

# 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)

2 Total pages filed:

59

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR

FIRST

MI

PHILIP G. CASH

NICKNAME

LAST

SUFFIX

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

POB 2099, WILLIS, TEXAS 77378

☐ Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

( 936 ) 672-1108

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

FIRST

MI

HEATHER L. CASH

NICKNAME

LAST

SUFFIX

7 CAMPAIGN  
TREASURER  
ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;

CITY;

STATE;

ZIP CODE

POB 2099, Willis, Texas 77378

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

( 936 ) 230-8433

9 REPORT TYPE

☐ January 15

☐ 30th day before election

☐ Runoff

☐ 15th day after campaign  
treasurer appointment  
(Officeholder Only)

☒ July 15

☐ 8th day before election

☐ Exceeded \$500 limit

☐ Final Report (Attach C/OH - FR)

10 PERIOD  
COVERED

Month

Day

Year

01

01

2025

THROUGH

Month

Day

Year

06

31

2025

11 ELECTION

ELECTION DATE

Month

Day

Year

11

05

2024

ELECTION TYPE

☐ Primary

☐ Runoff

☐ Other  
Description

☒ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

Constable, Precinct 1, Montgomery County

13 OFFICE SOUGHT (if known)

Constable, Precinct 1, Montgomery County

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

**14 C/OH NAME**

Philip G. Cash

**15 Filer ID (Ethics Commission Filers)**

**16 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

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

**17 CONTRIBUTION  
TOTALS**

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 1,597.00

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 80,395.95

**EXPENDITURE  
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS,  
UNLESS ITEMIZED

\$ 2,480.88

4. TOTAL POLITICAL EXPENDITURES

\$ 42,715.97

**CONTRIBUTION  
BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  
OF REPORTING PERIOD

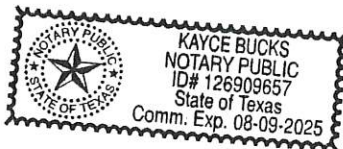
\$ 42,879.98

**OUTSTANDING  
LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$ 7,500.00

**18 AFFIDAVIT**



AFFIX NOTARY STAMP / SEAL ABOVE

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]*

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Philip Cash, this the 15th day of July, 2025, to certify which, witness my hand and seal of office.

*[Signature]*

Signature of officer administering oath

Kayce Bucks

Printed name of officer administering oath

Admin

Title of officer administering oath

**SUBTOTALS - COH****FORM C/OH  
COVER SHEET PG 3****19 FILER NAME**

Philip G. Cash

**20 Filer ID (Ethics Commission Filers)****21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE****SUBTOTAL  
AMOUNT**

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 65,692.95
2.	<input checked="" type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 13,106.00
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/>	SCHEDULE E: LOANS	\$ 7,500.00
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 40,235.09
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
9.	<input type="checkbox"/>	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
10.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
18**2 FILER NAME**

Philip G. Cash

**3** Filer ID (Ethics Commission Filers)**4** Date  
02.19.2025**5** Full name of contributor out-of-state PAC (ID#:  
Robert Walker ☐**6** Contributor address; City; State; Zip Code

P, O, Box 558, Pinehurst, Texas 77362

**7** Amount of contribution (\$)  
\$2,500.00**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
04.28.2025Full name of contributor out-of-state PAC (ID#:  
Timothy O'Neill ☐

Contributor address; City; State; Zip Code

1 Waterway Avenue #1314, The Woodlands, Texas 77380

Amount of contribution (\$)  
\$250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
04.10.2025Full name of contributor out-of-state PAC (ID#:  
Brad Perinne ☐

Contributor address; City; State; Zip Code

10530 Airport Road, Conroe, Texas 77303

Amount of contribution (\$)  
\$2,500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
04.14.2025Full name of contributor out-of-state PAC (ID#:  
Jay Brumfield ☐

Contributor address; City; State; Zip Code

10815 Lake Drive, Willis, Texas 77318

Amount of contribution (\$)  
\$250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**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

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
18

**2** FILER NAME

Philip G. Cash

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

**4** Date  
04.15.2025

**7** Full name of contributor  
Don A. Buckalew, Jr.

out-of-state PAC (ID#: \_\_\_\_\_) ☐

**7** Amount of contribution (\$)  
\$500.00

**8** Contributor address; City; State; Zip Code

P. O. Box 500, Conroe, Texas 77305

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

**9** Employer (See Instructions)

Date  
04.17.2025

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_) ☐

Amount of contribution (\$)  
\$500.00

Linebarger Goggan Blair & Sampson

Contributor address; City; State; Zip Code

P. O. Box 17428, Austin, Texas 78760

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
04.17.2025

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_) ☐

Amount of contribution (\$)  
\$2,500.00

Montgomery County Law Enforcement Association

Contributor address; City; State; Zip Code

POB 8793, The Woodlands, Texas 77387-8793

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
04.18.2025

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_) ☐

Amount of contribution (\$)  
\$800.00

Steve Sondag

Contributor address; City; State; Zip Code

505 North Frazier Street, Conroe, Texas 77301

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**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****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
18**2** FILER NAME

Philip G. Cash

**3** Filer ID (Ethics Commission Filers)**4** Date  
04.29.2025**9** Full name of contributor out-of-state PAC (ID#:  
Telfryn John**7** Amount of contribution (\$)  
\$1,500.00**10** Contributor address; City; State; Zip Code

15430 Woodland Orchard Lane, Cypress, Texas 77433

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
04.30.2025Full name of contributor out-of-state PAC (ID#:  
The Blair Law FirmAmount of contribution (\$)  
\$500.00

Contributor address; City; State; Zip Code

7 Grogan's Park Drive, Building 3, The Woodlands, Texas 77380

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
04.30.2025Full name of contributor out-of-state PAC (ID#:  
Georgette WhatleyAmount of contribution (\$)  
\$1,000.00

Contributor address; City; State; Zip Code

305 Cartwright Road, Conroe, Texas 77301

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05.01.2025Full name of contributor out-of-state PAC (ID#:  
Kevin PatelAmount of contribution (\$)  
\$2,500.00

Contributor address; City; State; Zip Code

1601 I-45 South, Conroe, Texas 77301

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**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****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
18**2 FILER NAME**

Philip G. Cash

**3** Filer ID (Ethics Commission Filers)**4** Date  
05.03.2025**11** Full name of contributor

Jeff Ford

out-of-state PAC (ID#: \_\_\_\_\_)

**12** Contributor address;

City; State; Zip Code

24012 Pecan Cove West, Montgomery, Texas 77356

**7** Amount of contribution (\$)  
\$850.00**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)**Date**  
05.04.2025

Full name of contributor

Leo Mock

out-of-state PAC (ID#: \_\_\_\_\_)



Contributor address;

City; State; Zip Code

P. O. Box 161, Dobbin, Texas 77333

Amount of contribution (\$)  
\$250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**Date**  
05.05.2025

Full name of contributor

Will Metcalf

out-of-state PAC (ID#: \_\_\_\_\_)



Contributor address;

City; State; Zip Code

P. O. Box 454, Conroe, Texas 77305

Amount of contribution (\$)  
\$1,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**Date**  
05.09.2025

Full name of contributor

Charlie Riley

out-of-state PAC (ID#: \_\_\_\_\_)



Contributor address;

