

# 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:

103

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR

FIRST

MI

Mr

Ryan

NICKNAME

LAST

SUFFIX

Gable

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

PO Box 130966 Spring, TX 77393

Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

( 713 )

478-9485

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

FIRST

MI

Mr

Eric

NICKNAME

LAST

SUFFIX

Runyon

## OFFICE USE ONLY

Date Received



Date Hand-delivered or Date Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

7 CAMPAIGN  
TREASURER  
ADDRESS

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

CITY;

STATE;

ZIP CODE

7414 Shepherds Glen Spring, TX 77379

(Residence or Business)

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

( 832 )

764-3247

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 Modified  
Reporting Limit



Final Report (Attach C/OH - FR)

10 PERIOD  
COVERED

Month

Day

Year

Month

Day

Year

01 / 15 / 25

THROUGH

07 / 15 / 25

11 ELECTION

ELECTION DATE

Month

Day

Year

/ /



Primary



Runoff

ELECTION TYPE



Other  
Description



General



Special

12 OFFICE

OFFICE HELD (if any)

Montgomery Co Constable Pct 3

13 OFFICE SOUGHT (if known)

14 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

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

COMMITTEE TYPE

COMMITTEE NAME



GENERAL

COMMITTEE ADDRESS



SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 211,771.50
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 19,691.40
	4. TOTAL POLITICAL EXPENDITURES	\$ 143,765.70
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 544,631.96
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

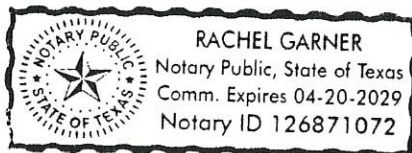
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*R. Gable*

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Ryan Gable this the 11 day of July, 2025, to certify which, witness my hand and seal of office.

*Rachel Garner*

*Rachel Garner*

*Notary Public*

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(month) (year)

Signature of Candidate/Officeholder (Declarant)

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3****19 FILER NAME****20 Filer ID (Ethics Commission Filers)****21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE****SUBTOTAL  
AMOUNT**

1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 189,425.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 22,346.50
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 143,765.70
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 24,657.96
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1: **53****2** FILER NAME  
Ryan Gable**3** Filer ID (Ethics Commission Filers)**4** Date  
  
01/27/25**5** Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Robert Walker**7** Amount of contribution (\$)**6** Contributor address; City; State; Zip Code  
13530 Walker Rd Willis, TX 77378

\$200.00

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
  
02/09/25Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Raymond & Erin Durdin

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
6007 Bermuda Dunes Houston, TX 77067

\$1500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
02/09/25Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Steve Anderson

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
710 S Frazier St Conroe, TX 77301

\$500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
02/09/25Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Doug Blake

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
4802 Ten Sleep Ln Friendswood, TX 77546

\$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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

02/11/25

5 Full name of contributor

Farouk Shami

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

7 Amount of contribution (\$)

\$5000.00

6 Contributor address;

City;

State;

Zip Code

250 Pennbright Dr Houston, TX 77090

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/11/25

Full name of contributor

Cody & Veronica Lovins

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

Amount of contribution (\$)

\$500.00

Contributor address;

City;

State;

Zip Code

14768 English Oaks Dr Montgomery, TX 77356

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/12/25

Full name of contributor

David Wood

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

Amount of contribution (\$)

\$800.00

Contributor address;

City;

State;

Zip Code

11620 Kingford Dr Montgomery, TX 77316

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/13/25

Full name of contributor

Don A. Buckalew Jr.

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

Amount of contribution (\$)

\$500.00

Contributor address;

City;

State;

Zip Code

PO Box 500 Conroe, TX 77305

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

The Instruction Guide explains how to complete this form.

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

Ryan Gable

**3** Filer ID (Ethics Commission Filers)**4** Date

02/13/25

**5** Full name of contributor

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

Jennifer Murray

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

\$2500.00

**6** Contributor address;

City;

State;

Zip Code

11226 Jones Rd W Houston, TX 77065

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

Date

02/13/25

Full name of contributor

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

Jesus Rodriguez

Amount of contribution (\$)

\$1500.00

Contributor address;

City;

State;

Zip Code

7222 Kinglet Court Katy, TX 77493

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/13/25

Full name of contributor

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

Brad &amp; Audrey Stapp

Amount of contribution (\$)

\$5000.00

Contributor address;

City;

State;

Zip Code

8527 Majestic Lake Ct Montgomery, TX 77316

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/14/25

Full name of contributor

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

Reynaldo Saldares

Amount of contribution (\$)

\$600.00

Contributor address;

City;

State;

Zip Code

5714 N Ossineke Dr Spring, TX 77386

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

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)
4 Date 02/18/25	5 Full name of contributor out-of-state PAC (ID#: Elizabeth M. Grimm 6 Contributor address; City; State; Zip Code 19 E Shale Creek Circle The Woodlands, TX 77382	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/18/25	Full name of contributor out-of-state PAC (ID#: Hutson Realty Partners, LLC Contributor address; City; State; Zip Code PO Box 1505 Conroe, TX 77305	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/25	Full name of contributor out-of-state PAC (ID#: Amy J. Milstead Contributor address; City; State; Zip Code 1415 Spring Hills Dr Spring, TX 77386	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/21/25	Full name of contributor out-of-state PAC (ID#: James Taylor Contributor address; City; State; Zip Code 8602 Sunny Ridge Dr Houston, TX 77095	Amount of contribution (\$) \$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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

02/24/25

5 Full name of contributor

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

Kyle & Tricia Brown

7 Amount of contribution (\$)

\$2500.00

6 Contributor address;

City;

State;

Zip Code

38 Thornblade Circle Spring, TX 77389

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/24/25

Full name of contributor

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

Heston Hale

Amount of contribution (\$)

\$600.00

Contributor address;

City;

State;

Zip Code

27823 Aleppo Grove Dr Spring, TX 77386

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/27/25

Full name of contributor

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

Greg Crocker

Amount of contribution (\$)

\$600.00

Contributor address;

City;

State;

Zip Code

418 Heather Ln Conroe, TX 77385

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/27/25

Full name of contributor

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

Wayne Mack Campaign

Amount of contribution (\$)

\$500.00

Contributor address;

City;

State;

Zip Code

PO Box 2234 Conroe, TX 77305

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

02/28/25

5 Full name of contributor

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

Joe & Suzanne Sutton

7 Amount of contribution (\$)

\$5000.00

6 Contributor address;

City;

State;

Zip Code

18 Grand Colonial

The Woodlands, TX 77382

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/28/25

Full name of contributor

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

Anthony Massoud

Amount of contribution (\$)

\$1500.00

Contributor address;

City;

State;

Zip Code

6515 Kodes Clay Ct

Spring, TX 77379

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/28/25

Full name of contributor

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

Brent Hill

Amount of contribution (\$)

\$2500.00

Contributor address;

City;

State;

Zip Code

11246 Majestic Dr

Montgomery, TX 77316

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/01/25

Full name of contributor

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

Kyle Bird

Amount of contribution (\$)

\$900.00

Contributor address;

City;

State;

Zip Code

13102 East Point Park

Louisville, KY 40223

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

03/01/25

5 Full name of contributor

David Abrahams

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

7 Amount of contribution (\$)

\$1500.00

6 Contributor address;

City;

State;

Zip Code

10323 Veterans Memorial Houston, TX 77038

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/01/25

Full name of contributor

Aven McBride

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

Amount of contribution (\$)

\$5000.00

Contributor address;

City;

State;

Zip Code

31102 Spring Lake Dr Tomball, TX 77375

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/01/25

Full name of contributor

Shannon McClure

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

Amount of contribution (\$)

\$500.00

Contributor address;

City;

State;

Zip Code

17407 Memorial Blossom Dr Spring, TX 77379

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/03/25

Full name of contributor

Premium Hand Carwash & Oil Change, LLC

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

Amount of contribution (\$)

\$1500.00

Contributor address;

City;

State;

Zip Code

842 Freeport St Houston, TX 77015

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

03/03/25

5 Full name of contributor

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

Tony Bolfig

7 Amount of contribution (\$)

\$200.00

6 Contributor address;

City;

State;

Zip Code

18407 Telge Rd Cypress, TX 77429

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/03/25

Full name of contributor

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

Strategy Professional Services, LLC

Amount of contribution (\$)

\$1500.00

Contributor address;

City;

State;

Zip Code

3911 Rolling Thicket Dr Spring, TX 77386

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/05/25

Full name of contributor

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

Michael W. Kossow

Amount of contribution (\$)

\$2500.00

Contributor address;

City;

State;

Zip Code

11322 Neeshaw Dr Houston, TX 77065

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/05/25

Full name of contributor

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

Michael Atkins

Amount of contribution (\$)

\$600.00

Contributor address;

City;

State;

Zip Code

31119 Blue Ridge Park Ln Spring, TX 77386

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

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)
4 Date 03/06/25	5 Full name of contributor out-of-state PAC (ID#: _____) Thomas & Julie Morin 6 Contributor address; City; State; Zip Code 3743 Purdue Houston, TX 77005	7 Amount of contribution (\$) \$1500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/07/25	Full name of contributor out-of-state PAC (ID#: _____) Valerie Jefferson Contributor address; City; State; Zip Code PO Box 1487 Navasota, TX 77868	Amount of contribution (\$) \$2500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/11/25	Full name of contributor out-of-state PAC (ID#: _____) Ridge Mason Contributor address; City; State; Zip Code 1505 Aldine Bender Houston, TX 77032	Amount of contribution (\$) \$2500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/11/25	Full name of contributor out-of-state PAC (ID#: _____) Colleen & Bill Ellison Contributor address; City; State; Zip Code 2161 Summit Mist Dr Conroe, TX 77304	Amount of contribution (\$) \$1500.00
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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)
4 Date 03/12/25	5 Full name of contributor out-of-state PAC (ID#: _____) Lee Tillman 6 Contributor address; City; State; Zip Code 43 North Palmiera Circle The Woodlands, TX 77382	7 Amount of contribution (\$) \$1500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/13/25	Full name of contributor out-of-state PAC (ID#: _____) David Walker Contributor address; City; State; Zip Code 1016 Enterprise Place Arlington, TX 76001	Amount of contribution (\$) \$2500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/14/25	Full name of contributor out-of-state PAC (ID#: _____) Hilda & Lane Lease Contributor address; City; State; Zip Code 25710 Eagle Chase Ln Spring, TX 77389	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/14/25	Full name of contributor out-of-state PAC (ID#: _____) Mark Herman Campaign Contributor address; City; State; Zip Code 18482 Kuykendahl Rd # 191 Spring, TX 77379	Amount of contribution (\$) \$2500.00
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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**2** FILER NAME  
Ryan Gable**3** Filer ID (Ethics Commission Filers)**4** Date  
  
03/17/25**5** Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Nick Roberts**7** Amount of contribution (\$)**6** Contributor address; City; State; Zip Code  
6318 N Lazy Meadow Way Spring, TX 77386

\$2500.00

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
  
03/17/25Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Dan Butler

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
157 Sanderling Ln Montgomery, TX 77316

\$1500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
03/18/25Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Theo Badea

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
3815 Benders Ln Spring, TX 77386

\$500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
03/18/25Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Louis Teal

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
29410 Commons Superior Huffman, TX 77336

\$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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

03/18/25

5 Full name of contributor

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

Danny Word

7 Amount of contribution (\$)

\$500.00

6 Contributor address;

City;

State;

Zip Code

40515 Remington Ln Magnolia, TX 77354

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/18/25

Full name of contributor

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

Mark Miller

Amount of contribution (\$)

\$800.00

Contributor address;

City;

State;

Zip Code

14719 Heritage Dr Magnolia, TX 77354

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/18/25

Full name of contributor

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

Eric Murray

Amount of contribution (\$)

\$600.00

Contributor address;

City;

State;

Zip Code

13436 Sterling Park Ln Cypress, TX 77429

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/18/25

Full name of contributor

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

Denise & Jason Baker

Amount of contribution (\$)

\$2500.00

Contributor address;

City;

State;

Zip Code

15431 I-45 South Conroe, TX 77385

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

The Instruction Guide explains how to complete this form.

