIGN TREASURER ADDRESS

OFFICE USE ONLY
Date Received
RECVD VIA EMAIL 07/15/2026
Date Hand-delivered or Date Postmarked
Receipt # | Amount $
Date Processed
Date Imaged

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 2

15 JC/OH NAME	16 Filer ID (Ethics Commission Filers)
Stephen R. Longoria	

17 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	$ 0
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 17,000
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$ 0
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 6,361.29
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 14,695.04
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0

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/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 STEPHEN LONGORIA, and my date of birth is 11/22/1965.

My address is 9414 PLAZA TERRACE DR, MISSOURI CITY, TX, 77459, _____.
(street) (city) (state) (zip code) (country)

Executed in FORT BEND County, State of TEXAS, on the 15th day of JULY (month), 2026 (year).

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - JC/OH

FORM JC/OH
COVER SHEET PG 3

19 FILER NAME	20 Filer ID (Ethics Commission Filers)
Stephen R. Longoria	

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	[X]	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 17,000
2.	[ ]	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$
3.	[ ]	SCHEDULE B: PLEDGED CONTRIBUTIONS	$
4.	[ ]	SCHEDULE E: LOANS	$
5.	[X]	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 6,361.29
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 (JUDICIAL)

SCHEDULE A(J)1

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 A(J)1: 1 of 7

2 FILER NAME: Stephen R. Longoria

3 Filer ID (Ethics Commission Filers):

4 Date	**5** Full name of contributor ☐ out-of-state PAC ID#:	**7** Amount of contribution ($)
01-16-26	Betty Jean Longoria **6** Contributor address; City; State; Zip Code: 8210 Campodolcino, Corpus Christy, TX 78414	300

8 Contributor's principal occupation	**9** Contributor's job title
Retired	
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	Full name of contributor ☐ out-of-state PAC ID#:	Amount of contribution ($)
01-16-26	Travis Lemos Contributor address; City; State; Zip Code: 2411 Band Rd., Rosenberg TX 77471	900

Contributor's principal occupation	Contributor's job title
Caterer	
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	Full name of contributor ☐ out-of-state PAC ID#:	Amount of contribution ($)
1-26-26	Joelynn Clouser Contributor address; City; State: Zip Code: 3006 Sadie Ct., Missouri City, TX 77459	50

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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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 A(J)1: 2 of 7

2 FILER NAME: Stephen R. Longoria

3 Filer ID (Ethics Commission Filers):

4 Date	**5** Full name of contributor ☐ out-of-state PAC ID#:	**7** Amount of contribution ($)
04-27-26	Mike and Sarah Diaz **6** Contributor address; City; State; Zip Code 1332 Cascade Falls, Friendswood, TX	1,000

8 Contributor's principal occupation	**9** Contributor's job title
Attorney	
10 Contributor's employer/law firm	**11** Law firm of contributor's spouse (if any)
Law Office of Michael C. Diaz PLLC	

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

Date	Full name of contributor ☐ out-of-state PAC ID#:	Amount of contribution ($)
04-27-26	Travis and Linda Lemos Contributor address; City; State; Zip Code 2411 Band Road, Rosenberg, TX 77471	1,000

Contributor's principal occupation	Contributor's job title
Caterer	
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	Full name of contributor ☐ out-of-state PAC ID#:	Amount of contribution ($)
04-27-26	Lucio and Lydia Almazan Contributor address; City; State: Zip Code 1201 Winston Dr., Richmond, TX 77469	500

Contributor's principal occupation	Contributor's job title
Electrician	
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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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 A(J)1: 3 of 7

2 FILER NAME: Stephen R. Longoria

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC ID#:	7 Amount of contribution ($)
04-27-26	Annette and Jay Jimenez 6 Contributor address; City; State; Zip Code 18111 William Elm Dr., Cypress, TX 77433	1,000

8 Contributor's principal occupation	9 Contributor's job title
HR Coordinator	
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	Full name of contributor ☐ out-of-state PAC ID#:	Amount of contribution ($)
04-27-26	James and Piipar Rivera Contributor address; City; State; Zip Code 28318 Vineyard Terrace Ln., Fulshear, TX 77441	1,000

Contributor's principal occupation	Contributor's job title
Attorney	
Contributor's employer/law firm	Law firm of contributor's spouse (if any)
Law Office of James Rivera	

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

Date	Full name of contributor ☐ out-of-state PAC ID#:	Amount of contribution ($)
04-27-26	Angela Vasquez Contributor address; City; State: Zip Code 1126 Wood Fern Dr., Sugar Land, TX 77479	1,000