City; State; Zip Code

P. O. Box 1605, Magnolia, Texas 77353

Amount of contribution (\$)  
\$500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**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****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
18**2 FILER NAME**

Philip G. Cash

**3** Filer ID (Ethics Commission Filers)**4** Date  
05.10.2025**13** Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Debra Goble

**7** Amount of contribution (\$)

\$500.00

**14** Contributor address;

City; State; Zip Code

2824 Tangley Road, Housston, Texas 77005

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
05.10.2025

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Joe Haliti

Amount of contribution (\$)

\$1,000.00

Contributor address;

City; State; Zip Code

1604 North Frazier Street, Conroe, Texas 77301

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05.14.2025

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Frank Jackson

Amount of contribution (\$)

\$530.00

Contributor address;

City; State; Zip Code

1927 Autumn Ridge Drive, Conroe, Texas 77304

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05.15.2025

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

The Bays Firm

Amount of contribution (\$)

\$250.00

Contributor address;

City; State; Zip Code

1503 Hailey, Conroe, Texas 77301

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**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****SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Philip G. Cash		3 Filer ID (Ethics Commission Filers)
4 Date 05.15.2025	15 Full name of contributor April Blalock-Gurley <input type="checkbox"/> out-of-state PAC (ID#: 16 Contributor address; P. O. Box 2088, Montgomery, Texas 77356	7 Amount of contribution (\$) \$2,125.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05.15.2025	Full name of contributor Joe Corley <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; 23648 Corley Road, Richards, Texas 77873	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05.15.2025	Full name of contributor Wesley Doolittle <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; 6606 FM 1488 Road, Suite 148-638, Magnolia, Texas 77354	Amount of contribution (\$) \$800.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05.15.2025	Full name of contributor C. J. Drew <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; 14190 Calvary Road, Willis, Texas 77318	Amount of contribution (\$) \$100.00
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**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**18****2 FILER NAME**

Philip G. Cash

**3** Filer ID (Ethics Commission Filers)**4** Date  
05.15.2025**17** Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

B. D. Griffin

**7** Amount of contribution (\$)  
\$150.00**18** Contributor address;

City; State; Zip Code

140 Wade Pointe Dr, Montgomery, Texas 77316

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
05.15.2025

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Mark Keough

Amount of contribution (\$)  
\$500.00

Contributor address;

City; State; Zip Code

20 Woodmere Place, The Woodlands, Texas 77381

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05.15.2025

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Robin Lane

Amount of contribution (\$)  
\$2,380.00

Contributor address;

City; State; Zip Code

9379 Deer Haven Circle, Willis, Texas 77378

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05.15.2025

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Curt Maddux

Amount of contribution (\$)  
\$100.00

Contributor address;

City; State; Zip Code

104 Timberside Drive, Conroe, Texas 77304

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**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****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
18**2 FILER NAME**

Philip G. Cash

**3** Filer ID (Ethics Commission Filers)**4** Date  
05.15.2025**19** Full name of contributor

Laura Marburger

out-of-state PAC (ID#: \_\_\_\_\_)

**7** Amount of contribution (\$)

\$500.00

**20** Contributor address;

City; State; Zip Code

307 North San Jacinto Street, Conroe, Texas 77301

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
05.15.2025

Full name of contributor

Braxton Morton

out-of-state PAC (ID#: \_\_\_\_\_)



Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

14675 Corvus Drive, Willis, Texas 77318

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05.15.2025

Full name of contributor

Tom Rozier

out-of-state PAC (ID#: \_\_\_\_\_)



Amount of contribution (\$)

\$250.00

Contributor address;

City; State; Zip Code

14120 Lake Pointe Drive, Willis, Texas 77318

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05.15.2025

Full name of contributor

Joe Sclider

out-of-state PAC (ID#: \_\_\_\_\_)



Amount of contribution (\$)

\$250.00

Contributor address;

City; State; Zip Code

33333 Silver Spur, Stagecoach, Texas 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**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****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
18**2 FILER NAME**

Philip G. Cash

**3** Filer ID (Ethics Commission Filers)**4** Date  
05.15.2025**21** Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

John Sellars

**7** Amount of contribution (\$)  
\$100.00**22** Contributor address;

City; State; Zip Code

10319 Paradise Lane, Conroe, Texas 77304

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
05.15.2025

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Kevin Smith

Amount of contribution (\$)  
\$500.00

Contributor address;

City; State; Zip Code

19854 West Lakeshore Drive, Magnolia, Texas 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05.15.2025

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Michael Valdez

Amount of contribution (\$)  
\$100.00

Contributor address;

City; State; Zip Code

412 West Phillips Street, Suite 119, Conroe, Texas 77301

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05.15.2025

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Patricia Brown

Amount of contribution (\$)  
\$75.00

Contributor address;

City; State; Zip Code

400 West Davis, Conroe, Texas 77301

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**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****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
18**2 FILER NAME**

Philip G. Cash

**3** Filer ID (Ethics Commission Filers)**4** Date  
05.15.2025**23** Full name of contributor

Brad Perinne

out-of-state PAC (ID#: \_\_\_\_\_)

**24** Contributor address;

City; State; Zip Code

10530 Airport Road, Conroe, Texas 77303

**7** Amount of contribution (\$)  
\$600.00**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)**Date**  
05.15.2025**Full name of contributor**

Jeff Ford

out-of-state PAC (ID#: \_\_\_\_\_)

**Contributor address;**

City; State; Zip Code

24012 Pecan Cove West, Montgomery, Texas 77356

**Amount of contribution (\$)**  
\$3,800.00**Principal occupation / Job title (See Instructions)****Employer (See Instructions)****Date**  
05.15.2025**Full name of contributor**

Bel Jackson

out-of-state PAC (ID#: \_\_\_\_\_)

**Contributor address;**

City; State; Zip Code

1927 Autumn Ridge Drive, Conroe, Texas 77304

**Amount of contribution (\$)**  
\$425.00**Principal occupation / Job title (See Instructions)****Employer (See Instructions)****Date**  
05.15.2025**Full name of contributor**

Jeremy Horton

out-of-state PAC (ID#: \_\_\_\_\_)

**Contributor address;**

City; State; Zip Code

400 West Davis, Conroe, Texas 77301

**Amount of contribution (\$)**  
\$900.00**Principal occupation / Job title (See Instructions)****Employer (See Instructions)****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****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
18**2 FILER NAME**

Philip G. Cash

**3** Filer ID (Ethics Commission Filers)**4** Date  
05.15.2025**25** Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Elliott Sondag

**7** Amount of contribution (\$)  
\$225.00**26** Contributor address;

City; State; Zip Code

505 North Frazier Street, Conroe, Texas 77301

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
05.15.2025

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Cheryl Meistad

Amount of contribution (\$)  
\$225.00

Contributor address;

City; State; Zip Code

3706 Pine Hollow Lane, Montgomery, Texas 77356

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05.15.2025

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Stacey Williamson

Amount of contribution (\$)  
\$90.00

Contributor address;

City; State; Zip Code

18727 Palm Beach Boulevard, Montgomery, Texas 77356

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05.15.2025

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Stacey Williamson

Amount of contribution (\$)  
\$900.00

Contributor address;

City; State; Zip Code

18727 Palm Beach Boulevard, Montgomery, Texas 77356

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**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****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
18**2 FILER NAME**

Philip G. Cash

**3** Filer ID (Ethics Commission Filers)**4** Date  
05.15.2025**27** Full name of contributor

Steve Anderson

out-of-state PAC (ID#: \_\_\_\_\_) ☐**28** Contributor address;

City; State; Zip Code

710 South Frazier, Conroe, Texas 77301

**7** Amount of contribution (\$)  
\$3,225.00**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
05.15.2025

Full name of contributor

Don Russell

out-of-state PAC (ID#: \_\_\_\_\_) ☐

Contributor address;

City; State; Zip Code

6125 Nordling Road, Houston, Texas 77076

Amount of contribution (\$)  
\$3,100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05.15.2025

Full name of contributor

Pam Tipton

out-of-state PAC (ID#: \_\_\_\_\_) ☐

Contributor address;

City; State; Zip Code

12456 Longmire Lakeview, Conroe, Texas 77304

Amount of contribution (\$)  
\$395.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05.15.2025

Full name of contributor

Michael Eddie McGee ☐

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City; State; Zip Code

P. O. Box 558, Pinehurst, Texas 77362

Amount of contribution (\$)  
\$235.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**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****SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Philip G. Cash		3 Filer ID (Ethics Commission Filers)
4 Date 05.15.2025	29 Full name of contributor out-of-state PAC (ID#: Cindy Wiesner 30 Contributor address; City; State; Zip Code 12393 Longmire Cove, Conroe, Texas 77304	7 Amount of contribution (\$) \$1,100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05.15.2025	Full name of contributor out-of-state PAC (ID#: Mandy Scarborough Contributor address; City; State; Zip Code 93 Panorama Drive, Conroe, Texas 77304	Amount of contribution (\$) \$70.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05.15.2025	Full name of contributor out-of-state PAC (ID#: Linda McDaniel Contributor address; City; State; Zip Code 15056 Jack Gibbs Road, Willis, Texas 77378	Amount of contribution (\$) \$251.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05.15.2025	Full name of contributor out-of-state PAC (ID#: Harry Hardman Contributor address; City; State; Zip Code 11515 Parrot Fish Court, Conroe, Texas 77304	Amount of contribution (\$) \$1,600.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
18

**2** FILER NAME

Philip G. Cash

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

**4** Date  
05.15.2025

**31** Full name of contributor  
Sheri Pelton ☐ out-of-state PAC (ID#: \_\_\_\_\_)

**7** Amount of contribution (\$)  
\$100.00

**32** Contributor address; City; State; Zip Code

15097 Capitol Hill, Montgomery, Texas 77316

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

**9** Employer (See Instructions)

Date  
05.15.2025

Full name of contributor  
Lee Smith ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)  
\$125.00

Contributor address; City; State; Zip Code

18126 FM Road, Montgomery, Texas 77316

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05.15.2025

Full name of contributor  
Bryson Shiflet ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)  
\$315.00

Contributor address; City; State; Zip Code

12138 Black Sage Court, Conroe, Texas 77304

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05.15.2025

Full name of contributor  
John Williamson ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)  
\$120.00

Contributor address; City; State; Zip Code

4205 West Davis, Conroe, Texas 77304

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**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****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
18**2 FILER NAME**

Philip G. Cash

**3** Filer ID (Ethics Commission Filers)**4** Date  
05.15.2025**33** Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Robert Casey**7** Amount of contribution (\$)  
\$1,000.00**34** Contributor address; City; State; Zip Code  
1627 Woodhue, Spring, Texas 77386**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
05.15.2025Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Tim StewartAmount of contribution (\$)  
\$1,100.00Contributor address; City; State; Zip Code  
9744 Rambling Rose Way, Willis, Texas 77378

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05.15.2025Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Jessie LambAmount of contribution (\$)  
\$632.95Contributor address; City; State; Zip Code  
8265 FM 1488, Magnolia, Texas 77354

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05.15..2025Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Kristin BybeeAmount of contribution (\$)  
\$250.00Contributor address; City; State; Zip Code  
1924 Boulder Ridge, Conroe, Texas 77304

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**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

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Philip G. Cash		3 Filer ID (Ethics Commission Filers)
4 Date 05.15.2025	35 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Austin Sharpen 36 Contributor address; City; State; Zip Code 13843 Hwy 105 West, Conroe, Texas 77304	7 Amount of contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05.15.2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Dustin Rutherford Contributor address; City; State; Zip Code 2200 East Davis, Conroe, Texas 77301	Amount of contribution (\$) \$549.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05.16.2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Lonestar LEMC Reguladores Contributor address; City; State; Zip Code P. O. BOX 2545, Conroe, Texas 77305	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05.18.2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: W & B Markek Interests Contributor address; City; State; Zip Code 10349 Pollard Road, Willis, Texas 77318	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
18**2 FILER NAME**

Philip G. Cash

**3** Filer ID (Ethics Commission Filers)**4** Date  
05.23.2022**37** Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Echo Hutson

**7** Amount of contribution (\$)  
\$125.00**38** Contributor address;

City; State; Zip Code

3500 Woods Estates Drive, Conroe, Texas 77304

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
05.28.2025

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Robert Walker

Amount of contribution (\$)  
\$9,800.00

Contributor address;

City; State; Zip Code

P. O. Box 558, Pinehurst, Texas 77362

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05.29.2025

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Kyle Hoegemeyer

Amount of contribution (\$)  
\$175.00

Contributor address;

City; State; Zip Code

11061 Shadow View Drive, Conroe, Texas 77304

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05.29.2025

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Charlie Riley

Amount of contribution (\$)  
\$3,500.00

Contributor address;

City; State; Zip Code

P. O. Box 1605, Magnolia, Texas 77353

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**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

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
18

**2** FILER NAME

Philip G. Cash

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

**4** Date  
05.15.2025

**39** Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

☐

Jason Waggoner

**40** Contributor address;

City; State; Zip Code

6910 FM 1488, Magnolia, Texas 77354

**7** Amount of contribution (\$)  
\$1,000.00

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

**9** Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

☐

Amount of contribution (\$)

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)

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)

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

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

## NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 19	
2 FILER NAME PHILIP CASH		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ \$13,106.00	
5 Date 05.15.2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: James & Kim Wiggins 7 Contributor address; City; State; Zip Code 5459 West Davis, Conroe, Texas 77304	8 Amount of Contribution \$ \$400.00	9 In-kind contribution description Ninja 62 Quart Icechest  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/>
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date 05.15.2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)		Amount of Contribution \$	In-kind contribution description
	James & Kim Wiggins		\$800.00	Glock Trump 9mm Pistol
Contributor address;		City; State; Zip Code	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
5459 West Davis, Conroe, Texas 77304				
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)			Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

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

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

## NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

The Instruction Guide explains how to complete this form.						1 Total pages Schedule A2: 19	
2 FILER NAME <b>PHILIP CASH</b>						3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS						\$ <b>13,106.00</b>	
5 Date <b>05.15.2025</b>		8 Full name of contributor      out-of-state PAC (ID#: _____) <b>Robert Walker</b>				8 Amount of Contribution \$ <b>\$600.00</b>	
		9 Contributor address;                  City; State; Zip Code <b>P. O. Box 558, Pinehurst, Texas 77362</b>				9 In-kind contribution description <b>Glock 19 Texas Silver 9mm</b>	
						Check if travel outside of Texas, complete Schedule T	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)						11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)						13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)						15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date <b>05.15.2025</b>		Full name of contributor      out-of-state PAC (ID#: _____) <b>Wyrwich Investigations</b>				Amount of Contribution \$ <b>\$1,650.00</b>	
		Contributor address;                  City; State; Zip Code <b>101 Criminal Justice Drive, Conroe, Texas 77301</b>				In-kind contribution description <b>Handmade Damascus Steel Knives (7)</b>	
						Check if travel outside of Texas, complete Schedule T	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)						Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)						Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)						Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
<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.							

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 19	
2 FILER NAME PHILIP CASH		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 13,106.00	
5 Date 05.15.2025	10 Full name of contributor out-of-state PAC (ID#: Brandon Creighton 11 Contributor address; City; State; Zip Code PO Box 12068, Capitol Station, Austin, TX 78711	8 Amount of Contribution \$ \$340.00	9 In-kind contribution description Texas State Seal Rocking Chairs (2) Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 05.15.2025	Full name of contributor out-of-state PAC (ID#: Emerge Services Contributor address; City; State; Zip Code 9127 White Tail Dr, Conroe, TX 77303	Amount of Contribution \$ \$1,000.00	In-kind contribution description Sig P38 Lonestar State 9mm Pistol Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.			



**NON-MONETARY (IN-KIND) POLITICAL  
CONTRIBUTIONS****SCHEDULE A2**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 19	
2 FILER NAME <b>PHILIP CASH</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 13,106.00	
5 Date 05.15.2025	12 Full name of contributor out-of-state PAC (ID#: <b>James &amp; Kim Wiggins</b>  13 Contributor address; City; State; Zip Code <b>5459 West Davis, Conroe, Texas 77304</b>	8 Amount of Contribution \$ <b>\$500.00</b>	9 In-kind contribution description <b>Wiggin's Furniture Gift Card</b>  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/>
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 05.15.2025	Full name of contributor out-of-state PAC (ID#: <b>Joe Haliti</b>  Contributor address; City; State; Zip Code <b>1604 North Frazier Street, Conroe, Texas 77301</b>	Amount of Contribution \$ <b>\$200.00</b>	In-kind contribution description <b>Joe's Italian Gift Card</b>  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/>
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<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.			

**SCHEDULE A2**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 19	
2 FILER NAME <b>PHILIP CASH</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 13,106.00	
5 Date 05.15.2025	14 Full name of contributor out-of-state PAC (ID#: <b>Harry &amp; Lori Keyser</b>	8 Amount of Contribution \$ \$100.00	9 In-kind contribution description <b>Guadaluharry's Gift Card</b>
15 Contributor address; City; State; Zip Code 12947 Lake Conroe Hills Drive, Willis, Texas 77318		Check if travel outside of Texas, complete Schedule T <input type="checkbox"/>	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 05.15.2025	Full name of contributor out-of-state PAC (ID#: <b>Debbie Glenn-Cross</b>	Amount of Contribution \$ \$200.00	In-kind contribution description <b>Red Brick Tavern Gift Cards</b>
Contributor address; City; State; Zip Code 119 Simonton, Conroe, Texas 77301		Check if travel outside of Texas, complete Schedule T <input type="checkbox"/>	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<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.			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 19	
2 FILER NAME PHILIP CASH		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 13,106.00	
5 Date 05.15.2025	16 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris & Mandi Sadler 17 Contributor address; City; State; Zip Code 103 North Thompson, Conroe, Texas 77301	8 Amount of Contribution \$ \$150.00	9 In-kind contribution description Honor Cafe Gift Card <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 05.15.2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stacey Williamson Contributor address; City; State; Zip Code 18727 Palm Beach Boulevard, Montgomery, Texas 77356	Amount of Contribution \$ \$150.00	In-kind contribution description Love Grapes Tasting Box <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 19	
2 FILER NAME <b>PHILIP CASH</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 13,106.00	
5 Date 05.15.2025	18 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Stacey Williamson</b>  19 Contributor address; City; State; Zip Code <b>18727 Palm Beach Boulevard, Montgomery, Texas 77356</b>	8 Amount of Contribution \$ <b>\$175.00</b>	9 In-kind contribution description <b>Things That Make You Beautiful Basket</b>  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 05.15.2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Pam Maps</b>  Contributor address; City; State; Zip Code <b>130 North Main, Conroe, Texas 77301</b>	Amount of Contribution \$ <b>\$100.00</b>	In-kind contribution description <b>Handmade Baby Afgan</b>  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<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.			

**SCHEDULE A2**

Date 05.15.2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of Contribution \$	In-kind contribution description
	Tracy Traylor Contributor address; City; State; Zip Code 115 Business Park Drive, Willis, Texas 77378	\$119.00	RYOBI 18-Volt Portable Fan
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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

## NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 19	
2 FILER NAME PHILIP CASH		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 13,106.00	
5 Date 05.15.2025	22 Full name of contributor out-of-state PAC (ID#: _____) Melvin Franklin 23 Contributor address; City; State; Zip Code #1 Criminal Justice Drive, Conroe, Texas 77301	8 Amount of Contribution \$ 200.00 9 In-kind contribution description RE Royal Edge Demascus Steel Knife Check if travel outside of Texas, complete Schedule T	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (If any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date 05.15.2025	Full name of contributor out-of-state PAC (ID#: _____)  Steve & Cheryl Anderson		Amount of Contribution \$ \$175.00	In-kind contribution description Rajin Cajun Basket
	Contributor address; City; State; Zip Code 710 South Frazier, Conroe, Texas 77301		Check if travel outside of Texas, complete Schedule T <input type="checkbox"/>	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)			Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

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

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

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 19	
2 FILER NAME <b>PHILIP CASH</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 13,106.00	
5 Date 05.15.2025	24 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Steve &amp; Cheryl Anderson</b> 25 Contributor address; City; State; Zip Code <b>710 South Frazier, Conroe, Texas 77301</b>	8 Amount of Contribution \$ <b>\$250.00</b>	9 In-kind contribution description <b>Coke Basket</b> <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 05.15.2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Steve &amp; Cheryl Anderson</b> Contributor address; City; State; Zip Code <b>710 South Frazier, Conroe, Texas 77301</b>	Amount of Contribution \$ <b>\$75.00</b>	In-kind contribution description <b>Loco Limes Basket</b> <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<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.			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 19	
2 FILER NAME PHILIP CASH		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 13,106.00	
5 Date 05.15.2025	26 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steve & Cheryl Anderson 27 Contributor address; City; State; Zip Code 710 South Frazier, Conroe, Texas 77301	8 Amount of Contribution \$ \$200.00	9 In-kind contribution description Man O' Man Cigar Basket <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date 05.15.2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steve & Cheryl Anderson Contributor address; City; State; Zip Code 710 South Frazier, Conroe, Texas 77301	Amount of Contribution \$ \$75.00	In-kind contribution description God Bless Texas Basket <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



## NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.						1 Total pages Schedule A2: 19	
2 FILER NAME <b>PHILIP CASH</b>						3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS						\$ 13,106.00	
5 Date 05.15.2025		28 Full name of contributor      out-of-state PAC (ID#: _____)  Steve & Cheryl Anderson				8 Amount of Contribution \$      9 In-kind contribution description  \$100.00      Charcuterie Me Basket	
		29 Contributor address;                  City;    State;    Zip Code  710 South Frazier, Conroe, Texas 77301				Check if travel outside of Texas, complete Schedule T	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)						11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)						13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)						15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date 05.15.2025		Full name of contributor      out-of-state PAC (ID#: _____)  Steve & Cheryl Anderson				Amount of Contribution \$      In-kind contribution description  \$250.00      Giant Bucket of Hot Wheels	
		Contributor address;                  City;    State;    Zip Code  710 South Frazier, Conroe, Texas 77301				Check if travel outside of Texas, complete Schedule T	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)						Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)						Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)						Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.							

**SCHEDULE A2**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 19	
2 FILER NAME <b>PHILIP CASH</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 13,106.00	
5 Date 05.15.2025	30 Full name of contributor out-of-state PAC (ID#: _____) <b>Steve &amp; Cheryl Anderson</b> 31 Contributor address; City; State; Zip Code <b>710 South Frazier, Conroe, Texas 77301</b>	8 Amount of Contribution \$ <b>\$200.00</b>	9 In-kind contribution description <b>Barbie Basket</b>  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/>
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 05.15.2025	Full name of contributor out-of-state PAC (ID#: _____) <b>Brandon Polk</b> Contributor address; City; State; Zip Code <b>2510 S Loop 336 W Ste 205, Conroe, TX 77304</b>	Amount of Contribution \$ <b>\$220.00</b>	In-kind contribution description <b>.+Forty Fitness (4 Free Sessions)</b>  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/>
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<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.			

## NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.						1 Total pages Schedule A2: 19	
2 FILER NAME <b>PHILIP CASH</b>						3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS						\$ 13,106.00	
5 Date 05.15.2025		32 Full name of contributor      out-of-state PAC (ID#: _____) <b>Lori Allbright</b>				8 Amount of Contribution \$      9 In-kind contribution description <b>\$100.00      Flower Arrangement</b>	
		33 Contributor address;                  City;    State;    Zip Code <b>4205 West Davis, Conroe, Texas 77304</b>				Check if travel outside of Texas, complete Schedule T	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)						11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)						13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)						15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date 05.15.2025		Full name of contributor      out-of-state PAC (ID#: _____) <b>Julie Nolkamper</b>				Amount of Contribution \$      In-kind contribution description <b>\$100.00      Crock Pot Basket</b>	
		Contributor address;                  City;    State;    Zip Code <b>115 Business Park Drive, Willis, Texas 77378</b>				Check if travel outside of Texas, complete Schedule T	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)						Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)						Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)						Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.							

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 19	
2 FILER NAME <b>PHILIP CASH</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 13,106.00	
5 Date 05.15.2025	34 Full name of contributor      out-of-state PAC (ID#: _____) <b>Nathan Arrazate</b> <input type="checkbox"/> 35 Contributor address;                  City;    State;    Zip Code <b>215 Pine Shadow Drive, Conroe, Texas 77301</b>	8 Amount of Contribution \$ <b>\$250.00</b>	9 In-kind contribution description <b>One Hour with Santa Nate</b>  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/>
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 05.15.2025	Full name of contributor      out-of-state PAC (ID#: _____) <b>Will Metcalf</b> <input type="checkbox"/> Contributor address;                  City;    State;    Zip Code <b>100 Nugent Street, Conroe, Texas 77301</b>	Amount of Contribution \$ <b>\$250.00</b>	In-kind contribution description <b>Texas Flag Flown Over Capital</b>  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/>
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<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.			

## NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.						1 Total pages Schedule A2: 19			
2 FILER NAME <b>PHILIP CASH</b>						3 Filer ID (Ethics Commission Filers)			
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS						\$ 13,106.00			
5 Date 05.15.2025		36 Full name of contributor      out-of-state PAC (ID#: _____) <b>Steve &amp; Cheryl Anderson</b>				8 Amount of Contribution \$ \$150.00		9 In-kind contribution description Pottery Basket	
		37 Contributor address;                  City;    State;    Zip Code 710 South Frazier, Conroe, Texas 77301				Check if travel outside of Texas, complete Schedule T			
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)						11 Employer (FOR NON-JUDICIAL) (See Instructions)			
12 Contributor's principal occupation (FOR JUDICIAL)						13 Contributor's job title (FOR JUDICIAL) (See Instructions)			
14 Contributor's employer/law firm (FOR JUDICIAL)						15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)									
Date 05.15.2025		Full name of contributor      out-of-state PAC (ID#: _____) <b>Always in Bloom Florest</b>				Amount of Contribution \$ \$200.00		In-kind contribution description Flower Arrangement	
		Contributor address;                  City;    State;    Zip Code 13731 FM 1097 West, Willis, Texas 77318				Check if travel outside of Texas, complete Schedule T			
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)						Employer (FOR NON-JUDICIAL) (See Instructions)			
Contributor's principal occupation (FOR JUDICIAL)						Contributor's job title (FOR JUDICIAL) (See Instructions)			
Contributor's employer/law firm (FOR JUDICIAL)						Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)									
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.									

**NON-MONETARY (IN-KIND) POLITICAL  
CONTRIBUTIONS****SCHEDULE A2**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 19
2 FILER NAME <b>PHILIP CASH</b>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 13,106.00
5 Date 05.15.2025	38 Full name of contributor out-of-state PAC (ID#: <b>Nathan Arrazate Productions</b> 39 Contributor address; City; State; Zip Code <b>215 Pine Shadow Drive, Conroe, Texas 77301</b>	8 Amount of Contribution \$ \$395.00 9 In-kind contribution description <b>Border Patrol Bundle</b>  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/>
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

Date 05.15.2025	Full name of contributor out-of-state PAC (ID#: <b>The Matted Patter</b> Contributor address; City; State; Zip Code <b>309 West Montgomery, Willis, Texas 77378</b>	Amount of Contribution \$ \$150.00 In-kind contribution description <b>Pet Spa Gift Card</b>  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/>
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

## SCHEDULE A2

The Instruction Guide explains how to complete this form.						1 Total pages Schedule A2: 19	
2 FILER NAME <b>PHILIP CASH</b>						3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS						\$ 13,106.00	
5 Date 05.15.2025		40 Full name of contributor out-of-state PAC (ID#: _____)  Heather Cash 41 Contributor address; City; State; Zip Code  P. O. Box 2099, Willis, Texas 77378				8 Amount of Contribution \$ \$125.00 9 In-kind contribution description Hot Sauce & Tortilla Chips  Check if travel outside of Texas, complete Schedule T	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)						11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)						13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)						15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date 05.15.2025		Full name of contributor out-of-state PAC (ID#: _____)  Steve & Cheryl Anderson Contributor address; City; State; Zip Code  710 South Frazier, Conroe, Texas 77301				Amount of Contribution \$ \$2,500.00 In-kind contribution description Fajitas, Beans, Rice, Pico de Gallo  Check if travel outside of Texas, complete Schedule T	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)						Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)						Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)						Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.							

**SCHEDULE A2**

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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



# 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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>19</b>	<b>2</b> FILER NAME <b>PHILIP CASH</b>	<b>3</b> Filer ID (Ethics Commission Filers)
--	---	--

<b>4</b> Date <b>01.06.2025</b>	<b>5</b> Payee name <b>BX3 Interactive</b>
------------------------------------	---

<b>6</b> Amount (\$) <b>\$150.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>17505 N. 79th Avenue, Suite 208D, Glendale, AZ 85308</b>
---	--

<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Office Overhead</b>	<b>(b)</b> Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
		<b>Web Services</b>

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date <b>01.15.2025</b>	Payee name <b>Reguladores Law Enforcement Motorcycle Club</b>
---------------------------	--

Amount (\$) <b>\$450.00</b>	Payee address; City; State; Zip Code <b>P. O. BOX 2545. Conroe, Texas 77305</b>
--------------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Contribution/Donation</b>	Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
		<b>Purchase Auction Items for Campaign Fundraiser</b>

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

Date <b>01.22.2025</b>	Payee name <b>Love Heals Youth</b>
---------------------------	---------------------------------------

Amount (\$) <b>\$371.24</b>	Payee address; City; State; Zip Code <b>212 Conroe Drive, Conroe, Texas 77301</b>
--------------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Contribution/Donation</b>	Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
		<b>Fundraising Event</b>

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

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

# 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

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: 19		2 FILER NAME <b>PHILIP CASH</b>		3 Filer ID (Ethics Commission Filers)	
4 Date 01.27.2025		5 Payee name Adobe Systems, Inc.			
6 Amount (\$) \$259.67		7 Payee address; City; State; Zip Code 345 Park Avenue, San Jose, California 95110			
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Office Overhead		(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense		
			Computer Program		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
Date 01.31.2025		Payee name Montgomery County Fair Association			
Amount (\$) \$600.00		Payee address; City; State; Zip Code 9201 Airport Road, Conroe, Texas 77303			
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Contribution/Donation		Description Check if travel outside of Texas, complete Schedule T 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 02.09.2025		Payee name Office Depot			
Amount (\$) \$229.46		Payee address; City; State; Zip Code 1319 West Davis Street, Conroe, Texas 77304			
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Office Overhead		Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense		
			Printing Expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

# 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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>19</b>	<b>2</b> FILER NAME <b>PHILIP CASH</b>	<b>3</b> Filer ID (Ethics Commission Filers)
--	---	--

<b>4</b> Date <b>02.11.2025</b>	<b>5</b> Payee name <b>Robert Walker Campaign</b>
------------------------------------	--

<b>6</b> Amount (\$) <b>\$400.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>P, O, Box 558, Pinehurst, Texas 77362</b>
---	---

<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Contribution/Donation</b>	<b>(b)</b> Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Robert Walker</b>	Office sought <b>Montgomery County Commissioner Precinct 1</b>	Office held
---	---	---	-------------

Date <b>02.12.2025</b>	Payee name <b>Montgomery County Food Bank</b>
---------------------------	--

Amount (\$) <b>\$530.00</b>	Payee address; City; State; Zip Code <b>1 Food For Life Way, Conroe, Texas 77385</b>
--------------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Contribution/Donation</b>	Description  Check if travel outside of Texas, complete Schedule T  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 <b>02.12.2025</b>	Payee name <b>Liberty Belles Republican Women</b>
---------------------------	--

Amount (\$) <b>\$300.00</b>	Payee address; City; State; Zip Code <b>73 Greenbriar, Conroe, Texas 77304</b>
--------------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Contribution/Donation</b>	Description  Check if travel outside of Texas, complete Schedule T  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
--	-------------------------------	---------------	-------------

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

# 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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 19	<b>2</b> FILER NAME PHILIP CASH	<b>3</b> Filer ID (Ethics Commission Filers)
---	------------------------------------	--

<b>4</b> Date 02.14.2025	<b>5</b> Payee name Montgomery County Fair Association
-----------------------------	---

<b>6</b> Amount (\$) \$200.00	<b>7</b> Payee address; City; State; Zip Code 9201 Airport Road, Conroe, Texas 77303
----------------------------------	---

<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) Contribution/Donation	<b>(b)</b> Description Check if travel outside of Texas, complete Schedule T 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 02.15.2025	Payee name United States Postal Service
--------------------	--

Amount (\$) \$226.00	Payee address; City; State; Zip Code 609 North Campbell, Willis, Texas 77378
-------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Office Expense	Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
		Post Office Box for Campaign

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

Date 02.15.2025	Payee name Family Promise of Montgomery County
--------------------	---

Amount (\$) \$200.00	Payee address; City; State; Zip Code P. O. Box 692, Conroe, Texas 77301
-------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Contribution/Donation	Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
		Fundraising Event

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

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

# 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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 19	<b>2</b> FILER NAME PHILIP CASH	<b>3</b> Filer ID (Ethics Commission Filers)
---	------------------------------------	--

<b>4</b> Date 02.15.2025	<b>5</b> Payee name Family Promise of Montgomery County
-----------------------------	--

<b>6</b> Amount (\$) \$5,250.00	<b>7</b> Payee address; City; State; Zip Code P. O. Box 692, Conroe, Texas 77301
------------------------------------	---

<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) Contribution/Donation	<b>(b)</b> Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
	Fundraising Event	

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date 02.15.2025	Payee name North Shore Republican Women
--------------------	--

Amount (\$) \$110.00	Payee address; City; State; Zip Code P. O. Box 1993, Montgomery, Texas 77356
-------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Contribution/Donation-	Description Check if travel outside of Texas, complete Schedule T 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 02.22.2025	Payee name Reguladores Law Enforcement Motorcycle Club
--------------------	---

Amount (\$) \$1,475.00	Payee address; City; State; Zip Code P. O. BOX 2545, Conroe, Texas 77305
---------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Contribution/Donation	Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
	Purchase Auction Items for Campaign Fundraiser	

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

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

# 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

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: 19		2 FILER NAME <b>PHILIP CASH</b>		3 Filer ID (Ethics Commission Filers)	
4 Date 03.03.2025		5 Payee name North Montgomery County Support Group			
6 Amount (\$) \$1,200.00		7 Payee address; City; State; Zip Code P. O. Box 42, Willis, Texas 77378			
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Contribution/Donation		(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense		
			Fundraising Event		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 03.07.2025		Payee name Ducks Unlimited			
Amount (\$) \$600.00		Payee address; City; State; Zip Code 915 Front Street, Richmond, Texas 77469			
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Contribution/Donation		Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense		
			Fundraising Event		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 03.13.2025		Payee name H.E.B. Grocery			
Amount (\$) \$105.93		Payee address; City; State; Zip Code 12350 Interstate 45 North, Willis, Texas 77378			
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Contribution/Donation		Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense		
			Montgomery County Fair Association		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

# 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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>19</b>		2 FILER NAME <b>PHILIP CASH</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>03.13.2025</b>		5 Payee name <b>H-E-B Grocery</b>			
6 Amount (\$) <b>\$228.38</b>		7 Payee address; City; State; Zip Code <b>12350 Interstate 45 North, Willis, Texas 77378</b>			
8 <b>PURPOSE OF EXPENDITURE</b>		(a) Category (See categories listed at the top of this schedule) <b>Food/Beverage for Event</b>		(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense  <b>Montgomery County Shrine Club</b>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>03.18.2025</b>		Payee name <b>Friends of the National Rifle Association</b>			
Amount (\$) <b>\$120.00</b>		Payee address; City; State; Zip Code <b>541 FM Road 1488, Conroe, Texas 77384</b>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See categories listed at the top of this schedule) <b>Contribution/Donation</b>		Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense  <b>Fundraising Event</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>03.18.2025</b>		Payee name <b>Mark Keough</b>			
Amount (\$) <b>\$250.00</b>		Payee address; City; State; Zip Code <b>P. O. Box 2513, Conroe, Texas 77305</b>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See categories listed at the top of this schedule) <b>Contribution/Donation</b>		Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name <b>Mark Keough</b>		Office sought <b>Montgomery County Judge</b> Office held	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# 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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 19	<b>2</b> FILER NAME PHILIP CASH	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 03.19.2025	<b>5</b> Payee name American Legion Auxillary #618	
<b>6</b> Amount (\$) \$260.00	<b>7</b> Payee address; City; State; Zip Code 13054 East FM 1097, Willis, Texas 77378	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) Contribution/Donation	<b>(b)</b> Description Check if travel outside of Texas, complete Schedule T 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 03.19.2025	Payee name Montgomery High School FFA AG Booster Club	
Amount (\$) \$500.00	Payee address; City; State; Zip Code P. O. Box 932, Montgomery, Texas 77356	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Contribution/Donation	Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense  Fundraising Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

Date 03.21.2025	Payee name Friends of the National Rifle Association	
Amount (\$) \$650.00	Payee address; City; State; Zip Code 541 FM Road 1488, Conroe, Texas 77384	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Contribution/Donation	Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense  Fundraising Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



# 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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>19</b>	<b>2</b> FILER NAME <b>PHILIP CASH</b>	<b>3</b> Filer ID (Ethics Commission Filers)
--	---	--

<b>4</b> Date <b>03.21.2025</b>	<b>5</b> Payee name <b>Friends of the National Rifle Association</b>
------------------------------------	---

<b>6</b> Amount (\$) <b>\$750.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>541 FM Road 1488, Conroe, Texas 77384</b>
---	---

<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Contribution/Donation</b>	<b>(b)</b> Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
		<b>Fundraising Event</b>

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date <b>03.23.2025</b>	Payee name <b>H.E.B. Grocery</b>
---------------------------	-------------------------------------

Amount (\$) <b>\$216.87</b>	Payee address; City; State; Zip Code <b>12350 Interstate 45 North, Willis, Texas 77378</b>
--------------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Food/Beverage for Event</b>	Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
		<b>Montgomery County Food Bank</b>

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

Date <b>03.23.2025</b>	Payee name <b>Sam's Club</b>
---------------------------	---------------------------------

Amount (\$) <b>\$342.83</b>	Payee address; City; State; Zip Code <b>2000 Westview Blvd #F, Conroe, Texas 77304</b>
--------------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Food/Beverage for Event</b>	Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
		<b>Montgomery County Food Bank</b>

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

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

# 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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 19	<b>2</b> FILER NAME PHILIP CASH	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 03.24.2025	<b>5</b> Payee name Lake Conroe Area Republican Women PAC	
<b>6</b> Amount (\$) \$500.00	<b>7</b> Payee address; City; State; Zip Code P. O. Box 737, Montgomery, Texas 77356	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) Contribution/Donation	<b>(b)</b> Description Check if travel outside of Texas, complete Schedule T 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 03.28.2025	Payee name Montgomery County	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 9201 Airport Road, Conroe, Texas 77303	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense  Facility Rental for Campaign Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

Date 03.29.2025	Payee name Montgomery High School FFA AG Booster Club	
Amount (\$) \$ 110.00	Payee address; City; State; Zip Code P. O. Box 932, Montgomery, Texas 77356	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Contribution/Donation	Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense  Fundraising Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# 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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>19</b>	<b>2</b> FILER NAME <b>PHILIP CASH</b>	<b>3</b> Filer ID (Ethics Commission Filers)
--	---	--

<b>4</b> Date <b>03.29.2025</b>	<b>5</b> Payee name <b>Montgomery High School FFA AG Booster Club</b>
------------------------------------	--

<b>6</b> Amount (\$) <b>\$1,300.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>P. O. Box 932, Montgomery, Texas 77356</b>
---	--

<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Contribution/Donation</b>	<b>(b)</b> Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense
		<b>Fundraising Event</b>

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date <b>04.04.2025</b>	Payee name <b>Eventsured</b>
---------------------------	---------------------------------

Amount (\$) <b>\$151.13</b>	Payee address; City; State; Zip Code <b>3553 West Chester Pike #418, Newton Square, PA 19073</b>
--------------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Event Expense</b>	Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense
		<b>Facility Rental Insurance for Campaign Event</b>

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

Date <b>04.04.2025</b>	Payee name <b>Office Depot</b>
---------------------------	-----------------------------------

Amount (\$) <b>\$283.07</b>	Payee address; City; State; Zip Code <b>1319 West Davis Street, Conroe, Texas 77304</b>
--------------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Event Expense</b>	Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense
		<b>Printing Expense</b>

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

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

# 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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 19	2 FILER NAME <b>PHILIP CASH</b>	3 Filer ID (Ethics Commission Filers)
----------------------------------	------------------------------------	---------------------------------------

4 Date 04.07.2025	5 Payee name Premier Wedding and Party Rental
----------------------	--

6 Amount (\$) \$2,695.18	7 Payee address; City; State; Zip Code 700 McCaleb Road, Suite F, Montgomery, Texas 77316
-----------------------------	--

8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
	Table and Chair Rental for Event	

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

Date 04.15.2025	Payee name H.E.B. Grocery
--------------------	------------------------------

Amount (\$) \$107.15	Payee address; City; State; Zip Code 12350 Interstate 45 North, Willis, Texas 77378
-------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
	Donate for National Dispatch Week	

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

Date 04.23.2025	Payee name AL Party Creations
--------------------	----------------------------------

Amount (\$) \$967.00	Payee address; City; State; Zip Code 1108 North Loop West, Suite R, Conroe, Texas
-------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
	Decorations for Campaign Event	

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

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

# 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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>19</b>	<b>2</b> FILER NAME <b>PHILIP CASH</b>	<b>3</b> Filer ID (Ethics Commission Filers)
--	---	--

<b>4</b> Date <b>04.28.2025</b>	<b>5</b> Payee name <b>Montgomery County Crime Stoppers</b>
------------------------------------	--

<b>6</b> Amount (\$) <b>\$500.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>1 Criminal Justice Drive, Conroe, Texas 77301</b>
---	---

<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) <b>Contribution/Donation</b>	(b) Description  Check if travel outside of Texas, complete Schedule T 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 <b>05.01.2025</b>	Payee name <b>Sam's Club</b>
---------------------------	---------------------------------

Amount (\$) <b>\$217.26</b>	Payee address; City; State; Zip Code <b>2000 Westview Blvd #F, Conroe, Texas 77304</b>
--------------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Food/Beverage Expense</b>	Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense  <b>Family Promise of Montgomery County Event</b>
---------------------------------------	--	--

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

Date <b>05.02.2025</b>	Payee name <b>Lake Conroe Area Republican Women PAC</b>
---------------------------	--

Amount (\$) <b>\$138.00</b>	Payee address; City; State; Zip Code <b>P. O. Box 737, Montgomery, Texas 77356</b>
--------------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Contribution/Donation</b>	Description  Check if travel outside of Texas, complete Schedule T 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
--	-------------------------------	---------------	-------------