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

Ryan Gable

**3** Filer ID (Ethics Commission Filers)**4** Date

03/21/25

**5** Full name of contributor

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

Billy Link

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

\$1500.00

**6** Contributor address;

City;

State;

Zip Code

719 Sawdust Rd # 115 The Woodlands, TX 77380

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

Date

03/21/25

Full name of contributor

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

Adam Dunn

Amount of contribution (\$)

\$1500.00

Contributor address;

City;

State;

Zip Code

11109 Beinhorn Rd Houston, TX 77024

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/21/25

Full name of contributor

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

Matthew Beckerman

Amount of contribution (\$)

\$5000.00

Contributor address;

City;

State;

Zip Code

2424 Honea Egypt Rd Magnolia, TX 77354

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/24/25

Full name of contributor

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

Carol &amp; Mark Feanny

Amount of contribution (\$)

\$2500.00

Contributor address;

City;

State;

Zip Code

10 Panamint Ct Spring, TX 77389

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

The Instruction Guide explains how to complete this form.

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

Ryan Gable

**3** Filer ID (Ethics Commission Filers)**4** Date

03/24/25

**5** Full name of contributor

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

Matt Cline

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

\$800.00

**6** Contributor address;

City;

State;

Zip Code

16010 Birchview Dr Tomball, TX 77377

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

Date

03/25/25

Full name of contributor

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

Michael Atkins

Amount of contribution (\$)

\$700.00

Contributor address;

City;

State;

Zip Code

31119 Blue Ridge Park Ln Spring, TX 77386

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/26/25

Full name of contributor

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

Pinch A Penny, LLC

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

2115 Rayford Rd, Ste 105 Spring, TX 77386

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/28/25

Full name of contributor

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

Frank Torres

Amount of contribution (\$)

\$3200.00

Contributor address;

City;

State;

Zip Code

27902 Robinson Park Dr Spring, TX 77389

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

03/28/25

5 Full name of contributor

Steven Terrell

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

7 Amount of contribution (\$)

\$500.00

6 Contributor address;

City;

State;

Zip Code

18715 Croftsmill Dr

New Coney, TX 77357

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/31/25

Full name of contributor

Aryn Wheaton

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

Amount of contribution (\$)

\$600.00

Contributor address;

City;

State;

Zip Code

9597 Jones Rd, Ste 851

Houston, TX 77065

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/31/25

Full name of contributor

John Marshall

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

Amount of contribution (\$)

\$600.00

Contributor address;

City;

State;

Zip Code

3806 Oreana Ct

Spring, TX 77386

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/31/25

Full name of contributor

ILA Local 28 PAC

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

Amount of contribution (\$)

\$1500.00

Contributor address;

City;

State;

Zip Code

4100 Greenshadow Dr

Pasadena, TX 77503

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

03/31/25

5 Full name of contributor

Chris Morgan

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

7 Amount of contribution (\$)

\$500.00

6 Contributor address;

City;

State;

Zip Code

104 E Elm St

Celina, TX 75009

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/01/25

Full name of contributor

Todd Graves

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

Amount of contribution (\$)

\$1000.00

Contributor address;

City;

State;

Zip Code

9410 Deer Patch Ln Magnolia, TX 77354

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/25

Full name of contributor

Jack Pedigo

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

Amount of contribution (\$)

\$1500.00

Contributor address;

City;

State;

Zip Code

11394 Grand Pine Dr Montgomery, TX 77356

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/25

Full name of contributor

Michael Carstens

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

Amount of contribution (\$)

\$600.00

Contributor address;

City;

State;

Zip Code

10803 West Lake Houston PKWY Houston, TX 77044

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <b>Ryan Gable</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>04/01/25</b>	5 Full name of contributor out-of-state PAC (ID#: _____) <b>Vinnie Vincent</b> 6 Contributor address; City; State; Zip Code <b>741 Mountain View Dr Montgomery, TX 77354</b>	7 Amount of contribution (\$)  <b>\$800.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/02/25</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Barry Donoho</b> Contributor address; City; State; Zip Code <b>175 Vue Point The Woodlands, TX 77380</b>	Amount of contribution (\$)  <b>\$750.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/02/25</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Viking Hiline</b> Contributor address; City; State; Zip Code <b>2408 Timberloch Pl, Ste C1 The Woodlands, TX 77380</b>	Amount of contribution (\$)  <b>\$750.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/02/25</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Steven Fink</b> Contributor address; City; State; Zip Code <b>31565 Timber Grove Spring, TX 77386</b>	Amount of contribution (\$)  <b>\$600.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME  
Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date  
04/04/25

5 Full name of contributor out-of-state PAC (ID#:  
Tad Roberts

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code  
25314 Pineglen Terrace Dr Spring, TX 77389

\$2500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
04/04/25

Full name of contributor out-of-state PAC (ID#:  
Daniel Signorelli

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
1401 Woodlands Parkway The Woodlands, TX 77380

\$500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
04/04/25

Full name of contributor out-of-state PAC (ID#:  
Danny Gurganus

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
PO Box 1835 Spring, TX 77383

\$500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
04/04/25

Full name of contributor out-of-state PAC (ID#:  
Kevin Cormier

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
19310 TC Jester Blvd # 623 Spring, TX 77379

\$1500.00

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

The Instruction Guide explains how to complete this form.

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

Ryan Gable

**3** Filer ID (Ethics Commission Filers)**4** Date

04/04/25

**5** Full name of contributor

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

Anthony Grijalva

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

\$100.00

**6** Contributor address;

City;

State;

Zip Code

20114 Calliope Knolls Dr Spring, TX 77379

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

Date

04/07/25

Full name of contributor

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

Priscilla Cote

Amount of contribution (\$)

\$500.00

Contributor address;

City;

State;

Zip Code

39 Tioga Pl Tomball, TX 77375

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/07/25

Full name of contributor

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

Evan Johnson

Amount of contribution (\$)

\$1500.00

Contributor address;

City;

State;

Zip Code

66 Red Sable Dr The Woodlands, TX 77380

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/09/25

Full name of contributor

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

Dominguez Dykeman

Amount of contribution (\$)

\$1500.00

Contributor address;

City;

State;

Zip Code

6309 Skyline Dr Houston, TX 77057

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.

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)
4 Date 04/09/25	5 Full name of contributor out-of-state PAC (ID#: _____) Charles Anderson 6 Contributor address; City; State; Zip Code 1415 Trails of Katy Ln Katy, TX 77494	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/09/25	Full name of contributor out-of-state PAC (ID#: _____) Jason Scott Contributor address; City; State; Zip Code PO Box 40786 Houston, TX 77240	Amount of contribution (\$) \$1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/09/25	Full name of contributor out-of-state PAC (ID#: _____) Frank Green Contributor address; City; State; Zip Code 15000 Mansions View Dr Conroe, TX 77384	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/09/25	Full name of contributor out-of-state PAC (ID#: _____) Alison L. Yee Contributor address; City; State; Zip Code 19 Destiny Cove The Woodlands, TX 77381	Amount of contribution (\$) \$800.00
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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

04/09/25

5 Full name of contributor

Corinne Catapano

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

7 Amount of contribution (\$)

\$2500.00

6 Contributor address;

City;

State;

Zip Code

97 Criminal Justice Dr Conroe, TX 77301

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/10/25

Full name of contributor

Darrell Hinkley

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

Amount of contribution (\$)

\$2500.00

Contributor address;

City;

State;

Zip Code

10115 Sweetwater Lane Houston, TX 77037

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/11/25

Full name of contributor

Ashby Snow

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

Amount of contribution (\$)

\$2500.00

Contributor address;

City;

State;

Zip Code

4908 Rowena Ave A Austin, TX 78751

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/11/25

Full name of contributor

Roberto Falcone

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

Amount of contribution (\$)

\$1600.00

Contributor address;

City;

State;

Zip Code

26 Silver Canyon Pl The Woodlands, TX 77381

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

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**2** FILER NAME  
Ryan Gable**3** Filer ID (Ethics Commission Filers)**4** Date  
04/11/25**5** Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Copenhero Gun Club**7** Amount of contribution (\$)**6** Contributor address; City; State; Zip Code  
28075 Robinson Rd Conroe, TX 77385

\$500.00

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
04/11/25Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Robert & Lindsey Kasprzak

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
27 Grand Regency Cir The Woodlands, TX 77382

\$1500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
04/17/25Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Joel Donawa

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
13315 Castlecombe Dr Houston, TX 77044

\$600.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
04/17/25Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
JOA Lozanos, LLC

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
610 Rayford Rd, Ste 650 Spring, TX 77386

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

The Instruction Guide explains how to complete this form.