Contributor's principal occupation	Contributor's job title
Community Relations	
Contributor's employer/law firm	Law firm of contributor's spouse (if any)
Amaro Law Firm	

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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 A(J)1: 4 of 7

2 FILER NAME: Stephen R. Longoria

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC ID#:	7 Amount of contribution ($)
04-27-26	Frank Yeverino 6 Contributor address; City; State; Zip Code 1119 Oak Creek Dr., Richmond, TX 77469	2,500

8 Contributor's principal occupation	9 Contributor's job title
Attorney	
10 Contributor's employer/law firm	**11** Law firm of contributor's spouse (if any)
Law Office of Frank Yeverino	

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

Date	Full name of contributor ☐ out-of-state PAC ID#:	Amount of contribution ($)
04-27-26	Daniel and Vanessa Lee Contributor address; City; State; Zip Code 23430 Fairbranch Dr., Katy, TX 77494	1,000

Contributor's principal occupation	Contributor's job title
Attorney	
Contributor's employer/law firm	Law firm of contributor's spouse (if any)
C.Y. Lee Law Group, PLLC	

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

Date	Full name of contributor ☐ out-of-state PAC ID#:	Amount of contribution ($)
05-01-26	Christian Bacerra Contributor address; City; State: Zip Code 1422 Eugene Heimann Cir., Richmond, TX 77469	1,000

Contributor's principal occupation	Contributor's job title
Judge	
Contributor's employer/law firm	Law firm of contributor's spouse (if any)
Fort Bend County	

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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 A(J)1: 5 of 7

2 FILER NAME: Stephen R. Longoria

3 Filer ID (Ethics Commission Filers)

4 Date	**5** Full name of contributor ☐ out-of-state PAC ID#:_____)	**7** Amount of contribution ($)
05-15-26	Robert Franks **6** Contributor address; City; State; Zip Code 512 S. 11th St., Richmond, TX 77469	1,000

8 Contributor's principal occupation	**9** Contributor's job title
Attorney	
10 Contributor's employer/law firm	**11** Law firm of contributor's spouse (if any)
Law Office of Robert Franks	

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

Date	Full name of contributor ☐ out-of-state PAC ID#:_____)	Amount of contribution ($)
05-15-26	Betty Jean Longoria Contributor address; City; State; Zip Code 8210 Campodolcino, Corpus Christi, TX 78414	1,000

Contributor's principal occupation	Contributor's job title
Retired	
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	Full name of contributor ☐ out-of-state PAC ID#:_____)	Amount of contribution ($)
06-22-26	Margaret Banales Contributor address; City; State: Zip Code 3134 Seven Trees Dr., Corpus Christi, TX 78410	50

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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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 A(J)1: 6 of 7

2 FILER NAME: Stephen R. Longoria

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC ID#:	7 Amount of contribution ($)
06-22-26	Betty Jean Longoria 6 Contributor address; City; State; Zip Code 8210 Campodolcino, Corpus Christi, TX 78414	500

8 Contributor's principal occupation: Retired

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	Full name of contributor ☐ out-of-state PAC ID#:	Amount of contribution ($)
06-22-26	Gasper Mir Contributor address; City; State; Zip Code 2010 Candle Light Pl., Houston, TX 77018	500

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	Full name of contributor ☐ out-of-state PAC ID#:	Amount of contribution ($)
04-13-26	Betty Jean Longoria Contributor address; City; State; Zip Code 8210 Campodolcino, Corpus Christi, TX 78414	2,000

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):

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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 A(J)1: 7 of 7

2 FILER NAME: Stephen R. Longoria

3 Filer ID (Ethics Commission Filers)

4 Date: 04-13-26

5 Full name of contributor ☐ out-of-state PAC ID#:_____): Stephen R. Longoria

6 Contributor address; City; State; Zip Code: 9414 Plaza Terrace Dr., Missouri City, TX 77459

7 Amount of contribution ($): 700

8 Contributor's principal occupation: Attorney

9 Contributor's job title

10 Contributor's employer/law firm: Law Office of Stephen R. Longoria

11 Law firm of contributor's spouse (if any)

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

Date

Full name of contributor ☐ out-of-state PAC ID#:_____)

Contributor address; City; State; Zip Code

Amount of contribution ($)

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

Full name of contributor ☐ out-of-state PAC ID#:_____)

Contributor address; City; State; Zip Code

Amount of contribution ($)

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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
1 of 5	Stephen R. Longoria	

4 Date 01-12-26

5 Payee name CSPAC, LLC

6 Amount ($) 200

7 Payee address; City; State; Zip Code

11418 Oak Lane Ridge Ct., Sugar Land, TX 77498

☐ Check if individual's residence address.