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

# 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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 19		<b>2</b> FILER NAME PHILIP CASH		<b>3</b> Filer ID (Ethics Commission Filers)				
<b>4</b> Date 05.06.2025		<b>5</b> Payee name Melisa Miller Campaign						
<b>6</b> Amount (\$) \$200.00		<b>7</b> Payee address; City; State; Zip Code P. O. Box 2985, Conroe, Texas 77305						
<b>8</b>  PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contribution/Donation		(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense				
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table border="0" style="width:100%"> <tr> <td>Candidate / Officeholder name Melisa Miller</td> <td>Office sought Montgomery County District Clerk</td> <td>Office held</td> </tr> </table>						Candidate / Officeholder name Melisa Miller	Office sought Montgomery County District Clerk	Office held
Candidate / Officeholder name Melisa Miller	Office sought Montgomery County District Clerk	Office held						
Date 05.10.2025		Payee name Sam's Club						
Amount (\$) \$811.16		Payee address; City; State; Zip Code 2000 Westview Blvd #F, Conroe, Texas 77304						
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage Expense		Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Campaign Fundraiser				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table border="0" style="width:100%"> <tr> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>						Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held						
Date 05.10.2025		Payee name Spec's						
Amount (\$) \$782.46		Payee address; City; State; Zip Code 1420 North Loop 336, Conroe, Texas 77304						
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage Expense		Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Campaign Fundraising Event				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table border="0" style="width:100%"> <tr> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>						Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held						
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED								

# 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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>19</b>	<b>2</b> FILER NAME <b>PHILIP CASH</b>	<b>3</b> Filer ID (Ethics Commission Filers)
--	---	--

<b>4</b> Date <b>05.10.2025</b>	<b>5</b> Payee name <b>Slott's Supermarket</b>
------------------------------------	---

<b>6</b> Amount (\$) <b>\$436.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>301 Gibbs Street, New Waverly, Texas 77358</b>
---	--

<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Food/Beverage Expense</b>	<b>(b)</b> Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
	<b>Campaign Fundraising Event</b>	

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

<b>Date</b> <b>05.13.2025</b>	<b>Payee name</b> <b>H.E.B. Grocery</b>
----------------------------------	--

<b>Amount (\$)</b> <b>\$204.25</b>	<b>Payee address; City; State; Zip Code</b> <b>12350 Interstate 45 North, Willis, Texas 77378</b>
---------------------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See categories listed at the top of this schedule) <b>Food/Beverage Expense</b>	<b>Description</b>  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
	<b>Campaign Fundraising Event</b>	

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

<b>Date</b> <b>05.07.2025</b>	<b>Payee name</b> <b>H.E.B. Grocery</b>
----------------------------------	--

<b>Amount (\$)</b> <b>\$235.60</b>	<b>Payee address; City; State; Zip Code</b> <b>12350 Interstate 45 North, Willis, Texas 77378</b>
---------------------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See categories listed at the top of this schedule) <b>Food/Beverage Expense</b>	<b>Description</b>  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
	<b>Family Promise of Montgomery County Event</b>	

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

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

# 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

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: 19		<b>2</b> FILER NAME PHILIP CASH		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 05.15.2025		<b>5</b> Payee name H.E.B. Grocery			
<b>6</b> Amount (\$) \$159.96		<b>7</b> Payee address; City; State; Zip Code 12350 Interstate 45 North, Willis, Texas 77378			
<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 Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense  Dessert for Campaign Event	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name         Office sought         Office held					
Date 05.16.2025		Payee name Montgomery County			
Amount (\$) \$1,000.00		Payee address; City; State; Zip Code 9201 Airport Road, Conroe, Texas 77303			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event Expense		Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense  Facility Rental for Campaign Event	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name         Office sought         Office held					
Date 05.16.2025		Payee name CC Plus II			
Amount (\$) \$5,347.49		Payee address; City; State; Zip Code 4205 West Davis, Conroe, Texas 77304			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event Expense		Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense  Purchase Auction Items for Campaign Fundraiser	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name         Office sought         Office held					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					



# 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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>19</b>	<b>2</b> FILER NAME <b>PHILIP CASH</b>	<b>3</b> Filer ID (Ethics Commission Filers)
--	---	--

<b>4</b> Date <b>05.17.2025</b>	<b>5</b> Payee name <b>Arrazate Marketing</b>
------------------------------------	--

<b>6</b> Amount (\$) <b>\$400.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>215 Pine Shadow Drive, Conroe, Texas 77301</b>
---	--

<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) <b>Event Expense</b>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
	<b>Advertising and Photography Expense</b>	

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date <b>05.17.2025</b>	Payee name <b>Vince Ross Auctioneer Services</b>
---------------------------	---

Amount (\$) <b>\$800.00</b>	Payee address; City; State; Zip Code <b>210 Springs Edge Drive, Montgomery, Texas 77356</b>
--------------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Event Expense</b>	Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
	<b>Event Auctioneer</b>	

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

Date <b>05.17.2025</b>	Payee name <b>Veteran's of Foreign War Post #4709</b>
---------------------------	--

Amount (\$) <b>\$200.00</b>	Payee address; City; State; Zip Code <b>1303 West Semands Avenue, Conroe, Texas 77301</b>
--------------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Contribution/Donation</b>	Description Check if travel outside of Texas, complete Schedule T 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
--	-------------------------------	---------------	-------------

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

# 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)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 19	2 FILER NAME <b>PHILIP CASH</b>	3 Filer ID (Ethics Commission Filers)
----------------------------------	------------------------------------	---------------------------------------

4 Date 05.19.2025	5 Payee name Texas Top Cop Shop
----------------------	------------------------------------

6 Amount (\$) \$543.42	7 Payee address; City; State; Zip Code 1109 West Dallas Street, Conroe, Texas 77301
---------------------------	--

8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
--	---	--

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

Date 05.20.2025	Payee name Pacific Yard House
--------------------	----------------------------------

Amount (\$) \$187.00	Payee address; City; State; Zip Code 101 Metcalf Street, Conroe, Texas 77301
-------------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
	Campaign Meeting	

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

Date 06.04.2025	Payee name North Shore Republican Women
--------------------	--

Amount (\$) \$500.00	Payee address; City; State; Zip Code P. O. Box 1993, Montgomery, Texas 77356
-------------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution/Donation	Description Check if travel outside of Texas, complete Schedule T 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
--	-------------------------------	---------------	-------------

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

# 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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>19</b>	2 FILER NAME <b>PHILIP CASH</b>	3 Filer ID (Ethics Commission Filers)
---	------------------------------------	---------------------------------------

4 Date <b>06.09.2025</b>	5 Payee name <b>B Signs</b>
-----------------------------	--------------------------------

6 Amount (\$) <b>\$483.58</b>	7 Payee address; City; State; Zip Code <b>4239 Earnings Way, New Albany, IN 47150</b>
----------------------------------	--

8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) <b>Contribution/Donation</b>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
--	--	--

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

Date <b>06.09.2025</b>	Payee name <b>Willis Ag Booster Club</b>
---------------------------	---

Amount (\$) <b>\$4,000.00</b>	Payee address; City; State; Zip Code <b>P. O. Box 1735, Willis, Texas 77378</b>
----------------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Contribution/Donation</b>	Description Check if travel outside of Texas, complete Schedule T 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	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

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