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

Ryan Gable

**3** Filer ID (Ethics Commission Filers)**4** Date

04/17/25

**5** Full name of contributor

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

Carmine &amp; Gabriella Falcone

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

\$3200.00

**6** Contributor address;

City;

State;

Zip Code

38 Leeward Cove Dr The Woodlands, TX 77381

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

Date

04/17/25

Full name of contributor

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

Ceasar Sanchez

Amount of contribution (\$)

\$1000.00

Contributor address;

City;

State;

Zip Code

5550 Fellowship Pine Lane Spring, TX 77379

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/21/25

Full name of contributor

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

A G Multiservices, LLC

Amount of contribution (\$)

\$500.00

Contributor address;

City;

State;

Zip Code

3501 Aldine Mail Route Rd Houston, TX 77039

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/21/25

Full name of contributor

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

Alexis Van De Ven Sade

Amount of contribution (\$)

\$600.00

Contributor address;

City;

State;

Zip Code

107 Cartwright Rd Conroe, TX 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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**2** FILER NAME  
Ryan Gable**3** Filer ID (Ethics Commission Filers)**4** Date  
04/21/25**5** Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Thomas C. Howard**7** Amount of contribution (\$)**6** Contributor address; City; State; Zip Code  
26 Red Sable Dr The Woodlands, TX 77380

\$1000.00

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
04/21/25Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Carmine & Gabriella Falcone

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
38 Leeward Cove Dr The Woodlands, TX 77381

\$500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
04/21/25Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Carmine & Gabriella Falcone

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
38 Leeward Cove Dr The Woodlands, TX 77381

\$500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
04/21/25Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Brenda Dusenbury

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
28218 Wooded Mist Dr Spring, TX 77386

\$200.00

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

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**2** FILER NAME  
Ryan Gable**3** Filer ID (Ethics Commission Filers)**4** Date  
04/21/25**5** Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Carmine & Gabriella Falcone**7** Amount of contribution (\$)**6** Contributor address; City; State; Zip Code  
38 Leeward Cove Dr The Woodlands, TX 77381

\$100.00

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
04/21/25Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Carmine & Gabriella Falcone

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
38 Leeward Cove Dr The Woodlands, TX 77381

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
04/21/25Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Ken E. Stockton

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
100 San Marino Way Horseshoe Bay, TX 78657

\$500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
04/24/25Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
C. David Rhodes Attorney at Law

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
4405 Spring Cypress Rd, Ste 200 Spring, TX 77388

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)
4 Date 04/28/25	5 Full name of contributor out-of-state PAC (ID#: _____) Thomas & Penny Guyton 6 Contributor address; City; State; Zip Code 24346 S Newcastle Bay Trl Spring, TX 77389	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/28/25	Full name of contributor out-of-state PAC (ID#: _____) Telfryn & Elizabeth John Contributor address; City; State; Zip Code 15430 Woodlands Orchard Lane Cypress, TX 77433	Amount of contribution (\$) \$1500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/28/25	Full name of contributor out-of-state PAC (ID#: _____) Morris & Michelle White Contributor address; City; State; Zip Code 3610 Artesian Springs Ct Katy, TX 77494	Amount of contribution (\$) \$1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/28/25	Full name of contributor out-of-state PAC (ID#: _____) Randal E. Velarde Contributor address; City; State; Zip Code 1409 Post Oak Blvd, NBR 2502 Houston, TX 77056	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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

04/28/25

5 Full name of contributor

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

Cheryle A. Sanderson

7 Amount of contribution (\$)

\$200.00

6 Contributor address;

City;

State;

Zip Code

3 Misty Point The Woodlands, TX 77380

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/28/25

Full name of contributor

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

William B. Smith

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

187 Bonnie Ridge Circle Shenandoah, TX 77384

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/28/25

Full name of contributor

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

Brian Schweiker Real Estate Group

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

26203 Oak Ridge Dr The Woodlands, TX 77380

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/29/25

Full name of contributor

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

Augustine Lucio

Amount of contribution (\$)

\$1500.00

Contributor address;

City;

State;

Zip Code

2202 Deer Valley Spring, TX 77373

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <b>Ryan Gable</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>04/30/25</b>	5 Full name of contributor out-of-state PAC (ID#: _____) <b>TEWBELLAS LLC</b> 6 Contributor address; City; State; Zip Code <b>2907 Rayford Rd, Ste 101 Spring, TX 77386</b>	7 Amount of contribution (\$)  <b>\$1500.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>04/30/25</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Jordan Sexton</b> Contributor address; City; State; Zip Code <b>44 Autumn Cresnet The Woodlands, TX 77381</b>	Amount of contribution (\$)  <b>\$800.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>04/30/25</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Richie Lougee</b> Contributor address; City; State; Zip Code <b>115 West Street Willis, TX 77378</b>	Amount of contribution (\$)  <b>\$1500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>05/01/25</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Kenny Taylor</b> Contributor address; City; State; Zip Code <b>3714 Lovers Ln Montgomery, TX 77356</b>	Amount of contribution (\$)  <b>\$600.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)
4 Date 05/01/25	5 Full name of contributor out-of-state PAC (ID#: _____) Celeste Potter 6 Contributor address; City; State; Zip Code 27943 Presley Park Dr Spring, TX 77386	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: _____) James & Becky Sumner Contributor address; City; State; Zip Code 40006 Freemont Rd Magnolia, TX 77354	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: _____) Ryan & Christie Miller Contributor address; City; State; Zip Code 28647 Lockridge View Dr Spring, TX 77386	Amount of contribution (\$) \$475.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: _____) Matthew Beckerman Contributor address; City; State; Zip Code 2424 Honea Egypt Rd Magnolia, TX 77354	Amount of contribution (\$) \$2600.00
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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

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

Ryan Gable

**3** Filer ID (Ethics Commission Filers)**4** Date

05/02/25

**5** Full name of contributor

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

Mikee Eldridge

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

\$320.00

**6** Contributor address;

City;

State;

Zip Code

5907 Spring Cypress Rd Spring, TX 77379

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

Date

05/02/25

Full name of contributor

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

Jeffrey Steiner

Amount of contribution (\$)

\$650.00

Contributor address;

City;

State;

Zip Code

25515 Holly Springs Pl Spring, TX 77373

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

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

Chase McGrath

Amount of contribution (\$)

\$575.00

Contributor address;

City;

State;

Zip Code

3627 Kent Springs Ct Spring, TX 77386

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

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

Shannon Hicks

Amount of contribution (\$)

\$1900.00

Contributor address;

City;

State;

Zip Code

2261 Teas Crossing Dr Conroe, TX 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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

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

Ryan Gable

**3** Filer ID (Ethics Commission Filers)**4** Date

05/02/25

**5** Full name of contributor

James Wilkerson

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

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

\$700.00

**6** Contributor address;

City;

State;

Zip Code

5 Promenade Street N Montgomery, TX 77356

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

Date

05/02/25

Full name of contributor

Aven McBride

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

Amount of contribution (\$)

\$3000.00

Contributor address;

City;

State;

Zip Code

31102 Spring Lake Blvd Tomball, TX 77375

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

Jeffrey Steiner

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

Amount of contribution (\$)

\$2500.00

Contributor address;

City;

State;

Zip Code

25515 Holly Springs Pl Spring, TX 77373

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

Frank Torres

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

Amount of contribution (\$)

\$1500.00

Contributor address;

City;

State;

Zip Code

27902 Robinson Park Dr Spring, TX 77386

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

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)
4 Date 05/02/25	5 Full name of contributor out-of-state PAC (ID#: Mikee Eldridge 6 Contributor address; City; State; Zip Code 5907 Spring Cypress Rd Spring, TX 77379	7 Amount of contribution (\$) \$1200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: Charles Pistone Contributor address; City; State; Zip Code 119 E Park Dr Montgomery, TX 77356	Amount of contribution (\$) \$425.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: Austin Simmons Contributor address; City; State; Zip Code 198 S Cochrans green Cir The Woodlands, TX 77381	Amount of contribution (\$) \$2500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: Jeffrey Steiner Contributor address; City; State; Zip Code 25515 Holly Springs Pl Spring, TX 77373	Amount of contribution (\$) \$1500.00
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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

05/02/25

5 Full name of contributor

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

Zach Richmond

7 Amount of contribution (\$)

\$800.00

6 Contributor address;

City;

State;

Zip Code

6 Wild Ginger Court The Woodlands, TX 77380

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/02/25

Full name of contributor

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

Moaman Abdelbaky

Amount of contribution (\$)

\$2100.00

Contributor address;

City;

State;

Zip Code

24618 Fort Timbers Ct Spring, TX 77373

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

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

Joe Castro

Amount of contribution (\$)

\$1900.00

Contributor address;

City;

State;

Zip Code

PO Box 1313 Spring, TX 77318

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

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

Jason Miller

Amount of contribution (\$)

\$2000.00

Contributor address;

City;

State;

Zip Code

18319 Grimes Rd Cleveland, TX 77328

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

05/02/25

5 Full name of contributor

James Wilkerson

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

7 Amount of contribution (\$)

\$2200.00

6 Contributor address;

City;

State;

Zip Code

5 Promenade Street N Montgomery, TX 77356

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/02/25

Full name of contributor

Matthew Cline

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

Amount of contribution (\$)

\$2500.00

Contributor address;

City;

State;

Zip Code

15825 Hwy 249, Ste 4 Houston, TX 77086

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

Zach Richmond

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

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

6 Wild Ginger Court The Woodlands, TX 77380

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

Frank Torres

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

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

27902 Robinson Park Dr Spring, TX 77386

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

The Instruction Guide explains how to complete this form.

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

Ryan Gable

**3** Filer ID (Ethics Commission Filers)**4** Date

05/02/25

**5** Full name of contributor

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

Frank Torres

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

\$200.00

**6** Contributor address;

City;

State;

Zip Code

27902 Robinson Park Dr Spring, TX 77386

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

Date

05/02/25

Full name of contributor

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

Steven Loveless

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

14748 Highland Ranch Dr Montgomery, TX 77316

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

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

Anthony Firmature

Amount of contribution (\$)

\$50.00

Contributor address;

City;

State;

Zip Code

4406 Piney Creek Ln Spring, TX 77388

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

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

Chase McGrath

Amount of contribution (\$)

\$20.00

Contributor address;

City;

State;

Zip Code

3627 Kent Springs Ct Spring, TX 77386

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

05/02/25

5 Full name of contributor

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

Arthur Dubose

7 Amount of contribution (\$)

\$20.00

6 Contributor address;

City;

State;

Zip Code

3933 Marquette St Houston, TX 77005

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/02/25

Full name of contributor

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

Colton Chelootz

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

134 Hidden Peak Dr Montgomery, TX 77316

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

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

Cesar Sanchez

Amount of contribution (\$)

\$25.00

Contributor address;

City;

State;

Zip Code

5515 Fellowship Pine Circle Spring, TX 77379

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

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

David Eason

Amount of contribution (\$)

\$25.00

Contributor address;

City;

State;

Zip Code

402 Trace Way Dr Montgomery, TX 77316

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)
4 Date 05/02/25	5 Full name of contributor out-of-state PAC (ID#: _____) Tony Sartor 6 Contributor address; City; State; Zip Code 20707 Bending Pines Ln Spring, TX 77379	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: _____) Jack Doran Contributor address; City; State; Zip Code 5802 Cimmaron Court Spring, TX 77379	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: _____) Louis Garriga Contributor address; City; State; Zip Code 27615 Rio Blanco Dr Splendora, TX 77372	Amount of contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: _____) Jeffrey Dreesen Contributor address; City; State; Zip Code 4122 Irish Ivy Ct Spring, TX 77386	Amount of contribution (\$) \$25.00
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

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)
4 Date 05/02/25	5 Full name of contributor out-of-state PAC (ID#: Luke Kosa 6 Contributor address; City; State; Zip Code 2114 Rope Maker Rd Conroe, TX 77384	7 Amount of contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: Jack Pedigo Contributor address; City; State; Zip Code 335 Pennbriht Dr, Ste 104 Houston, TX 77090	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: JJ Hollie Contributor address; City; State; Zip Code 247 Hazelcrest Dr The Woodlands, TX 77382	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: Barry Donoho Contributor address; City; State; Zip Code 175 Vue Point Pl The Woodlands, TX 77380	Amount of contribution (\$) \$20.00
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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

05/02/25

5 Full name of contributor

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

Zachery Chebul

7 Amount of contribution (\$)

\$25.00

6 Contributor address;

City;

State;

Zip Code

27027 Hidden Cove Landing Dr Spring, TX 77386

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/02/25

Full name of contributor

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

Stephen Sills

Amount of contribution (\$)

\$50.00

Contributor address;

City;

State;

Zip Code

6315 N Lazy Meadow Way Spring, TX 77386

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

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

Robert Stratton

Amount of contribution (\$)

\$20.00

Contributor address;

City;

State;

Zip Code

28306 Madelin Manor Ln Spring, TX 77386

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

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

Joseph Zegarelli

Amount of contribution (\$)

\$200.00

Contributor address;

City;

State;

Zip Code

27107 W Balsam Fir Cir Spring, TX 77386

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

05/02/25

5 Full name of contributor

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

Shane Daniel

7 Amount of contribution (\$)

\$25.00

6 Contributor address;

City;

State;

Zip Code

1602 Cafe Dumonde Conroe, TX 77304

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/02/25

Full name of contributor

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

Martin Uselton

Amount of contribution (\$)

\$50.00

Contributor address;

City;

State;

Zip Code

13231 Somalia Springs Dr Conroe, TX 77302

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

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

Zach Armstrong

Amount of contribution (\$)

\$25.00

Contributor address;

City;

State;

Zip Code

95 N Greenvine Cir The Woodlands, TX 77382

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

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

Matthew Beckerman

Amount of contribution (\$)

\$50.00

Contributor address;

City;

State;

Zip Code

2424 Honea Egypt Rd Magnolia, TX 77354

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

05/02/25

5 Full name of contributor

Kyle Suhl

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

7 Amount of contribution (\$)

\$50.00

6 Contributor address;

City;

State;

Zip Code

2800 Post Oak Blvd Houston, TX 77056

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/02/25

Full name of contributor

Cade Lowry

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

Amount of contribution (\$)

\$20.00

Contributor address;

City;

State;

Zip Code

3630 Karissa Rd Conroe, TX 77306

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

Russell Lofton

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

Amount of contribution (\$)

\$20.00

Contributor address;

City;

State;

Zip Code

1106 Ave C Sweeny, TX 77480

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

James Blake

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

Amount of contribution (\$)

\$40.00

Contributor address;

City;

State;

Zip Code

4802 Ten Sleep Lane Friendswood, TX 77546

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

05/02/25

5 Full name of contributor

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

Christopher Balboa

7 Amount of contribution (\$)

\$50.00

6 Contributor address;

City;

State;

Zip Code

3902 Woody Guthrie Deer Park, TX 77536

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/02/25

Full name of contributor

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

Steven Sprague

Amount of contribution (\$)

\$20.00

Contributor address;

City;

State;

Zip Code

31 Genesee Ridge Dr Conroe, TX 77385

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

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

Charles Cobb

Amount of contribution (\$)

\$20.00

Contributor address;

City;

State;

Zip Code

27 Shimmer Pond Pl Conroe, TX 77385

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

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

Kristin Christ

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

29567 Tudor Way Magnolia, TX 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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

05/02/25

5 Full name of contributor

Matthew Cline

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

7 Amount of contribution (\$)

\$200.00

6 Contributor address;

City;

State;

Zip Code

15825 Hwy 249, Ste 4 Houston, TX 77086

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/02/25

Full name of contributor

Amie Charron

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

Amount of contribution (\$)

\$20.00

Contributor address;

City;

State;

Zip Code

176 Melrose Dr Montgomery, TX 77356

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

Richard Lougee

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

Amount of contribution (\$)

\$25.00

Contributor address;

City;

State;

Zip Code

115 W Stewart Street Willis, TX 77378

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

David Massie

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

Amount of contribution (\$)

\$50.00

Contributor address;

City;

State;

Zip Code

1711 Parkland Dr College Station, TX 77845

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

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)
4 Date 05/02/25	5 Full name of contributor out-of-state PAC (ID#: _____) Jose Rangel 6 Contributor address; City; State; Zip Code 19930 Letchfield Hollow Spring, TX 77379	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: _____) Carmine Falcone Contributor address; City; State; Zip Code 38 Leeward Cove Dr The Woodlands, TX 77381	Amount of contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: _____) Yann Bigot Contributor address; City; State; Zip Code 504 Avondale Houston, TX 77006	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: _____) Isaac Reed Contributor address; City; State; Zip Code 11814 Chalk Hill Ct Humble, TX 77346	Amount of contribution (\$) \$10.00
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

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)
4 Date 05/02/25	5 Full name of contributor out-of-state PAC (ID#: Hans Lehmann 6 Contributor address; City; State; Zip Code 14 Chesire Glen Ct Spring, TX 77381	7 Amount of contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: Aaron Williams Contributor address; City; State; Zip Code 3940 Windsor Mist Ln Spring, TX 77386	Amount of contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: Joshua Mutschler Contributor address; City; State; Zip Code 43 Tealight Pl Tomball, TX 77375	Amount of contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: Heston Hale Contributor address; City; State; Zip Code 27823 Aleppo Grove Dr Spring, TX 77386	Amount of contribution (\$) \$25.00
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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)
4 Date 05/02/25	5 Full name of contributor out-of-state PAC (ID#: _____) Clinton Floyd 6 Contributor address; City; State; Zip Code 135 W Burberry Cir Conroe, TX 77384	7 Amount of contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: _____) Taylor Murray Contributor address; City; State; Zip Code 51 Winthrop Road Chester, CT 06412	Amount of contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: _____) Casey McBride Contributor address; City; State; Zip Code 31102 Spring Lake Blvd Tomball, TX 77375	Amount of contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: _____) Lucas Robertson Contributor address; City; State; Zip Code 208 Purple Sale Pl The Woodlands, TX 77381	Amount of contribution (\$) \$20.00
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

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)
4 Date 05/02/25	5 Full name of contributor out-of-state PAC (ID#: _____) Ridge Mason 6 Contributor address; City; State; Zip Code 1505 Aldine Bender Houston, TX 77032	7 Amount of contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: _____) James Wheaton Contributor address; City; State; Zip Code 1029 Hwy 6 North Houston, TX 77079	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: _____) Ryan Grimes Contributor address; City; State; Zip Code 842 Freeport St Houston, TX 77015	Amount of contribution (\$) \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: _____) Craig Ward Contributor address; City; State; Zip Code 79 Grandview Blvd Montgomery, TX 77356	Amount of contribution (\$) \$40.00
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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 Date

05/02/25

5 Full name of contributor

Tanner Crow

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

7 Amount of contribution (\$)

\$30.00

6 Contributor address;

City;

State;

Zip Code

6000 W Rayford Rd, Apt. 4217 Spring, TX 77386

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/02/25

Full name of contributor

James Davis

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

Amount of contribution (\$)

\$20.00

Contributor address;

City;

State;

Zip Code

2907 Rayford Rd, Ste 100 Spring, TX 77386

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

James Taylor

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

Amount of contribution (\$)

\$90.00

Contributor address;

City;

State;

Zip Code

86 Murphy Farm Rd Huntsville, TX 77320

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/25

Full name of contributor

Kevin Fegurgur

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

Amount of contribution (\$)

\$20.00

Contributor address;

City;

State;

Zip Code

9310 Victoria Valley Ct Porter, TX 77365

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

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)
4 Date 05/02/25	5 Full name of contributor out-of-state PAC (ID#: _____) Joseph Mitchell 6 Contributor address; City; State; Zip Code PO Box 17428 Austin, TX 78760	7 Amount of contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: _____) Zach Richmond Contributor address; City; State; Zip Code 6 Wild Ginger Court The Woodlands, TX 77380	Amount of contribution (\$) \$1500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: _____) Karley Averitt Contributor address; City; State; Zip Code PO Box 7859 Spring, TX 77387	Amount of contribution (\$) \$600.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: _____) Kristin Christ Contributor address; City; State; Zip Code 29567 Tudor Way Magnolia, TX 77355	Amount of contribution (\$) \$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

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)
4 Date 05/02/25	5 Full name of contributor out-of-state PAC (ID#: Cade Lowery 6 Contributor address; City; State; Zip Code 3630 Karissa Rd Conroe, TX 77302	7 Amount of contribution (\$) \$600.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/02/25	Full name of contributor out-of-state PAC (ID#: Morgan Bourque Contributor address; City; State; Zip Code 59 Huntsman Horn Circle The Woodlands, TX 77380	Amount of contribution (\$) \$800.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/05/25	Full name of contributor out-of-state PAC (ID#: The Blair Law Firm, P. C. Contributor address; City; State; Zip Code 7 Grogans Park Drive, Building # 3 The Woodlands, TX 77380	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/05/25	Full name of contributor out-of-state PAC (ID#: Linebarger Goggan Blair & Sampson, LLC Contributor address; City; State; Zip Code PO Box 17428 Austin, TX 78760	Amount of contribution (\$) \$300.00
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

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)
4 Date 05/05/25	5 Full name of contributor out-of-state PAC (ID#: Lincoln Goodwin 6 Contributor address; City; State; Zip Code 8765 Spring Cypress Rd, Ste L No 172 Spring, TX 77379	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/05/25	Full name of contributor out-of-state PAC (ID#: Rayford Plaza, LLC Contributor address; City; State; Zip Code 3910 Waterbend Cove Spring, TX 77386	Amount of contribution (\$) \$800.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/05/25	Full name of contributor out-of-state PAC (ID#: David A. Whitehead Contributor address; City; State; Zip Code 32403 Edgewater Dr Magnolia, TX 77354	Amount of contribution (\$) \$800.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/05/25	Full name of contributor out-of-state PAC (ID#: Matt Gray Campaign Contributor address; City; State; Zip Code PO Box 1469 Porter, TX 77365	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

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)
4 Date 05/05/25	5 Full name of contributor out-of-state PAC (ID#: Brad Stapp 6 Contributor address; City; State; Zip Code 8527 Majestic Lake Ct Montgomery, TX 77316	7 Amount of contribution (\$) \$1200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/05/25	Full name of contributor out-of-state PAC (ID#: Joe Castro Contributor address; City; State; Zip Code 4047 Steep Woods Dr Spring, TX 77386	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/06/25	Full name of contributor out-of-state PAC (ID#: Joseph Shedarowich Contributor address; City; State; Zip Code 116 Waterstone Dr Montgomery, TX 77356	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/08/25	Full name of contributor out-of-state PAC (ID#: Braden Bailess Memorial Foundation Contributor address; City; State; Zip Code 15 N Spring Brook Ct Spring, TX 77382	Amount of contribution (\$) \$4000.00
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

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)
4 Date 05/05/25	5 Full name of contributor out-of-state PAC (ID#: _____) John & Antoinette Vasquez 6 Contributor address; City; State; Zip Code 8114 Winding Oak Ln Spring, TX 77379	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/20/25	Full name of contributor out-of-state PAC (ID#: _____) A. Vela Contributor address; City; State; Zip Code 31232 Baker Lake Dr Spring, TX 77386	Amount of contribution (\$) \$400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/10/25	Full name of contributor out-of-state PAC (ID#: _____) Alison & Hilton Yee Contributor address; City; State; Zip Code 19 Destiney Cove The Woodlands, TX 77381	Amount of contribution (\$) \$1700.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
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.		



## SCHEDULE A2

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

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

\$ 22,346.50

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

8 Amount of

05/02/25

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

**\$500.00**

## BBQ Dinner

30202 Nanton Dr Spring, TX 77386

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 \_\_\_\_\_

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

Amount of Contribution \$

In-kind contribution description

05/02/25

Contributor address; City; State; Zip Code

\$500.00

## Shotgun

~~15825 Hwy 249, Ste 4 Houston, TX 77086~~

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

**Business Owner**

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

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 05/02/25	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ronald Glaze 7 Contributor address; City; State; Zip Code 448 B Morgan Rd Bedias, TX 77831	8 Amount of Contribution \$ \$650.00	9 In-kind contribution description DeWalt Chop
		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Police Lieutenant		11 Employer (FOR NON-JUDICIAL)(See Instructions) Montgomery Co Constable Pct 3	
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 05/02/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Rick Brass Contributor address; City; State; Zip Code 7035 Pleasure Lake Dr Willis, TX 77318	Amount of Contribution \$ \$400.00	In-kind contribution description Lever Action Rifle
		Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Police Sergeant		Employer (FOR NON-JUDICIAL)(See Instructions) Montgomery Co Constable Pct 3	
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.**

2 FILER NAME

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

**\$**

**6** Full name of contributor ☐ out-of-state PAC (ID#:

**8** Amount of Contribution \$

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

## Deer Horn Knife

Check if travel outside of Texas. Complete Schedule T.

11 Employer (FOR NON-JUDICIAL)(See Instructions)

Montgomery Co Constable Pct 3

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

**15** Law firm of contributor's spouse (if any) (FOR JUDICIAL)

Date \_\_\_\_\_

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

## Rick Brass

Amount of Contribution \$

**In-kind contribution description**

Contributor address; City; State; Zip Code

**\$150.00**

Pistol

7035 Pleasure Lake Dr Willis, TX 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)

Police Sergeant

Montgomery Co Constable Pct 3

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

05/02/25

6 Full name of contributor

Augustine Lucio

☐ out-of-state PAC (ID#:

7 Contributor address; City; State; Zip Code

301 Bennington St Houston, TX 77022

8 Amount of Contribution \$

\$2500.00

9 In-kind contribution description

Guided Fish Trip

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Business Owner

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

05/02/25

Full name of contributor

Chris Davis

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

1900 Hughes Landing Blvd The Woodlands, TX 77380

Amount of Contribution \$

\$1200.0

In-kind contribution description

Dinner for Six

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Regional Partner

Employer (FOR NON-JUDICIAL) (See Instructions)

Trulucks

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.**

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

**\$**

Check if travel outside of Texas. Complete Schedule T.

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

Check if travel outside of Texas. Complete Schedule T.

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

Revised 1/1/2025

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2:	
2 FILER NAME Ryan Gable			3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS			\$	
5 Date 05/02/25	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ryan Miller		8 Amount of Contribution \$ \$3500.00	9 In-kind contribution description Camera System
		7 Contributor address; City; State; Zip Code 28647 Lockridge View Dr Spring, TX 77386	Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Business Owner			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 05/02/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Joe Castro		Amount of Contribution \$ 2200.00	In-kind contribution description Handgun
		Contributor address; City; State; Zip Code PO Box 1313 Spring, TX 77318	Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Business Owner			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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:

2 FILER NAME

Ryan Gable

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

05/02/25

6 Full name of contributor

Ron Tooker

☐ out-of-state PAC (ID#)

7 Contributor address; City; State; Zip Code

18123 Kuykendahl Rd Spring, TX 77379

8 Amount of Contribution \$

\$300.00

9 In-kind contribution description

Shotgun

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Business Owner

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

05/02/25

Full name of contributor

Joe Castro

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

PO Box 1313 Spring, TX 77318

Amount of Contribution \$

1000.00

In-kind contribution description

Handgun

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Business Owner

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:

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

\$

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

8	Amount of Contribution \$
1	100
2	100
3	100
4	100
5	100
6	100
7	100
8	100
9	100
10	100
11	100
12	100
13	100
14	100
15	100
16	100
17	100
18	100
19	100
20	100
21	100
22	100
23	100
24	100
25	100
26	100
27	100
28	100
29	100
30	100
31	100
32	100
33	100
34	100
35	100
36	100
37	100
38	100
39	100
40	100
41	100
42	100
43	100
44	100
45	100
46	100
47	100
48	100
49	100
50	100
51	100
52	100
53	100
54	100
55	100
56	100
57	100
58	100
59	100
60	100
61	100
62	100
63	100
64	100
65	100
66	100
67	100
68	100
69	100
70	100
71	100
72	100
73	100
74	100
75	100
76	100
77	100
78	100
79	100
80	100
81	100
82	100
83	100
84	100
85	100
86	100
87	100
88	100
89	100
90	100
91	100
92	100
93	100
94	100
95	100
96	100
97	100
98	100
99	100
100	100

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

## Sentsy Basket

Check if travel outside of Texas. Complete Schedule T.

11 Employer (FOR NON-JUDICIAL) (See Instructions)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

**15** Law firm of contributor's spouse (if any) (FOR JUDICIAL)

Date \_\_\_\_\_

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

Amount of Contribution \$

**In-kind contribution description**

**Tony Bryant**

\$400.00

## Gift Certificate

Contributor address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL)(See Instructions)

Business Owner

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

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 05/02/25	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry Ashabranner	8 Amount of Contribution \$ \$500.00	9 In-kind contribution description Handgun
7 Contributor address; City; State; Zip Code 1710 FM 1960 Bypass Rd East Humble, TX 77338		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Business owner		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 05/02/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry Ashabranner	Amount of Contribution \$ \$400.00	In-kind contribution description Patrol Rifle
Contributor address; City; State; Zip Code 1710 FM 1960 Bypass Rd East Humble, TX 77338		Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Business Owner		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:	
2 FILER NAME Ryan Gable			3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS			\$	
5 Date 05/02/25	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephanie Harbin		8 Amount of Contribution \$ \$500.00	9 In-kind contribution description Weber Grill
7 Contributor address; City; State; Zip Code 10720 Kuykendahl Rd The Woodlands, TX 77381			Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Manager			11 Employer (FOR NON-JUDICIAL) (See Instructions) Alspaugh's Ace Hardware	
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 05/02/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Simmons		Amount of Contribution \$ 2500.00	In-kind contribution description Catered Dinner
Contributor address; City; State; Zip Code 198 S Cochrans Green Cir The Woodlands, TX 77381			Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Business Owner			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

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 05/02/25	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Brian Symank 7 Contributor address; City; State; Zip Code 11998 Forest View Trail Conroe, TX 77385	8 Amount of Contribution \$ \$450.00	9 In-kind contribution description Chainsaw
		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Business Owner		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 05/02/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Andy Kerman Contributor address; City; State; Zip Code 3789 Rayford Rd Spring, TX 77386	Amount of Contribution \$ \$400.00	In-kind contribution description BBQ Basket
		Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Business Owner		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

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 05/02/25	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Steve Ener 7 Contributor address; City; State; Zip Code 19539 N Oblong Cir Cypress, TX 77429	8 Amount of Contribution \$ \$335.75	9 In-kind contribution description Soft Drinks
		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Deputy		11 Employer (FOR NON-JUDICIAL) (See Instructions) Montgomery Co Constable Pct 3	
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 05/02/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Sammy Bush Contributor address; City; State; Zip Code 7115 Diamond Falls Dr Spring, TX 77389	Amount of Contribution \$ \$335.75	In-kind contribution description Soft Drinks
		Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Business Owner		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.			



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 27		<b>2</b> FILER NAME Ryan Gable		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 01/14/25		<b>5</b> Payee name Carl Flores			
<b>6</b> Amount (\$) \$250.00		<b>7</b> Payee address; City; State; Zip Code 201 Pruitt Rd, Apt 431 Spring, TX 77380			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense		<b>(b)</b> Description Security for a Political Event		
	<b>(c)</b> 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 01/17/25		Payee name Trulucks			
Amount (\$) \$444.10		Payee address; City; State; Zip Code 1900 Hughes Landing Blvd The Woodlands, TX 77380			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Political Dinner Meeting		
	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 01/18/25		Payee name SableUSA Knife Company			
Amount (\$) \$422.18		Payee address; City; State; Zip Code 17623 Rose Summit Ln Richmond, TX 77407			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Auction Item		
	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 MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)	
4 Date 01/19/25		5 Payee name Chase Card Services			
6 Amount (\$) \$9,601.24		7 Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094-4014			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment		(b) Description Pay Credit Card Charges		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
Date 01/22/25		Payee name HEB			
Amount (\$) \$337.77		Payee address; City; State; Zip Code 3540 Rayford Rd Spring, TX 77386			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Supplies for Political Dinner Event		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
Date 01/28/25		Payee name Diamonds in the Rough			
Amount (\$) \$890.00		Payee address; City; State; Zip Code 9391 Grogans Mill, Ste B The Woodlands, TX 77380			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Auction Item		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)	
4 Date 02/03/25		5 Payee name Diamonds in the Rough			
6 Amount (\$) \$495.00		7 Payee address; City; State; Zip Code 9391 Grogans Mill, Ste B The Woodlands, TX 77380			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Auction Item		
	(c) 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					
Date 02/06/25		Payee name Liberty Belles Republican Women			
Amount (\$) \$250.00		Payee address; City; State; Zip Code PO Box 1081 Conroe, TX 77305			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By		Description Sponsor 2025 Mardi Gras Event		
	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					
Date 02/09/25		Payee name The Woodlands High School Quarterback Club			
Amount (\$) \$7,750.00		Payee address; City; State; Zip Code 6700 Woodlands Parkway, Ste 230 PMB # 650 The Woodlands, TX 77382			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By		Description Annual Football Platinum Sponsor		
	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					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Ryan Gable	3 Filer ID (Ethics Commission Filers)
----------------------------	----------------------------	---------------------------------------

4 Date 02/11/25	5 Payee name Conroe Savage Baseball Association
--------------------	--

6 Amount (\$) \$500.00	7 Payee address; 16897 Blue Jay St Conroe, TX 77385	City;	State;	Zip Code
---------------------------	--	-------	--------	----------

8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	(b) Description Baseball Sponsor
	(c) Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

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

Date 02/13/25	Payee name Chase Card Services
------------------	-----------------------------------

Amount (\$) \$4,868.69	Payee address; PO Box 94014 Palatine, IL 60094-4014	City;	State;	Zip Code
---------------------------	--	-------	--------	----------

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description Credit Card Payment
	Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

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

Date 02/13/25	Payee name Trulucks
------------------	------------------------

Amount (\$) \$284.52	Payee address; 1900 Hughes Landing Blvd The Woodlands, TX 77380	City;	State;	Zip Code
-------------------------	--	-------	--------	----------

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Political Dinner Meeting
	Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)	
4 Date 02/20/25		5 Payee name Children's Safe Harbor			
6 Amount (\$) \$1,000.00		7 Payee address; City; State; Zip Code 1519 Oddfellow Conroe, TX 77301			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By		(b) Description Sponsor Fundraiser		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
Date 02/20/25		Payee name Trulucks			
Amount (\$) \$605.14		Payee address; City; State; Zip Code 1900 Hughes landing Blvd The Woodlands, TX 77380			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By		Description Host Children's Safe Harbor Breakfast		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
Date 02/24/25		Payee name Amazon			
Amount (\$) \$257.39		Payee address; City; State; Zip Code 440 Terry Ave N Seattle, WA 98109			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description Office Equipment		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)	
4 Date 02/28/25		5 Payee name The Sportsmen's Outlet			
6 Amount (\$) \$2,220.08		7 Payee address; City; State; Zip Code 1710 FM 1960 Bypass East Humble, TX 77338			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By		(b) Description Auction Item 2025 Pavillion Wine Dinner		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH					
Date 02/28/25		Candidate / Officeholder name Office sought Office held			
Amount (\$) \$636.07		Payee name Waterway Marriott			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description Interfaith Home Town Hero's Event	
Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/OH					
Date 02/28/25		Candidate / Officeholder name Office sought Office held			
Amount (\$) \$234.68		Payee name Waterway Marriott			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description Interfaith Home Town Hero's Event	
Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/OH					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1		2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)	
4 Date 03/01/25		5 Payee name Trulucks			
6 Amount (\$) \$238.04		7 Payee address; City; State; Zip Code 1900 Hughes Landing Blvd The Woodlands, TX 77380			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Political Dinner Meeting		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH					
Date 03/08/25		Payee name Pappasito's			
Amount (\$) \$306.53		Payee address; City; State; Zip Code 18101 I-45 South Conroe, TX 77385			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Political Dinner Meeting		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH					
Date 03/11/25		Payee name Graphic Results			
Amount (\$) \$351.81		Payee address; City; State; Zip Code 6315B FM 1488 Rd, Ste 227 Magnolia, TX 77354			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Laser Tumblers with Campaign Logo		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:		<b>2</b> FILER NAME Ryan Gable		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 03/14/25		<b>5</b> Payee name Chase Card Services			
<b>6</b> Amount (\$) \$3,396.09		<b>7</b> Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094-4014			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment		<b>(b)</b> Description Pay Credit Card Charges		
	<b>(c)</b> 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					
Date 03/14/25		Payee name Amerigo's Grille			
Amount (\$) \$346.06		Payee address; City; State; Zip Code 25250 Grogans Park Dr The Woodlands, TX 77380			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Political Dinner Meeting		
	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					
Date 03/20/25		Payee name Spring Masonic Lodge # 1174			
Amount (\$) \$600.00		Payee address; City; State; Zip Code 26514 Preston Ave Spring, TX 77373			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution/Donation Made By		Description Sponsor 2025 Golf Tournament		
	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					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <b>Ryan Gable</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>03/20/25</b>	5 Payee name <b>American Furniture Warehouse</b>		
6 Amount (\$) <b>\$1,491.69</b>	7 Payee address; City; State; Zip Code <b>12310 I-45 South Conroe, TX 77304</b>		
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Office Overhead/Rental Expense</b>		(b) Description <b>Office Furniture</b>
	(c) Check if travel outside of Texas. Complete Schedule T. <span style="float:right;">Check if Austin, TX, officeholder living expense</span>		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name <span style="float:right;">Office sought <span style="float:right;">Office held</span></span>			
Date <b>03/22/25</b>	Payee name <b>Pappasito's</b>		
Amount (\$) <b>\$332.77</b>	Payee address; City; State; Zip Code <b>18101 I-45 South Conroe, TX 77385</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Food/Beverage Expense</b>		Description <b>Political Dinner Meeting</b>
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right;">Check if Austin, TX, officeholder living expense</span>		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name <span style="float:right;">Office sought <span style="float:right;">Office held</span></span>			
Date <b>03/23/25</b>	Payee name <b>Waterway Marriott</b>		
Amount (\$) <b>\$234.68</b>	Payee address; City; State; Zip Code <b>1601 Lake Robbins Dr The Woodlands, TX 77380</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Food/Beverage Expense</b>		Description <b>Gathering with Supporters</b>
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right;">Check if Austin, TX, officeholder living expense</span>		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name <span style="float:right;">Office sought <span style="float:right;">Office held</span></span>			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)	
4 Date 03/23/25		5 Payee name The Cynthia Woods Mitchell Pavillion			
6 Amount (\$) \$500.00		7 Payee address; City; State; Zip Code 2005 Lake Robbins Dr The Woodlands, TX 77380			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By		(b) Description Donation 2025 Partner's Wine Dinner		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 03/26/25		Payee name Diamonds in the Rough			
Amount (\$) \$250.00		Payee address; City; State; Zip Code 9391 Grogans Mill Rd, Ste B The Woodlands, TX 77380			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Auction Item for Campaign Fundraiser		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 03/26/25		Payee name Willis Operation Graduation 2025			
Amount (\$) \$500.00		Payee address; City; State; Zip Code 12182 Mustang Ave Willis, TX 77378			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By		Description Sponsor Willis H.S. Safe Graduation		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)	
4 Date 03/26/25		5 Payee name Turtlebox			
6 Amount (\$) \$714.45		7 Payee address; City; State; Zip Code 11020 Katy Freeway, Ste 202 Houston, TX 77043			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Auction/Door Prizes Golf Tournament		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
Date 03/26/25		Payee name Kiwanis Prayer Breakfast			
Amount (\$) \$500.00		Payee address; City; State; Zip Code 18645 Residence Dr Shenandoah, TX 77385			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By		Description Sponsor Prayer Breakfast		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
Date 03/31/25		Payee name Trulucks			
Amount (\$) \$227.81		Payee address; City; State; Zip Code 1900 Hughes Landing Blvd The Woodlands, TX 77380			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Political Dinner Meeting		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)	
4 Date 03/31/25		5 Payee name Trulucks			
6 Amount (\$) \$310.00		7 Payee address; City; State; Zip Code 1900 Hughes Landing Blvd The Woodlands, TX 77380			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Political Dinner Meeting		
	(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 04/01/25		Payee name Montgomery County Republican Women			
Amount (\$) \$250.00		Payee address; City; State; Zip Code PO Box 1766 Conroe, TX 77305			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By		Description Donation		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 04/03/25		Payee name Terra Vino			
Amount (\$) \$280.57		Payee address; City; State; Zip Code 2520 Research Forest Dr The Woodlands, TX 77381			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Political Dinner Meeting		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)	
4 Date 04/04/25		5 Payee name Saddle River Range			
6 Amount (\$) \$2,163.92		7 Payee address: City: State: Zip Code 4280 FM 1488 Conroe, TX 77384			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Auction Item for Golf Tournament		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH					
Date 04/07/25		Payee name Pappasito's			
Amount (\$) \$341.77		Payee address: City: State: Zip Code 10005 FM 1960 Humble, TX 77338			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Golf Tournament Meeting		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH					
Date 04/08/25		Payee name The Sportsmen's Outlet			
Amount (\$) \$698.89		Payee address: City: State: Zip Code 1710 FM 1960 Bypass East Humble, TX 77338			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Auction Item - Annual Golf Tournament		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH					
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 ONLY if direct expenditure to benefit C/OH					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)	
4 Date 04/08/25		5 Payee name Commissioner Wheeler Campaign			
6 Amount (\$) \$1,000.00		7 Payee address; City; State; Zip Code 25511 Budde Rd, Baylor Bldg # 302 The Woodlands, TX 77380			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By		(b) Description Campaign Contribution		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Rich Wheeler		Office sought Office held Pct 3 Commissioner	
Date 04/09/25		Payee name Top Florist			
Amount (\$) \$378.88		Payee address; City; State; Zip Code 25119 Grogans Mill Rd			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense		Description Memorial Flowers		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 04/10/25		Payee name Northwest Pawn			
Amount (\$) \$1,500.00		Payee address; City; State; Zip Code 18123 Kuykendahl Rd Spring, TX 77379			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Auction Items - Annual Golf Tournament		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)	
4 Date 04/13/25		5 Payee name Pappasito's			
6 Amount (\$) \$330.63		7 Payee address; City; State; Zip Code 18101 I-45 South Conroe, TX 77385			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Annual Golf Tournament Meeting		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH					
Date 04/15/25		Payee name Chase Card Services			
Amount (\$) \$8,129.94		Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094-4014			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment		Description Pay Credit Card Charges		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH					
Date 04/17/25		Payee name Total Wine & More			
Amount (\$) \$335.22		Payee address; City; State; Zip Code 1900 Lake Woodlands Dr The Woodlands, TX 77380			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense		Description Gifts for Supporters		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:		<b>2</b> FILER NAME Ryan Gable		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 04/17/25		<b>5</b> Payee name Golf Galaxy			
<b>6</b> Amount (\$) \$963.40		<b>7</b> Payee address; City; State; Zip Code 25415 I-45 Spring, TX 77380			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense		<b>(b)</b> Description Golf Tournament Supplies/Door Prizes		
	<b>(c)</b> 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					
Date 04/24/25		Payee name ON AG			
Amount (\$) \$235.95		Payee address; City; State; Zip Code 1937 NW Quimbly St Portland, OR 97209			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense		Description Employee Gift		
	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					
Date 04/26/25		Payee name Texas Youth Foundation			
Amount (\$) \$1,000.00		Payee address; City; State; Zip Code PO Box 8105 Spring, TX 77387			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By		Description Sponsor 2025 Texas Youth Summit		
	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					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:		<b>2</b> FILER NAME Ryan Gable		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 04/26/25		<b>5</b> Payee name Goode Co Kitchen & Cantina			
<b>6</b> Amount (\$) \$324.26		<b>7</b> Payee address; City; State; Zip Code 8865 Six Pines Dr Shenandoah, TX 77380			
<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 Ironman Event Staff Dinner		
	<b>(c)</b> 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					
Date 04/27/25		Payee name Academy			
Amount (\$) \$288.98		Payee address; City; State; Zip Code 1360 Lake Woodlands Dr The Woodlands, TX 77380			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Expense		Description Annual Golf Tournament Supplies		
	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					
Date 04/30/25		Payee name Tommy Bahamas			
Amount (\$) \$281.11		Payee address; City; State; Zip Code 9595 Six Pines Dr The Woodlands, TX 77380			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Political Dinner Meeting		
	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					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Ryan Gable	3 Filer ID (Ethics Commission Filers)
4 Date 04/30/25	5 Payee name Interfaith of the Woodlands	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 4242 Interfaith Way Spring, TX 77381	
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	(b) Description Donation
	(c) 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 05/01/25	Payee name Pitmaster BBQ	
Amount (\$) \$4,500.00	Payee address; City; State; Zip Code 343 Sawdust Rd The Woodlands, TX 77380	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description BBQ Lunch for Annual Golf Tournament
	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 05/01/25	Payee name ON AG	
Amount (\$) \$235.95	Payee address; City; State; Zip Code 1937 NW Quimbly St Portland, OR 97209	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Departmental Supplies
	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 MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:		<b>2</b> FILER NAME Ryan Gable		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 05/01/25		<b>5</b> Payee name Humble Ice			
<b>6</b> Amount (\$) \$817.00		<b>7</b> Payee address; City; State; Zip Code 6902 Bender Rd Humble, TX 77396			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense		<b>(b)</b> Description Ice Truck for Annual Golf Tournament		
	<b>(c)</b> 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 05/01/25		Payee name Marco Gonzalez			
Amount (\$) \$750.00		Payee address; City; State; Zip Code 422 Dunkley Dr Houston, TX 77076			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Expense		Description DJ Services for Annual Golf Tournament		
	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 05/02/25		Payee name Vincent J. Montalbano			
Amount (\$) \$750.00		Payee address; City; State; Zip Code 6230 Burgoyne Rd Houston, TX 77057			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Expense		Description Auctioneer for Annual Golf Tournament		
	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 MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Ryan Gable	3 Filer ID (Ethics Commission Filers)
4 Date 05/02/25	5 Payee name Event Elements, LLC	
6 Amount (\$) \$1,800.00	7 Payee address; City; State; Zip Code 2418 Spring Lily Court Spring, TX 77373	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Breakfast for Annual Golf Tournament
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 05/02/25	Payee name Cypresswood Golf Club	
Amount (\$) \$25,800.00	Payee address; City; State; Zip Code 21602 Cypresswood Dr Spring, TX 77373	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description 2025 Campaign Golf Tournament Venue
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 05/03/25	Payee name Sixty Vines	
Amount (\$) \$223.87	Payee address; City; State; Zip Code 9595 Six Pines Dr The Woodlands, TX 77380	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Political Meeting
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:		<b>2</b> FILER NAME Ryan Gable		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 05/05/25		<b>5</b> Payee name Magnolia H.S. Texas Star Dance Team			
<b>6</b> Amount (\$) \$500.00		<b>7</b> Payee address; City; State; Zip Code 12110 Pin Oak Dr Magnolia, TX 77354			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By		<b>(b)</b> Description Sponsorship Donation		
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>				
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 05/05/25		Payee name Melisa Miller Campaign			
Amount (\$) \$500.00		Payee address; City; State; Zip Code 18319 Grimes Rd Cleveland, TX 77328			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By		Description Campaign Contribution		
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
		Candidate / Officeholder name Melisa Miller		Office sought Office held District Clerk	
Date 05/07/25		Payee name Alphagraphics			
Amount (\$) \$283.52		Payee address; City; State; Zip Code 17126 Stuebner Airline Rd Spring, TX 77379			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Trifold Flyer for Golf Tournament		
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Ryan Gable	3 Filer ID (Ethics Commission Filers)
4 Date 05/07/25	5 Payee name Top Florist	
6 Amount (\$) \$297.69	7 Payee address; City; State; Zip Code 25119 Grogans Mill Rd The Woodlands, TX 77380	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	(b) Description Memorial Flowers
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 05/09/25	Payee name Terra Vino	
Amount (\$) \$321.96	Payee address; City; State; Zip Code 2520 Research Forest Dr The Woodlands, TX 77381	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Political Dinner Meeting
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 05/10/25	Payee name HEB	
Amount (\$) \$220.85	Payee address; City; State; Zip Code 3540 Rayford Rd Spring, TX 77386	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description Gifts for Supporters
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:		<b>2</b> FILER NAME Ryan Gable		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 05/12/25		<b>5</b> Payee name B Sign Company			
<b>6</b> Amount (\$) \$483.58		<b>7</b> Payee address; City; State; Zip Code 4239 Earning Way New Albany, IN 47150			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By		<b>(b)</b> Description Sponsor Constable Beyett Plaque		
	<b>(c)</b> 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					
Date 05/13/25		Payee name Chase Card Services			
Amount (\$) \$7,445.12		Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094-4014			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment		Description Pay Credit Card Charges		
	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					
Date 05/28/25		Payee name RTIC			
Amount (\$) \$380.54		Payee address; City; State; Zip Code 20510 Hempstead Rd Houston, TX 77065			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense		Description Employee Gifts		
	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					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Ryan Gable		3 Filer ID (Ethics Commission Filers)	
4 Date 05/28/25		5 Payee name RTIC			
6 Amount (\$) \$1,071.56		7 Payee address; City; State; Zip Code 20510 Hempstead Rd Houston, TX 77065			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense		(b) Description Employee Gifts		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH					
Date 05/28/25		Payee name Saltgrass Steakhouse			
Amount (\$) \$237.27		Payee address; City; State; Zip Code 810 I-45 North Conroe, TX 77301			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Political Lunch Meeting		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH					
Date 05/29/25		Payee name Trulucks			
Amount (\$) \$10,000.00		Payee address; City; State; Zip Code 1900 Hughes Landing Blvd The Woodlands, TX 77380			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Deposit for Annual Dinner Fundraiser		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The instruction Guide explains how to complete this form.

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

<b>4</b> Date 05/29/25	<b>5</b> Payee name The Woodlands H.S. Quarterback Club
---------------------------	--

<b>6</b> Amount (\$) \$850.00	<b>7</b> Payee address; 6700 Woodlands Parkway, Ste 230 PMB #650 The Woodlands, TX 77382	City;	State;	Zip Code
----------------------------------	---	-------	--------	----------

<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	<b>(b)</b> Description Donation
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <span style="float: right;">Check if Austin, TX, officeholder living expense</span>	

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

Date 05/30/25	Payee name Trulucks
------------------	------------------------

Amount (\$) \$239.64	Payee address; 1900 Hughes Landing Blvd The Woodlands, TX 77380	City;	State;	Zip Code
-------------------------	--	-------	--------	----------

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Purchase Dinner for Employee
	Check if travel outside of Texas. Complete Schedule T. <span style="float: right;">Check if Austin, TX, officeholder living expense</span>	

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

Date 06/10/25	Payee name Pitmaster BBQ
------------------	-----------------------------

Amount (\$) \$250.00	Payee address; 343 Sawdust Rd The Woodlands, TX 77380	City;	State;	Zip Code
-------------------------	--	-------	--------	----------

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Expense	Description Host Interviews City of Oak Ridge North
	Check if travel outside of Texas. Complete Schedule T. <span style="float: right;">Check if Austin, TX, officeholder living expense</span>	

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:		<b>2</b> FILER NAME Ryan Gable		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 06/20/25		<b>5</b> Payee name Kirby's Steakhouse			
<b>6</b> Amount (\$) \$337.95		<b>7</b> Payee address; City; State; Zip Code 1111 Timberloch Pl The Woodlands, TX 77380			
<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 Political Dinner Meeting		
	<b>(c)</b> 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 06/22/25		Payee name Grand Oaks H.S. Cheer Booster Club			
Amount (\$) \$259.92		Payee address; City; State; Zip Code 4800 Riley Fuzzel Rd Spring, TX 77386			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By		Description High School Cheer Sponsor		
	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 06/26/25		Payee name Montgomery County Republican Women			
Amount (\$) \$700.00		Payee address; City; State; Zip Code PO Box 1766 Conroe, TX 77305			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By		Description Sponsor 2025 Fundraiser		
	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 MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Ryan Gable	3 Filer ID (Ethics Commission Filers)
4 Date 07/02/25	5 Payee name USPS	
6 Amount (\$) \$226.00	7 Payee address; City; State; Zip Code 10800 Gosling Rd Spring, TX 77381	
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Annual Campaign PO Box Renewal
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/04/25	Payee name Terra Vino	
Amount (\$) \$224.43	Payee address; City; State; Zip Code 2520 Research Forest Dr The Woodlands, TX 77381	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Political Dinner Meeting
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/10/25	Payee name Square	
Amount (\$) \$4,017.14	Payee address; City; State; Zip Code 1455 Market Street, Ste 600 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Credit Card Processing Fees
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

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

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4: 7	2 FILER NAME Ryan Gable	3 FILER ID (Ethics Commission Filers)
---------------------------------	----------------------------	---------------------------------------

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 0
---	------

5 CREDIT CARD ISSUER	Name of financial institution Chase Card Services
-------------------------	--

6 PAYMENT	(a) Amount Charged \$ 817.12	(b) Date Expenditure Charged 01/16/25	(c) Date(s) Credit Card Issuer Paid 01/19/25
-----------	---------------------------------	--	---

7 PAYEE	(a) Payee name Alphagraphics	(b) Payee address; City, State, Zip Code 17126 Stuebner Airline Rd Spring, TX 77379
---------	---------------------------------	--

8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Campaign Golf Tourney "Save the Date"
	(c) 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
---	-------------------------------	---------------	-------------

PAYMENT	(a) Amount Charged \$ 1,200.00	(b) Date Expenditure Charged 01/30/25	(c) Date(s) Credit Card Issuer Paid 02/13/25
---------	-----------------------------------	--	---

PAYEE	(a) Payee name Interfaith of the Woodlands	(b) Payee address; City, State, Zip Code 4242 Interfaith Way The Woodlands, TX 77381
-------	---	---

PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	(b) Description Sponsor Empowering Women Event
	(c) 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
---	-------------------------------	---------------	-------------

PAYMENT	(a) Amount Charged \$ 1,500.00	(b) Date Expenditure Charged 01/21/25	(c) Date(s) Credit Card Issuer Paid 02/13/25
---------	-----------------------------------	--	---

PAYEE	(a) Payee name The Cynthia Woods Mitchell Pavillion	(b) Payee address; City, State, Zip Code 2005 Lake Robbins The Woodlands, TX 77380
-------	--	---

PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	(b) Description Sponsor 2025 Wine Dinner
	(c) 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

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

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

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

<b>1 TOTAL PAGES SCHEDULE F4:</b>	<b>2 FILER NAME</b> Ryan Gable		<b>3 FILER ID (Ethics Commission Filers)</b>
<b>4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD</b>			\$
<b>5 CREDIT CARD ISSUER</b>	Name of financial institution Chase Card Services		
<b>6 PAYMENT</b>	(a) Amount Charged \$ 272.89	(b) Date Expenditure Charged 01/31/25	(c) Date(s) Credit Card Issuer Paid 02/13/25
<b>7 PAYEE</b>	(a) Payee name Pappasito's	(b) Payee address; City, State, Zip Code 18101 I-45 South Conroe, TX 77385	
<b>8 PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Political Dinner Meeting
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name Office Sought Office Held		
<b>PAYMENT</b>	(a) Amount Charged \$ 36.52	(b) Date Expenditure Charged 02/01/25	(c) Date(s) Credit Card Issuer Paid 02/13/25
<b>PAYEE</b>	(a) Payee name On The Rox	(b) Payee address; City, State, Zip Code 8905 Louetta Rd Spring, TX 77379	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Political Gathering with Supporters
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name Office Sought Office Held		
<b>PAYMENT</b>	(a) Amount Charged \$ 1,275.53	(b) Date Expenditure Charged 02/04/25	(c) Date(s) Credit Card Issuer Paid 02/13/25
<b>PAYEE</b>	(a) Payee name Alphagraphics	(b) Payee address; City, State, Zip Code 17126 Stuebner Airline Rd Spring, TX 77379	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description 2025 Golf Tournament Flyer & Postage
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name Office Sought Office Held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

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

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

<b>1 TOTAL PAGES</b> SCHEDULE F4:	<b>2 FILER NAME</b> Ryan Gable		<b>3 FILER ID (Ethics Commission Filers)</b>
<b>4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD</b>			\$
<b>5 CREDIT CARD ISSUER</b>	Name of financial institution Chase Card Services		
<b>6 PAYMENT</b>	(a) Amount Charged \$ 583.75	(b) Date Expenditure Charged 02/07/25	(c) Date(s) Credit Card Issuer Paid 02/13/25
<b>7 PAYEE</b>	(a) Payee name Trulucks	(b) Payee address; City, State, Zip Code 1900 Hughes Landing The Woodlands, TX	
<b>8 PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event		(b) Description Political Dinner Event
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name Office Sought Office Held		
<b>PAYMENT</b>	(a) Amount Charged \$ 710.76	(b) Date Expenditure Charged 02/09/25	(c) Date(s) Credit Card Issuer Paid 02/13/25
<b>PAYEE</b>	(a) Payee name RTIC	(b) Payee address; City, State, Zip Code 3900 Peek Rd Katy, TX 77449	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Tumblers for Campaign Logos
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name Office Sought Office Held		
<b>PAYMENT</b>	(a) Amount Charged \$ 685.33	(b) Date Expenditure Charged 02/09/25	(c) Date(s) Credit Card Issuer Paid 02/13/25
<b>PAYEE</b>	(a) Payee name Yeti	(b) Payee address; City, State, Zip Code 7601 Southwest PKWY Austin, TX 78735	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Tumblers for Campaign Logos
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name Office Sought Office Held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

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

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

<b>1 TOTAL PAGES SCHEDULE F4:</b>	<b>2 FILER NAME</b> Ryan Gable		<b>3 FILER ID (Ethics Commission Filers)</b>
<b>4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD</b>			\$
<b>5 CREDIT CARD ISSUER</b>	Name of financial institution Chase Card Services		
<b>6 PAYMENT</b>	(a) Amount Charged \$ 1,500.00	(b) Date Expenditure Charged 02/27/25	(c) Date(s) Credit Card Issuer Paid 03/17/25
<b>7 PAYEE</b>	(a) Payee name Mark Herman Campaign	(b) Payee address; City, State, Zip Code 18482 Kuykendahl Rd # 191 Spring, TX 77389	
<b>8 PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By		(b) Description Campaign Contribution
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name Mark Herman		Office Sought Office Held Elected Constable
<b>PAYMENT</b>	(a) Amount Charged \$ 500.00	(b) Date Expenditure Charged 02/28/25	(c) Date(s) Credit Card Issuer Paid 03/17/25
<b>PAYEE</b>	(a) Payee name Interfaith of the Woodlands	(b) Payee address; City, State, Zip Code 4242 Interfaith Way The Woodlands, TX 77381	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By		(b) Description Sponsor 2025 Gala
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office Sought Office Held
<b>PAYMENT</b>	(a) Amount Charged \$ 1,861.00	(b) Date Expenditure Charged 03/19/25	(c) Date(s) Credit Card Issuer Paid 04/15/25
<b>PAYEE</b>	(a) Payee name Corporate Incentives	(b) Payee address; City, State, Zip Code 27329 Spectrum Way Conroe, TX 77385	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Campaign Golf Tournament Supplies
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office Sought Office Held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

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

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME Ryan Gable	3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 CREDIT CARD ISSUER	Name of financial institution Chase Card Services	
6 PAYMENT	(a) Amount Charged \$ 2,337.08	(b) Date Expenditure Charged 03/19/25
	(c) Date(s) Credit Card Issuer Paid 04/15/25	
7 PAYEE	(a) Payee name Corporate Incentives	(b) Payee address; City, State, Zip Code 27329 Spectrum Way Conroe, TX 77385
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Campaign Golf Tournament Supplies
<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(c) Check If travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office Sought Office Held
PAYMENT	(a) Amount Charged \$ 2,557.08	(b) Date Expenditure Charged 04/01/25
	(c) Date(s) Credit Card Issuer Paid 04/15/25	
PAYEE	(a) Payee name Corporate Incentives	(b) Payee address; City, State, Zip Code 27329 Spectrum Way Conroe, TX 77385
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Campaign Golf Tournament Supplies
<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(c) Check If travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office Sought Office Held
PAYMENT	(a) Amount Charged \$ 1,374.78	(b) Date Expenditure Charged 04/09/25
	(c) Date(s) Credit Card Issuer Paid 04/15/25	
PAYEE	(a) Payee name Saddle River Range	(b) Payee address; City, State, Zip Code 4280 FM 1488 Conroe, TX 77384
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Auction Items
<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(c) Check If travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office Sought Office Held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

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

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME Ryan Gable	3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 CREDIT CARD ISSUER	Name of financial institution Chase Card Services	
6 PAYMENT	(a) Amount Charged \$ 3,125.00	(b) Date Expenditure Charged 04/23/25
		(c) Date(s) Credit Card Issuer Paid 05/13/25
7 PAYEE	(a) Payee name Spring Guns & Ammo	(b) Payee address; City, State, Zip Code 4401 Spring Cypress Rd Spring, TX 77388
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	(b) Description Gift for Staff Employee
<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office Sought Office Held
PAYMENT	(a) Amount Charged \$ 1,313.07	(b) Date Expenditure Charged 05/01/25
		(c) Date(s) Credit Card Issuer Paid 05/13/25
PAYEE	(a) Payee name Graphic Results	(b) Payee address; City, State, Zip Code 6315B FM 1488, Ste 227 Magnolia, TX 77354
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Campaign Golf Tourney Banners/Signs
<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office Sought Office Held
PAYMENT	(a) Amount Charged \$ 122.72	(b) Date Expenditure Charged 05/01/25
		(c) Date(s) Credit Card Issuer Paid 05/13/25
PAYEE	(a) Payee name Home Depot	(b) Payee address; City, State, Zip Code 19103 IO-45 North Conroe, TX 77385
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Campaign Golf Tournament Supplies
<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office Sought Office Held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

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

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME Ryan Gable	3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 CREDIT CARD ISSUER	Name of financial institution Chase Card Services	
6 PAYMENT	(a) Amount Charged \$ 198.99	(b) Date Expenditure Charged 05/01/25
	(c) Date(s) Credit Card Issuer Paid 05/13/25	
7 PAYEE	(a) Payee name HEB	(b) Payee address; City, State, Zip Code 9595 Six Pines Dr The Woodlands, TX 77380
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Campaign Golf Tournament Supplies
	(c) 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
PAYMENT	(a) Amount Charged \$ 696.34	(b) Date Expenditure Charged 05/02/25
	(c) Date(s) Credit Card Issuer Paid 05/13/25	
PAYEE	(a) Payee name Academy Sports & Outdoors	(b) Payee address; City, State, Zip Code 9470 FM 1960 Humble, TX 77338
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Campaign Golf Tournament Supplies
	(c) 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
PAYMENT	(a) Amount Charged \$ 2,000.00	(b) Date Expenditure Charged 05/08/25
	(c) Date(s) Credit Card Issuer Paid 05/13/25	
PAYEE	(a) Payee name The Woodlands Chamber of Commerce	(b) Payee address; City, State, Zip Code 9320 Lakeside Blvd The Woodlands, TX 77381
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	(b) Description Annual Chairman's Ball Sponsor
	(c) 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