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Consulting Expenses

(b) Description: Consulting

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

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

---

Date: 01-26-26

Payee name: Eddie Muzzammil Sajjad

Amount ($): 250

Payee address; City; State; Zip Code

10862 Redstone Ct., Missouri City, TX 77459

☐ Check if individual's residence address.

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Printing Expense

Description: Political Business Cards

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

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

---

Date: 02-05-26

Payee name: CSPAC, LLC

Amount ($): 200

Payee address; City; State; Zip Code

11418 Oak Lane Ridge Ct., Sugar Land, TX 77498

☐ Check if individual's residence address.

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Consulting Expenses

Description: Consulting

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
2 of 5	Stephen R. Longoria	

4 Date	5 Payee name
02-02-26	Inovative Solutions IT

6 Amount ($)	7 Payee address; City; State; Zip Code
952.61	10862 Redstone Ct., Missouri City, TX 77459 ☐ Check if individual's residence address.

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Printing Expenses	Banners & Business cards
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ Check if Austin, TX, officeholder living expense

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

Date	Payee name
04-23-26	HEB

Amount ($)	Payee address; City; State; Zip Code
29.47	8900 Hwy. 6, Missouri City, TX 77459 ☐ Check if individual's residence address.

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	Steak Dinner Fundraiser
	☐ Check if travel outside of Texas. Complete Schedule T.	☐ Check if Austin, TX, officeholder living expense

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

Date	Payee name
04-22-26	Trader Joes

Amount ($)	Payee address; City; State; Zip Code
50.87	13550 University, Sugar Land TX 77479 ☐ Check if individual's residence address.

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	Steak Dinner Fundraiser
	☐ Check if travel outside of Texas. Complete Schedule T.	☐ Check if Austin, TX, officeholder living expense

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
3 of 5	Stephen R. Longoria	

4 Date	5 Payee name
04-22-26	Costco

6 Amount ($)	7 Payee address; City; State; Zip Code
148.41	17520 Southwest Frwy., Sugar Land TX 77479 ☐ Check if individual's residence address.

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Food/Beverage Expense	Steak Dinner Fundraiser
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ Check if Austin, TX, officeholder living expense

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

Date	Payee name
04-15-26	44 Farms

Amount ($)	Payee address; City; State; Zip Code
762.46	1509 Tx-6, Cameron TX 76520 ☐ Check if individual's residence address.

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	Steak Dinner Fundraiser
	☐ Check if travel outside of Texas. Complete Schedule T.	☐ Check if Austin, TX, officeholder living expense

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

Date	Payee name
04-30-26	HEB

Amount ($)	Payee address; City; State; Zip Code
46.80	8900 Hwy. 6, Missouri City, TX 77459 ☐ Check if individual's residence address.

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Advertising Expense	Stamps for mailing
	☐ Check if travel outside of Texas. Complete Schedule T.	☐ Check if Austin, TX, officeholder living expense

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 of 5	Stephen R. Longoria	

4 Date: 05-15-26

5 Payee name: Innovative Solutions IT

6 Amount ($): 3,400

7 Payee address; City; State; Zip Code: 10862 Redstone Ct., Missouri City, TX 77459

☐ Check if individual's residence address.

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Advertising Expense

(b) Description: Webpage Design & Push Cards

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

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

---

Date: 06-15-26

Payee name: Ashley Thomas

Amount ($): 300

Payee address; City; State; Zip Code:

☐ Check if individual's residence address.

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Event Expense

Description: Juneteenth Event Table

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

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

---

Date: 06-22-26

Payee name: Amazon

Amount ($): 16.67

Payee address; City; State; Zip Code:

☐ Check if individual's residence address.

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Event Expense

Description: Push Card Holders

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	**2** FILER NAME	**3** Filer ID (Ethics Commission Filers)
5 of 5	Stephen R. Longoria	

4 Date	**5** Payee name
06-30-26	Prosperity Bank

6 Amount ($)	**7** Payee address;	City;	State;	Zip Code
4.00	☐ Check if individual's residence address.			

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

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

Date	Payee name			
Amount ($)	Payee address;	City;	State;	Zip Code
	☐ Check if individual's residence address.			

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

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

Date	Payee name			
Amount ($)	Payee address;	City;	State;	Zip Code
	☐ Check if individual's residence address.			

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

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED