

FORM C/OH
COVER SHEET PG 1

Revised 1/1/2025

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH
COVER SHEET PG 2**

15 C/OH NAME
CONSTABLE CHRIS JONES

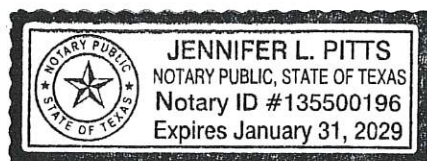
16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 4,145.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 222,410.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 4,143.53
	4. TOTAL POLITICAL EXPENDITURES	\$ 81,574.32
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 166,757.55
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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

Signature of Candidate or Officeholder

Please complete either option below:



(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Christopher Jones this the 10th day of July, 2025, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, 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****CONSTABLE CHRIS JONES****20 Filer ID (Ethics Commission Filers)****21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE****SUBTOTAL
AMOUNT**

1.	■ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 135,105.00
2.	■ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 83,160.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	SCHEDULE E: LOANS	\$ 0.00
5.	■ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 81,574.32
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

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: 43		2 FILER NAME CONSTABLE CHRIS JONES		3 Filer ID (Ethics Commission Filers)		
4 Date 01/02/2025		5 Payee name Magnolia's Best Storage				
6 Amount (\$) 224.00		7 Payee address; City; State; Zip Code 37805 FM 1774, Magnolia, TX 77355				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Rental Expense		(b) Description Storage unit for campaign materials			
	(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 01/02/2025		Payee name Pappasito's Cantina				
Amount (\$) 984.27		Payee address; City; State; Zip Code 18101 I 45 N, Shenandoah, TX 77385				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Swearing in luncheon with constituents			
	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 01/06/2025		Payee name Clearwater Express				
Amount (\$) 59.96		Payee address; City; State; Zip Code 14206 FM 1488 Rd, Magnolia, TX 77354				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description Carwash service for fleet			
	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.

1 Total pages Schedule F1: 43	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 01/10/2025	5 Payee name Greater Magnolia Pkwy Chamber of Commerce	
6 Amount (\$) 850.00	7 Payee address; City; State; Zip Code 18423 FM 1488 Ste C, Magnolia, TX 77354	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contribution made by OH	(b) Description Annual banquet 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		
Date 01/18/2025	Candidate / Officeholder name Greater Magnolia Pkwy Chamber of Commerce	
Amount (\$) 110.00	Office sought 18423 FM 1488 Ste C, Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution made by OH	Description Annual banquet donation
	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 01/21/2025	Candidate / Officeholder name Magnolia Hardware	
Amount (\$) 64.35	Office sought 19025 FM 1488 Rd, Magnolia, TX 77355	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Refill propane tanks on cook trailer
	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		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 43	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 01/22/2025	5 Payee name The Angry Elephant	
6 Amount (\$) 260.71	7 Payee address; City; State; Zip Code 7030 FM 1488, Magnolia, TX 77354	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contribution made by OH	(b) Description Donation to Magnolia Area Republican Group
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 01/26/2025	Payee name Bosscat	
Amount (\$) 665.91	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 Expense	Description Dinner with constituents
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 01/30/2025	Payee name Madison McAmis	
Amount (\$) 250.00	Payee address; City; State; Zip Code 20562 Lazy Creek Dr, New Caney, TX 77357	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift Expense	Description Gift donation to a constituent
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 43	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 02/03/2025	5 Payee name Magnolia's Best Storage	
6 Amount (\$) 224.00	7 Payee address; City; State; Zip Code 37805 FM 1774, Magnolia, TX 77355	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Rental Expense	(b) Description Storage unit for campaign materials
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/05/2025	Payee name Society of Samaritans	
Amount (\$) 1,000.00	Payee address; City; State; Zip Code 31355 Friendship Dr, Magnolia, TX 77355	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution made by OH	Description Donation to SOS purse bingo
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/05/2025	Payee name Clearwater Express	
Amount (\$) 59.96	Payee address; City; State; Zip Code 14206 FM 1488 Rd, Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Carwash service for fleet
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
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: 43	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 02/11/2025	5 Payee name Shelby Walling	
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 42581 Summer Crest Rd, Magnolia, TX 77354	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift Expense	(b) Description Gift donation to a constituent
	(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 02/12/2025	Payee name MHS Baseball	
Amount (\$) 850.00	Payee address; City; State; Zip Code 14350 FM 1488, Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation made by OH	Description Donation to MHS Baseball team
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 02/12/2025	Payee name MWHS Softball	
Amount (\$) 500.00	Payee address; City; State; Zip Code 42202 FM 1774, Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation made by OH	Description Donation to MWHS Softball team
	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		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 43		2 FILER NAME CONSTABLE CHRIS JONES		3 Filer ID (Ethics Commission Filers)	
4 Date 02/13/2025		5 Payee name H E B			
6 Amount (\$) 179.70		7 Payee address; City; State; Zip Code 7988 FM 1488, Magnolia, TX 77354			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Flowers for Valentine's Day celebration at the senior center		
	(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 02/14/2025		Payee name Rancho Grande			
Amount (\$) 81.41		Payee address; City; State; Zip Code 18914 FM 1488 Rd, Magnolia, TX 77355			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Expense		Description Meeting with command staff		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 02/18/2025		Payee name Magnolia Education Foundation			
Amount (\$) 1,200.00		Payee address; City; State; Zip Code PO Box 55, Magnolia, TX 77353			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation made by OH		Description Donation to MEF Roots 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		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: 43	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 02/18/2025	5 Payee name ShoGun	
6 Amount (\$) 614.72	7 Payee address; City; State; Zip Code 937 William D Fitch Pkwy, College Station, TX 77845	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food Expense	(b) Description Dinner with constituents
	(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 02/19/2025	Payee name Texas Top Cop Shop	
Amount (\$) 2,597.99	Payee address; City; State; Zip Code 1109 W Dallas St, Conroe, TX 77301	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift Expense	Description Items for donations for constituents
	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 02/20/2025	Payee name Ruth's Chris Steakhouse	
Amount (\$) 76.00	Payee address; City; State; Zip Code 600 E Market St Grand Hyatt, San Antonio, TX 78205	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Expense	Description Dinner with constituents
	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.

1 Total pages Schedule F1: <div style="font-size: 1.5em; margin-left: 20px;">43</div>	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 02/20/2025	5 Payee name Ruth's Chris Steakhouse	
6 Amount (\$) 736.83	7 Payee address; City; State; Zip Code 600 E Market St Grand Hyatt, San Antonio, TX 78205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description TSPRA awards dinner
	(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 02/28/2025	Payee name Greater Magnolia Parkway Chamber of Commerce	
Amount (\$) 68.00	Payee address; City; State; Zip Code 18423 FM 1488 Ste C, Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Monthly luncheon
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 02/28/2025	Payee name Magnolia Lion's Club	
Amount (\$) 250.00	Payee address; City; State; Zip Code 400 Melton St, Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation made by OH	Description Donation to Lion's Club annual 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	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: 43	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 02/28/2025	5 Payee name W Bradshaw Boney	
6 Amount (\$) 1,354.14	7 Payee address; City; State; Zip Code 18333 Egret Bay Blvd # 110, Houston, TX 77058	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Mailout invitations for 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 03/03/2025	Payee name Magnolia's Best Storage	
Amount (\$) 224.00	Payee address; City; State; Zip Code 37805 FM 1774, Magnolia, TX 77355	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Rental Expense	Description Storage Unit for campaign materials
	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 03/06/2025	Payee name Clearwater Express	
Amount (\$) 59.96	Payee address; City; State; Zip Code 14206 FM 1488 Rd, Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Carwash service for fleet
	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.

1 Total pages Schedule F1: 43	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 03/08/2025	5 Payee name Cavender's Boot	
6 Amount (\$) 253.31	7 Payee address; City; State; Zip Code 6760 Grand Pkwy , Spring, TX 77389	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Jeans for rodeo event
	(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 03/08/2025	Payee name Hill Top Liquor	
Amount (\$) 536.87	Payee address; City; State; Zip Code 3305 TX 36, Gatesville, TX 76528	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift Expense	Description Gifts for constituents
	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 03/14/2025	Payee name Kids Meals	
Amount (\$) 327.00	Payee address; City; State; Zip Code 33220 Bear Branch Ln, The Woodlands, TX 77354	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation made by OH	Description Donation to Kids Meals 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

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
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: 43	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 03/14/2025	5 Payee name Magnolia Hardware	
6 Amount (\$) 10.52	7 Payee address; City; State; Zip Code 19025 FM 1488 Rd, Magnolia, TX 77355	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Propane for cook trailer
	(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 03/19/2025	Payee name Houston Texans	
Amount (\$) 574.30	Payee address; City; State; Zip Code 2 NRG Park, Houston, TX 77054	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift Expense	Description Tickets to games for constituent gifts and donations
	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 03/21/2025	Payee name USPS	
Amount (\$) 226.00	Payee address; City; State; Zip Code 815 Goodson Rd, Magnolia, TX 77355	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Renewal for PO box
	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

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 43	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)									
4 Date 03/22/2025	5 Payee name Kids Meals										
6 Amount (\$) 600.00	7 Payee address; City; State; Zip Code 33220 Bear Branch Ln, The Woodlands, TX 77354										
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation made by OH	(b) Description Donation to fundraiser									
	(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											
<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Date 03/25/2025</td> <td style="width:80%;">Payee name Magnolia Apostolic Tabernacle</td> </tr> <tr> <td>Amount (\$) 275.00</td> <td>Payee address; City; State; Zip Code 18235 FM 1488, Magnolia, TX 77354</td> </tr> <tr> <td rowspan="2">PURPOSE OF EXPENDITURE</td> <td>Category (See Categories listed at the top of this schedule) Donation made by OH</td> </tr> <tr> <td>Description Donation to annual bizarre fundraiser</td> </tr> <tr> <td colspan="2">Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense</td> </tr> </table>			Date 03/25/2025	Payee name Magnolia Apostolic Tabernacle	Amount (\$) 275.00	Payee address; City; State; Zip Code 18235 FM 1488, Magnolia, TX 77354	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation made by OH	Description Donation to annual bizarre fundraiser	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Date 03/25/2025	Payee name Magnolia Apostolic Tabernacle										
Amount (\$) 275.00	Payee address; City; State; Zip Code 18235 FM 1488, Magnolia, TX 77354										
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation made by OH										
	Description Donation to annual bizarre 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											
<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Date 03/25/2025</td> <td style="width:80%;">Payee name The Meating Place</td> </tr> <tr> <td>Amount (\$) 668.15</td> <td>Payee address; City; State; Zip Code 41902 FM 1774, Magnolia, TX 77355</td> </tr> <tr> <td rowspan="2">PURPOSE OF EXPENDITURE</td> <td>Category (See Categories listed at the top of this schedule) Event Expense</td> </tr> <tr> <td>Description Catering for Mr Gullo funeral service</td> </tr> <tr> <td colspan="2">Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense</td> </tr> </table>			Date 03/25/2025	Payee name The Meating Place	Amount (\$) 668.15	Payee address; City; State; Zip Code 41902 FM 1774, Magnolia, TX 77355	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Catering for Mr Gullo funeral service	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Date 03/25/2025	Payee name The Meating Place										
Amount (\$) 668.15	Payee address; City; State; Zip Code 41902 FM 1774, Magnolia, TX 77355										
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense										
	Description Catering for Mr Gullo funeral service										
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											

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: <div style="font-size: 2em; margin-left: 20px;">43</div>	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 03/26/2025	5 Payee name Cameron Gordon	
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 9623 Cedar Lake Ln, Plantersville, TX 77363	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift Expense	(b) Description Gift donation to a constituent
	(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 03/26/2025	Payee name H E B	
Amount (\$) 19.96	Payee address; City; State; Zip Code 7988 FM 1488, Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Snacks for ops team
	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 03/30/2025	Payee name Amazon	
Amount (\$) 29.94	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) Event Expense	Description Fundraiser materials
	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	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 43		2 FILER NAME CONSTABLE CHRIS JONES		3 Filer ID (Ethics Commission Filers)	
4 Date 03/30/2025		5 Payee name Magnolia Education Foundation			
6 Amount (\$) 113.00		7 Payee address; City; State; Zip Code PO Box 55, Magnolia, TX 77353			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation made by OH		(b) Description Donation to roots event		
	(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 04/01/2025		Payee name Amazon			
Amount (\$) 13.93		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) Event Expense		Description Fundraiser materials		
	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 04/02/2025		Payee name Magnolia Event Center			
Amount (\$) 3,375.00		Payee address; City; State; Zip Code 11659 FM 1488 Rd, Magnolia, TX 77354			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Deposit for fundraiser venue		
	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					

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 43	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 04/02/2025	5 Payee name Magnolia's Best Storage	
6 Amount (\$) 224.00	7 Payee address; City; State; Zip Code 37805 FM 1774, Magnolia, TX 77355	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Rental Expense	(b) Description Storage for campaign materials
	(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 04/05/2025	Payee name Southern Heritage Consulting	
Amount (\$) 3,000.00	Payee address; City; State; Zip Code PO Box 558, Pinehurst, TX 77362	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Fundraiser coordinator
	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 04/06/2025	Payee name Clearwater Express	
Amount (\$) 59.96	Payee address; City; State; Zip Code 14206 FM 1488 Rd, Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Carwash service for fleet
	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

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 43	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)										
4 Date 04/04/2025	5 Payee name Saddle River Range											
6 Amount (\$) 671.14	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) Donation made by OH	(b) Description Donation to TAFR fundraiser										
	(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												
<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Date 04/07/2025</td> <td style="width:80%;">Payee name Amazon</td> </tr> <tr> <td>Amount (\$) 21.44</td> <td>Payee address; City; State; Zip Code 440 Terry Ave N, Seattle, WA 98109</td> </tr> <tr> <td rowspan="2">PURPOSE OF EXPENDITURE</td> <td> <table border="0" style="width:100%;"> <tr> <td style="width:50%;">Category (See Categories listed at the top of this schedule) Fundraising Expense</td> <td style="width:50%;">Description Supplies for fundraiser</td> </tr> <tr> <td colspan="2">Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense</td> </tr> </table> </td> </tr> </table>			Date 04/07/2025	Payee name Amazon	Amount (\$) 21.44	Payee address; City; State; Zip Code 440 Terry Ave N, Seattle, WA 98109	PURPOSE OF EXPENDITURE	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Category (See Categories listed at the top of this schedule) Fundraising Expense</td> <td style="width:50%;">Description Supplies for fundraiser</td> </tr> <tr> <td colspan="2">Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense</td> </tr> </table>	Category (See Categories listed at the top of this schedule) Fundraising Expense	Description Supplies for fundraiser	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Date 04/07/2025	Payee name Amazon											
Amount (\$) 21.44	Payee address; City; State; Zip Code 440 Terry Ave N, Seattle, WA 98109											
PURPOSE OF EXPENDITURE	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Category (See Categories listed at the top of this schedule) Fundraising Expense</td> <td style="width:50%;">Description Supplies for fundraiser</td> </tr> <tr> <td colspan="2">Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense</td> </tr> </table>	Category (See Categories listed at the top of this schedule) Fundraising Expense	Description Supplies for fundraiser	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense								
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held									
<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Date 04/07/2025</td> <td style="width:80%;">Payee name Chimy's</td> </tr> <tr> <td>Amount (\$) 207.27</td> <td>Payee address; City; State; Zip Code 203 University Dr, College Station, TX 77840</td> </tr> <tr> <td rowspan="2">PURPOSE OF EXPENDITURE</td> <td> <table border="0" style="width:100%;"> <tr> <td style="width:50%;">Category (See Categories listed at the top of this schedule) Food Expense</td> <td style="width:50%;">Description Dinner with constituents</td> </tr> <tr> <td colspan="2">Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense</td> </tr> </table> </td> </tr> </table>			Date 04/07/2025	Payee name Chimy's	Amount (\$) 207.27	Payee address; City; State; Zip Code 203 University Dr, College Station, TX 77840	PURPOSE OF EXPENDITURE	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Category (See Categories listed at the top of this schedule) Food Expense</td> <td style="width:50%;">Description Dinner with constituents</td> </tr> <tr> <td colspan="2">Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense</td> </tr> </table>	Category (See Categories listed at the top of this schedule) Food Expense	Description Dinner with constituents	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Date 04/07/2025	Payee name Chimy's											
Amount (\$) 207.27	Payee address; City; State; Zip Code 203 University Dr, College Station, TX 77840											
PURPOSE OF EXPENDITURE	<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Category (See Categories listed at the top of this schedule) Food Expense</td> <td style="width:50%;">Description Dinner with constituents</td> </tr> <tr> <td colspan="2">Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense</td> </tr> </table>	Category (See Categories listed at the top of this schedule) Food Expense	Description Dinner with constituents	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense								
	Category (See Categories listed at the top of this schedule) Food Expense	Description Dinner with constituents										
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held									

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 43	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 04/08/2025	5 Payee name Amazon	
6 Amount (\$) 163.80	7 Payee address; City; State; Zip Code 440 Terry Ave N, Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fundraising Expense	(b) Description Fundraiser supplies
	(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 04/09/2025	Payee name Magnolia Cowboy Church	
Amount (\$) 1,000.00	Payee address; City; State; Zip Code 23247 Glenmont Estates Blvd, Magnolia, TX 77355	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation made by OH	Description Donation to annual 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 04/11/2025	Payee name Magnolia Hardware	
Amount (\$) 19.25	Payee address; City; State; Zip Code 19025 FM 1488 Rd, Magnolia, TX 77355	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Supplies for 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
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 43		2 FILER NAME CONSTABLE CHRIS JONES		3 Filer ID (Ethics Commission Filers)	
4 Date 04/11/2025		5 Payee name Magnolia ISD			
6 Amount (\$) 500.00		7 Payee address; City; State; Zip Code 31141 Nichols Sawmill Rd, Magnolia, TX 77355			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation made by OH		(b) Description Donation for teacher banquet		
	(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 04/11/2025		Payee name Maurice Marasigan			
Amount (\$) 276.69		Payee address; City; State; Zip Code PO Box 558, Pinehurst, TX 77362			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Photographer for 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
Date 04/11/2025		Payee name Oh, One More			
Amount (\$) 541.25		Payee address; City; State; Zip Code 27085 Mock Ln, Montgomery, TX 77356			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Balloon decor for 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: 43		2 FILER NAME CONSTABLE CHRIS JONES		3 Filer ID (Ethics Commission Filers)	
4 Date 04/11/2025		5 Payee name The Meating Place			
6 Amount (\$) 28.69		7 Payee address; City; State; Zip Code 41902 FM 1774, Magnolia, TX 77355			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food Expense		(b) Description Command Staff lunch		
	(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 04/14/2025		Candidate / Officeholder name Safe Haven Baby Boxes			
Amount (\$) 2,500.00		Payee address; City; State; Zip Code 302 Magnolia Blvd, Magnolia, TX 77355			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation made by OH		Description Donation for safe baby boxes		
	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 04/15/2025		Candidate / Officeholder name Greater Magnolia Parkway Chamber			
Amount (\$) 600.00		Payee address; City; State; Zip Code 18423 FM 1488 Ste C, Magnolia, TX 77354			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description Membership Dues		
	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

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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: 43		2 FILER NAME CONSTABLE CHRIS JONES		3 Filer ID (Ethics Commission Filers)	
4 Date 04/16/2025		5 Payee name 2920 Roadhouse			
6 Amount (\$) 386.64		7 Payee address; City; State; Zip Code 21835 FM 2920, Hockley, TX 77447			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food Expense		(b) Description Dinner with constituents		
	(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 04/17/2025		Payee name Photo Junkies			
Amount (\$) 450.00		Payee address; City; State; Zip Code 32590 Reids Prairie Rd, Waller, TX 77484			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Photo booth for 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 04/17/2025		Payee name Rancho Grande			
Amount (\$) 164.02		Payee address; City; State; Zip Code 18914 FM 1488 Rd, Magnolia, TX 77355			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Expense		Description Command Staff lunch		
	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

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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: <div style="font-size: 2em; margin-left: 20px;">43</div>	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 04/17/2025	5 Payee name Rancho Grande	
6 Amount (\$) 275.24	7 Payee address; City; State; Zip Code 18914 FM 1488 Rd, Magnolia, TX 77355	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food Expense	(b) Description Command Staff lunch
	(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 04/18/2025	Payee name The Bees Knees	
Amount (\$) 1,975.71	Payee address; City; State; Zip Code 30310 Charlie Ln, Magnolia, TX 77355	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Fundraiser Decor
	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 04/18/2025	Payee name Southern Heritage Consulting	
Amount (\$) 6,597.70	Payee address; City; State; Zip Code PO Box 558, Pinehurst, TX 77362	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Fundraiser Coordinator
	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		
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: <div style="font-size: 2em; margin-left: 20px;">43</div>	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 04/22/2025	5 Payee name Lake Conroe Area Republican Women's Club	
6 Amount (\$) 1,005.00	7 Payee address; City; State; Zip Code PO Box 737, Montgomery, TX 77356	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation made by OH	(b) Description Donation for annual fundraiser
	(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 04/24/2025	Payee name Rancho Grande	
Amount (\$) 60.19	Payee address; City; State; Zip Code 18914 FM 1488 Rd, Magnolia, TX 77355	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Expense	Description Dinner with constituents
	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 04/26/2025	Payee name J R I	
Amount (\$) 660.00	Payee address; City; State; Zip Code PO Box 698, Magnolia, TX 77353	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation made by OH	Description Golf tournament donation
	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

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 43		2 FILER NAME CONSTABLE CHRIS JONES		3 Filer ID (Ethics Commission Filers)	
4 Date 04/28/2025		5 Payee name Chimy's			
6 Amount (\$) 144.55		7 Payee address; City; State; Zip Code 203 University Dr, College Station, TX 77840			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food Expense		(b) Description Dinner with constituents		
	(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 04/28/2025		Payee name Double Dave's			
Amount (\$) 420.35		Payee address; City; State; Zip Code 3505-A Longmire Dr, College Station, TX 77845			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Expense		Description Dinner with constituents		
	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 04/28/2025		Payee name Spirit Outlet			
Amount (\$) 388.19		Payee address; City; State; Zip Code 37129 FM 1774, Magnolia, TX 77355			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards Expense		Description Gifts for constituents		
	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					
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: <div style="font-size: 2em; margin-left: 20px;">43</div>	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 04/29/2025	5 Payee name Greater Magnolia Parkway Chamber of Commerce	
6 Amount (\$) 150.00	7 Payee address; City; State; Zip Code 18423 FM 1488 Ste C, Magnolia, TX 77354	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Membership fees
	(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 04/29/2025	Payee name Magnolia Historical Society	
Amount (\$) 250.00	Payee address; City; State; Zip Code 426 Melton St, Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation made by OH	Description Donation for renaming highway
	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 05/01/2025	Payee name Amazon	
Amount (\$) 169.91	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	Description Office 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		
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: <div style="font-size: 2em; margin-left: 20px;">43</div>	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 05/01/2025	5 Payee name Amazon	
6 Amount (\$) 176.32	7 Payee address; City; State; Zip Code 440 Terry Ave N, Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead	(b) Description Office 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

Date 05/02/2025	Payee name Magnolia's Best Storage	
Amount (\$) 224.00	Payee address; City; State; Zip Code 37805 FM 1774, Magnolia, TX 77355	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Rental Expense	Description Storage for campaign 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

Date 05/02/2025	Payee name Premier Beverage	
Amount (\$) 920.08	Payee address; City; State; Zip Code 13080 TX 105, Conroe, TX 77304	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Bar set up for 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

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: <div style="font-size: 1.5em; margin-left: 20px;">43</div>	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)			
4 Date 05/03/2025	5 Payee name Constable Gable				
6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code PO Box 130966, Spring, TX 77393				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contribution made by OH	(b) Description Donation for annual fundraiser			
	(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					
<table border="0" style="width:100%;"> <tr> <td style="width:33%;">Candidate / Officeholder name</td> <td style="width:33%;">Office sought</td> <td style="width:33%;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
Date 05/03/2025	Payee name Constable Gable				
Amount (\$) 600.00	Payee address; City; State; Zip Code PO Box 130966, Spring, TX 77393				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution made by OH	Description Golf tournament donation			
	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					
<table border="0" style="width:100%;"> <tr> <td style="width:33%;">Candidate / Officeholder name</td> <td style="width:33%;">Office sought</td> <td style="width:33%;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
Date 05/05/2025	Payee name Christian Vocanegra				
Amount (\$) 350.00	Payee address; City; State; Zip Code 5 Huntington Woods Estates Dr, Tomball, TX 77377				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Office Paint			
	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					
<table border="0" style="width:100%;"> <tr> <td style="width:33%;">Candidate / Officeholder name</td> <td style="width:33%;">Office sought</td> <td style="width:33%;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 43	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 05/05/2025	5 Payee name St Matthias Catholic Church	
6 Amount (\$) 1,800.00	7 Payee address; 302 Magnolia Blvd, Magnolia, TX 77355	City; State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation made by OH	(b) Description Donation to annual fundraiser
	(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 05/06/2025	Payee name Amazon	
Amount (\$) 6.42	Payee address; 440 Terry Ave N, Seattle, WA 98109	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead	Description Office 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
Date 05/06/2025	Payee name Clearwater Express	
Amount (\$) 65.96	Payee address; 14206 FM 1488 Rd, Magnolia, TX 77354	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Carwash service for fleet
	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

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 43		2 FILER NAME CONSTABLE CHRIS JONES		3 Filer ID (Ethics Commission Filers)	
4 Date 05/06/2025		5 Payee name Katie's Seafood			
6 Amount (\$) 357.68		7 Payee address; City; State; Zip Code 2000 Wharf Rd, Galveston, TX 77550			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food Expense		(b) Description Command staff 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 05/06/2025		Payee name H E B			
Amount (\$) 96.26		Payee address; City; State; Zip Code 7988 FM 1488, Magnolia, TX 77354			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Dessert for 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 05/07/2025		Payee name Proforma			
Amount (\$) 1,358.00		Payee address; City; State; Zip Code 8800 E Pleasant Valley Rd, Cleveland, OH 44131			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Campaign shirts		
	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

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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: <div style="font-size: 24pt; margin-left: 20px;">43</div>	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)						
4 Date 05/07/2025	5 Payee name Proforma							
6 Amount (\$) 5,203.58	7 Payee address; City; State; Zip Code 8800 E Pleasant Valley Rd, Cleveland, OH 44131							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Campaign hats						
	(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								
<table border="0" style="width:100%;"> <tr> <td style="width:30%;">Candidate / Officeholder name</td> <td style="width:30%;">Office sought</td> <td style="width:40%;">Office held</td> </tr> <tr> <td colspan="3"> </td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held			
Candidate / Officeholder name	Office sought	Office held						
Date 05/08/2025	Payee name Amazon							
Amount (\$) 16.08	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	Description Supplies for office						
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
<table border="0" style="width:100%;"> <tr> <td style="width:30%;">Candidate / Officeholder name</td> <td style="width:30%;">Office sought</td> <td style="width:40%;">Office held</td> </tr> <tr> <td colspan="3"> </td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held			
Candidate / Officeholder name	Office sought	Office held						
Date 05/12/2025	Payee name Academy							
Amount (\$) 440.55	Payee address; City; State; Zip Code 14221 FM 2920, Tomball, TX 77377							
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Tents and supplies for events						
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
<table border="0" style="width:100%;"> <tr> <td style="width:30%;">Candidate / Officeholder name</td> <td style="width:30%;">Office sought</td> <td style="width:40%;">Office held</td> </tr> <tr> <td colspan="3"> </td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held			
Candidate / Officeholder name	Office sought	Office held						

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES 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: 43		2 FILER NAME CONSTABLE CHRIS JONES		3 Filer ID (Ethics Commission Filers)	
4 Date 05/12/2025		5 Payee name Jacoby's Cafe			
6 Amount (\$) 139.32		7 Payee address; City; State; Zip Code 201 N Noyes Ave, Melvin, TX 76858			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food Expense		(b) Description Dinner with constituents		
	(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 05/12/2025		Payee name Jacoby's Cafe			
Amount (\$) 217.62		Payee address; City; State; Zip Code 201 N Noyes Ave, Melvin, TX 76858			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Expense		Description Dinner with constituents		
	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 05/14/2025		Payee name Melisa Miller			
Amount (\$) 500.00		Payee address; City; State; Zip Code PO Box 2985, Conroe, TX 77305			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution made by OH		Description Donation to annual 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

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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: <div style="font-size: 2em; margin-left: 20px;">43</div>	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)								
4 Date 05/15/2025	5 Payee name Rancho Grande									
6 Amount (\$) 251.11	7 Payee address; City; State; Zip Code 18914 FM 1488 Rd, Magnolia, TX 77355									
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food Expense	(b) Description Command staff lunch								
	(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										
<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Date</td> <td style="width:40%;">Candidate / Officeholder name</td> <td style="width:20%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> <tr> <td>05/16/2025</td> <td>Amazon</td> <td></td> <td></td> </tr> </table>			Date	Candidate / Officeholder name	Office sought	Office held	05/16/2025	Amazon		
Date	Candidate / Officeholder name	Office sought	Office held							
05/16/2025	Amazon									
<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Amount (\$)</td> <td style="width:40%;">Payee address; City; State; Zip Code</td> </tr> <tr> <td>30.34</td> <td>440 Terry Ave N, Seattle, WA 98109</td> </tr> </table>			Amount (\$)	Payee address; City; State; Zip Code	30.34	440 Terry Ave N, Seattle, WA 98109				
Amount (\$)	Payee address; City; State; Zip Code									
30.34	440 Terry Ave N, Seattle, WA 98109									
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead	Description Office supplies								
	Check if travel outside of Texas. Complete Schedule T. Check If Austin, TX, officeholder living expense									
<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name</td> <td style="width:20%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>			Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held							
<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Date</td> <td style="width:40%;">Payee name</td> </tr> <tr> <td>05/17/2025</td> <td>Houston Texans</td> </tr> </table>			Date	Payee name	05/17/2025	Houston Texans				
Date	Payee name									
05/17/2025	Houston Texans									
<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Amount (\$)</td> <td style="width:40%;">Payee address; City; State; Zip Code</td> </tr> <tr> <td>1,283.60</td> <td>2 NRG Park, Houston, TX 77054</td> </tr> </table>			Amount (\$)	Payee address; City; State; Zip Code	1,283.60	2 NRG Park, Houston, TX 77054				
Amount (\$)	Payee address; City; State; Zip Code									
1,283.60	2 NRG Park, Houston, TX 77054									
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Award Expense	Description Tickets for constituent gifts and donations								
	Check if travel outside of Texas. Complete Schedule T. Check If Austin, TX, officeholder living expense									
<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name</td> <td style="width:20%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>			Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held				
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

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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: 43	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 05/18/2025	5 Payee name Magnolia Hardware	
6 Amount (\$) 11.55	7 Payee address; City; State; Zip Code 19025 FM 1488 Rd, Magnolia, TX 77355	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Parts for cook trailer
	(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 05/19/2025	Payee name Premier Beverage	
Amount (\$) 641.50	Payee address; City; State; Zip Code 13080 TX 105, Conroe, TX 77304	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Bar Tending service for 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 05/21/2025	Payee name Magnolia Event Center	
Amount (\$) 3,575.00	Payee address; City; State; Zip Code 11659 FM 1488 Rd, Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Fundraiser Venue fee
	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
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 43	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 05/28/2025	5 Payee name Rancho Grande	
6 Amount (\$) 42.11	7 Payee address; City; State; Zip Code 18914 FM 1488 Rd, Magnolia, TX 77355	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food Expense	(b) Description Command staff lunch
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 05/31/2025	Payee name H E B	
Amount (\$) 208.74	Payee address; City; State; Zip Code 7988 FM 1488, Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Food donation for MISD Reading jubilee
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 06/02/2025	Payee name City Liquor	
Amount (\$) 170.35	Payee address; City; State; Zip Code 2450 Lake Rd, Dyersburg, TN 38024	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift Expense	Description Gifts for constituents
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 43	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)								
4 Date 06/02/2025	5 Payee name City Liquor									
6 Amount (\$) 658.75	7 Payee address; City; State; Zip Code 2450 Lake Rd, Dyersburg, TN 38024									
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift Expense	(b) Description Gifts for constituents								
	(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										
<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Date</td> <td style="width:80%;">Candidate / Officeholder name</td> <td style="width:20%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> <tr> <td>06/02/2025</td> <td>Magnolia's Best Storage</td> <td></td> <td></td> </tr> </table>			Date	Candidate / Officeholder name	Office sought	Office held	06/02/2025	Magnolia's Best Storage		
Date	Candidate / Officeholder name	Office sought	Office held							
06/02/2025	Magnolia's Best Storage									
<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Amount (\$)</td> <td style="width:80%;">Payee address; City; State; Zip Code</td> </tr> <tr> <td>224.00</td> <td>37805 FM 1774, Magnolia, TX 77355</td> </tr> </table>			Amount (\$)	Payee address; City; State; Zip Code	224.00	37805 FM 1774, Magnolia, TX 77355				
Amount (\$)	Payee address; City; State; Zip Code									
224.00	37805 FM 1774, Magnolia, TX 77355									
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Rental Expense	Description Storage for campaign materials								
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense									
<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name</td> <td style="width:20%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>			Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held							
<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Date</td> <td style="width:80%;">Payee name</td> </tr> <tr> <td>06/04/2025</td> <td>Ashton Hedrick Campaign</td> </tr> </table>			Date	Payee name	06/04/2025	Ashton Hedrick Campaign				
Date	Payee name									
06/04/2025	Ashton Hedrick Campaign									
<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Amount (\$)</td> <td style="width:80%;">Payee address; City; State; Zip Code</td> </tr> <tr> <td>40.00</td> <td>PO Box 51, Magnolia, TX 77353</td> </tr> </table>			Amount (\$)	Payee address; City; State; Zip Code	40.00	PO Box 51, Magnolia, TX 77353				
Amount (\$)	Payee address; City; State; Zip Code									
40.00	PO Box 51, Magnolia, TX 77353									
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution made by OH	Description tickets to fundraiser								
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense									
<table border="0" style="width:100%;"> <tr> <td style="width:20%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%;">Candidate / Officeholder name</td> <td style="width:20%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>			Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held				
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.

1 Total pages Schedule F1: 43	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 06/04/2025	5 Payee name Ashton Hedrick Campaign	
6 Amount (\$) 1,000.00	7 Payee address; City; State; Zip Code PO Box 51, Magnolia, TX 77353	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contribution made by OH	(b) Description Donation to fundraiser
	(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 06/05/2025	Payee name High Meadow Ranch Golf	
Amount (\$) 24.31	Payee address; City; State; Zip Code 37300 Golf Club Trail, Magnolia, TX 77355	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Expense	Description Lunch with constituents
	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 06/05/2025	Payee name MHS Band Booster Club	
Amount (\$) 257.50	Payee address; City; State; Zip Code 14350 FM 1488, Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation made by OH	Description Donation to band booster club
	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

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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: <div style="font-size: 2em; margin-left: 20px;">43</div>	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 06/05/2025	5 Payee name Chade Jordan	
6 Amount (\$) 1,750.00	7 Payee address; City; State; Zip Code PO Box 222, Magnolia, TX 77353	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation made by OH	(b) Description Baseball 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 06/06/2025	Payee name Billy Masden Campaign	
Amount (\$) 1,670.00	Payee address; City; State; Zip Code PO Box 77, Magnolia, TX 77353	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution made by OH	Description Donation to 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

Date 06/07/2025	Payee name Amazon	
Amount (\$) 102.83	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 Expense	Description Office supplies for office remodel
	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

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 43	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 06/09/2025	5 Payee name Clearwater Express	
6 Amount (\$) 49.47	7 Payee address; City; State; Zip Code 14206 FM 1488 Rd, Magnolia, TX 77354	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Carwash service for fleet
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 06/10/2025	Payee name B Signs	
Amount (\$) 483.58	Payee address; City; State; Zip Code 4239 Earnings Way, New Albany, IN 47150	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation made by OH	Description Donation for new historical marker
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 06/10/2025	Payee name Proforma	
Amount (\$) 343.01	Payee address; City; State; Zip Code 8800 E Pleasant Valley Rd, Cleveland, OH 44131	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense	Description Koozies for campaign
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: <u>43</u>		2 FILER NAME CONSTABLE CHRIS JONES		3 Filer ID (Ethics Commission Filers)	
4 Date 06/11/2025		5 Payee name AT&T			
6 Amount (\$) 277.14		7 Payee address; City; State; Zip Code PO Box 5014, Carol Stream, IL 60197			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead		(b) Description Phone payment		
	(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 06/13/2025		Payee name Govx.com			
Amount (\$) 287.33		Payee address; City; State; Zip Code 9191 Towne Centre Dr Ste 210, San Diego, CA 92122			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Uniform gear		
	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 06/14/2025		Payee name Amazon			
Amount (\$) 13.93		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 Expense		Description Supplies for office remodel		
	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.

1 Total pages Schedule F1: <div style="font-size: 2em; margin-left: 10px;">43</div>	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 06/14/2025	5 Payee name Amazon	
6 Amount (\$) 37.50	7 Payee address; City; State; Zip Code 440 Terry Ave N, Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Expense	(b) Description Supplies for office remodel
	(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 06/14/2025	Payee name Amazon	
Amount (\$) 69.66	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 Expense	Description Supplies for office remodel
	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 06/14/2025	Payee name Amazon	
Amount (\$) 32.16	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 Expense	Description Supplies for office remodel
	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: 43		2 FILER NAME CONSTABLE CHRIS JONES		3 Filer ID (Ethics Commission Filers)	
4 Date 06/18/2025		5 Payee name Timeless Interiors			
6 Amount (\$) 3,500.00		7 Payee address; City; State; Zip Code 5 Huntington Woods Estates Dr, Tomball, TX 77377			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor		(b) Description Contractor for office remodel		
	(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 06/19/2025		Payee name Magnolia Hardware			
Amount (\$) 113.63		Payee address; City; State; Zip Code 19025 FM 1488 Rd, Magnolia, TX 77355			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Propane for cook trailer		
	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 06/21/2025		Payee name Gianna's Italian Kitchen			
Amount (\$) 76.83		Payee address; City; State; Zip Code 28301 TX 249, Tomball, TX 77375			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Expense		Description Lunch with constituent		
	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.

1 Total pages Schedule F1: <div style="font-size: 1.5em; margin-left: 20px;">43</div>		2 FILER NAME CONSTABLE CHRIS JONES		3 Filer ID (Ethics Commission Filers)	
4 Date 06/24/2025		5 Payee name Amazon			
6 Amount (\$) 70.33		7 Payee address; City; State; Zip Code 440 Terry Ave N, Seattle, WA 98109			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead		(b) Description Office remodel 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					
Date 06/25/2025		Payee name Amazon			
Amount (\$) 12.87		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		Description Office remodel 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 06/25/2025		Payee name Amazon			
Amount (\$) 135.11		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		Description office remodel 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					

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: <div style="font-size: 2em; margin-left: 20px;">43</div>	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 06/29/2025	5 Payee name Amazon	
6 Amount (\$) 26.80	7 Payee address; City; State; Zip Code 440 Terry Ave N, Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead	(b) Description Office 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		
Date 06/30/2025	Candidate / Officeholder name Kedra Brown	
Amount (\$) 1,500.00	Payee address; City; State; Zip Code 28233 Eagle Cove, Magnolia, TX 77355	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundraising Expense	Description Fundraiser live auction
	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 01/30/2025	Candidate / Officeholder name MWHS Baseball	
Amount (\$) 500.00	Payee address; City; State; Zip Code 42202 FM 1774, Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donaton made by OH	Description Donation to baseball team
	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.

1 Total pages Schedule F1: <div style="font-size: 2em; margin-left: 20px;">43</div>	2 FILER NAME CONSTABLE CHRIS JONES	3 Filer ID (Ethics Commission Filers)
4 Date 02/15/2025	5 Payee name Family Promise of Montgomery County	
6 Amount (\$) 1,250.00	7 Payee address; City; State; Zip Code PO Box 692, Conroe, TX 77305	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation made by OH	(b) Description Annual fundraiser 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 02/11/2025	Payee name MWHS Baseball	
Amount (\$) 158.00	Payee address; City; State; Zip Code 42202 FM 1774, Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation made by OH	Description Donation to baseball team
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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:

27

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

02/27/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

Paul Welch

7 Amount of contribution (\$)

2,500.00

6 Contributor address;

City;

State;

Zip Code

26386 Jacks Barn Rd, Montgomery, TX 77316

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/25/2025

Full name of contributor

out-of-state PAC (ID#: _____)

MCLEA

Amount of contribution (\$)

2,500.00

Contributor address;

City;

State;

Zip Code

PO Box 8793, The Woodlands, TX 77387

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/25/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Alan Wright

Amount of contribution (\$)

2,500.00

Contributor address;

City;

State;

Zip Code

19802 Indigo Lake Dr, Magnolia, TX 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/27/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Mark Hermann Campaign

Amount of contribution (\$)

1,500.00

Contributor address;

City;

State;

Zip Code

18482 Kuykendahl Rd, Spring, TX 77379

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:

27

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

02/27/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

David Weber

7 Amount of contribution (\$)

1,500.00

6 Contributor address;

City;

State;

Zip Code

37723 Parkway Oaks Ln, Magnolia, TX 77355

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/27/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Steve Anderson

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

710 S Frazier St, Conroe, TX 77301

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/27/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Chopin Kiang

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

11826 Live Oak Dr, Magnolia, TX 77354

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/27/2025

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:

27

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

02/27/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

Donnie Buckalew

7 Amount of contribution (\$)

500.00

6 Contributor address;

City;

State;

Zip Code

PO Box 500, Conroe, TX 77305

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/27/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Commissioner Charlie Riley

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

PO Box 1605, Magnolia, TX 77353

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/25/2025

Full name of contributor

out-of-state PAC (ID#: _____)

David Lege

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

38923 FM 1774, Magnolia, TX 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/25/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Bruce Springer

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

19706 Timber Ridge Dr, 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: **21**

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

02/27/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

Johnny Mancuso

7 Amount of contribution (\$)

250.00

6 Contributor address;

City;

State;

Zip Code

8223 CR 302, Plantersville, TX 77353

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/27/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Leon Taake

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

1519 Mere Dr, Pinehurst, TX 77362

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/27/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Commissioner Robert Walker

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

510 Hwy 75 N, Willis, TX 77378

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/07/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Nancy Johnston

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

17520 Minnow Lake Ln, Conroe, TX 77384

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:

27

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

03/13/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

ABRI Services DBA

7 Amount of contribution (\$)

250.00

6 Contributor address;

City;

State;

Zip Code

PO Box 120, Pinehurst, TX 77362

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/25/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Steve Hoffart

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

15208 Moonlight Trail, Conroe, TX 77384

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/25/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Lake Conroe Area Republican Women

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

PO Box 737, Montgomery, TX 77356

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/27/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Jack Serpas

Amount of contribution (\$)

200.00

Contributor address;

City;

State;

Zip Code

28153 Meadow Forest, 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:

27

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

04/04/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

Steve Bozeman

6 Contributor address;

City;

State;

Zip Code

31 Los Encinos, Magnolia, TX 77354

7 Amount of contribution (\$)

5,000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/04/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Lindsey Kasprzak

Contributor address;

City;

State;

Zip Code

27 Grand Regency Circle, The Woodlands, TX 77382

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/04/2025

Full name of contributor

out-of-state PAC (ID#: _____)

John Chamberlain

Contributor address;

City;

State;

Zip Code

28352 Forest Green Dr, Magnolia, TX 77355

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/04/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Betty Vairin

Contributor address;

City;

State;

Zip Code

616 Castlewood Cove Ln, Pinehurst, TX 77362

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:

27

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

04/04/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

Glen Vairin

7 Amount of contribution (\$)

500.00

6 Contributor address;

City;

State;

Zip Code

616 Castlewood Cove Ln, Pinehurst, TX 77362

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/06/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Bobby Hartman

Amount of contribution (\$)

1,000.00

Contributor address;

City;

State;

Zip Code

12107 Carol Ln, Pinehurst, TX 77362

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Ken Walling

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

25011 Silver Leaf, Magnolia, TX 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Brad Stapp

Amount of contribution (\$)

1,500.00

Contributor address;

City;

State;

Zip Code

20403 I 45 N, Spring, TX 77388

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: <u>27</u>
2 FILER NAME CONSTABLE CHRIS JONES		3 Filer ID (Ethics Commission Filers)
4 Date 04/10/2025	5 Full name of contributor out-of-state PAC (ID#: _____) Emerge Services, LLC 6 Contributor address; City; State; Zip Code 12400 Rose Rd, Willis, TX 77378	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/10/2025	Full name of contributor out-of-state PAC (ID#: _____) The Blair Law Firm Contributor address; City; State; Zip Code 7 Grogans Mill Park Dr, The Woodlands, TX 77380	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/10/2025	Full name of contributor out-of-state PAC (ID#: _____) Linebarger Goggan Blair & Sampson, LLP Contributor address; City; State; Zip Code PO Box 17428, Austin, TX 78750	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/10/2025	Full name of contributor out-of-state PAC (ID#: _____) David Lege Contributor address; City; State; Zip Code 38923 FM 1774, Magnolia, TX 77355	Amount of contribution (\$) 160.00
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: 27

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

04/10/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

Dona Hunt

7 Amount of contribution (\$)

205.00

6 Contributor address;

City;

State;

Zip Code

17803 Rolling Hills Dr, Magnolia, TX 77354

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Dwayne Maracantel

Amount of contribution (\$)

5,200.00

Contributor address;

City;

State;

Zip Code

26202 Crown Ct, Montgomery, TX 77316

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Chad Walling

Amount of contribution (\$)

2,100.00

Contributor address;

City;

State;

Zip Code

9150 Cedar Bend Ln, Plantersville, TX 77363

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

The Meating Place, LLC

Amount of contribution (\$)

4,600.00

Contributor address;

City;

State;

Zip Code

41902 FM 1774, Magnolia, TX 77354

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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: 27

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

04/10/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

Clyde Hunt

7 Amount of contribution (\$)

340.00

6 Contributor address;

City;

State;

Zip Code

17803 Rolling Hills Dr, Magnolia, TX 77354

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

James Bell

Amount of contribution (\$)

200.00

Contributor address;

City;

State;

Zip Code

31318 Cripple Creek, Magnolia, TX 77354

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Mark Keough Campaign

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

26 Woodmere Place, The Woodlands, TX 77381

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Spencer Graham

Amount of contribution (\$)

2,825.00

Contributor address;

City;

State;

Zip Code

33920 Old Hempstead Rd, Magnolia, TX 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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: 27

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

04/10/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

David Frey

7 Amount of contribution (\$)

1,500.00

6 Contributor address;

City;

State;

Zip Code

16134 Parish Hall Dr, Spring, TX 77379

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Amolfo Rodriguez

Amount of contribution (\$)

2,000.00

Contributor address;

City;

State;

Zip Code

26398 Jacks Barn Rd, Montgomery, TX 77316

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/19/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Friends of Cecil Bell Jr

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

PO Box 819, Magnolia, TX 77353

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/19/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Bob Lindley

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

37022 Sulphur Branch Bend, Magnolia, TX 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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:

27

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

03/22/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

Sara Ortwein

7 Amount of contribution (\$)

2,500.00

6 Contributor address;

City;

State;

Zip Code

28222 Canyon View, Magnolia, TX 77355

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/02/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Anthony Cooley

Amount of contribution (\$)

2,500.00

Contributor address;

City;

State;

Zip Code

11649 CR 302, Plantersville, TX 77363

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/04/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Ben Herman

Amount of contribution (\$)

1,500.00

Contributor address;

City;

State;

Zip Code

13910 Alice Rd, Tomball, TX 77377

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/04/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Dale Bible

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

18640 FM 1488, Magnolia, TX 77354

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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:

27

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

03/22/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

Dianna Morgan

6 Contributor address;

City;

State;

Zip Code

6907 Crockett Ct, Montgomery, TX 77316

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/22/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Joel English

Contributor address;

City;

State;

Zip Code

40519 Manor Dr, Magnolia, TX 77354

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/27/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Grey Wilkinson

Contributor address;

City;

State;

Zip Code

28243 Meadow Forest, Magnolia, TX 77355

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/25/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Terry Colburn

Contributor address;

City;

State;

Zip Code

23574 Weeren Rd, Montgomery, TX 77316

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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:

27

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

03/10/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

Gary Jones

7 Amount of contribution (\$)

250.00

6 Contributor address;

City;

State;

Zip Code

6902 Apache Creek, Montgomery, TX 77316

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/14/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Frank Parker

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

31602 Hanks Rd, Magnolia, TX 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/15/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Thomas Teale

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

22303 Cindy Lynn Ln, Magnolia, TX 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/17/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Laurie Clifton

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

28533 Hidden Cr, Magnolia, TX 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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:

27

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

03/18/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

Ashton Hedrick

7 Amount of contribution (\$)

250.00

6 Contributor address;

City;

State;

Zip Code

PO Box 51, Magnolia, TX 77355

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/19/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Megan White

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

7422 Ponderosa Dr, Magnolia, TX 77354

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/30/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Jamie Schanbachler

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

6803 Sierra Ct, Montgomery, TX 77316

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/04/2025

Full name of contributor

out-of-state PAC (ID#: _____)

William Rowley

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

42930 O' Neal Ln, Magnolia, TX 77354

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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:

27

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

04/08/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

Kendrick Skipper

7 Amount of contribution (\$)

250.00

6 Contributor address;

City;

State;

Zip Code

10977 Lake Forest Dr, Conroe, TX 77384

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/08/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Jason Herrman

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

33505 Comanche Trl, Magnolia, TX 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/09/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Andy Palermo

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

29543 Sky Forest Circle, Magnolia, TX 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Jonathan Aldridge

Amount of contribution (\$)

125.00

Contributor address;

City;

State;

Zip Code

18704 Knippa Ct, Magnolia, TX 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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:

27

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

04/10/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

Wesley Bagley

7 Amount of contribution (\$)

130.00

6 Contributor address;

City;

State;

Zip Code

42581 Summer Crest Dr, Magnolia, TX 77354

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Erick Bernard

Amount of contribution (\$)

750.00

Contributor address;

City;

State;

Zip Code

22419 Meadowsweet Dr, Magnolia, TX 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Kandice Cabets

Amount of contribution (\$)

2,800.00

Contributor address;

City;

State;

Zip Code

26926 FM 2978, Magnolia, TX 77354

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Kristin Christ

Amount of contribution (\$)

115.00

Contributor address;

City;

State;

Zip Code

PO Box 558, Pinehurst, TX 77362

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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:

27

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

04/10/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

Jeremy Christ

7 Amount of contribution (\$)

150.00

6 Contributor address;

City;

State;

Zip Code

PO Box 558, Pinehurst, TX 77362

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Jason Clarkson

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

38118 N Sweetwater Cir, Magnolia, TX 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Michael Coffee

Amount of contribution (\$)

635.00

Contributor address;

City;

State;

Zip Code

28233 Forest Green, Magnolia, TX 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Kevin Coppock

Amount of contribution (\$)

350.00

Contributor address;

City;

State;

Zip Code

27526 Heighmont Est, Magnolia, TX 77354

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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:

27

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

04/10/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

Rene Deo

7 Amount of contribution (\$)

445.00

6 Contributor address;

City;

State;

Zip Code

18222 Forest Green, Magnolia, TX 77355

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Bryan Disdier

Amount of contribution (\$)

1,100.00

Contributor address;

City;

State;

Zip Code

19726 Country Lake Dr, Magnolia, TX 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

David Eason

Amount of contribution (\$)

1,500.00

Contributor address;

City;

State;

Zip Code

130 N Main, Conroe, TX 77301

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Joel English

Amount of contribution (\$)

630.00

Contributor address;

City;

State;

Zip Code

40519 Manor Dr, Magnolia, TX 77354

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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: 27
2 FILER NAME CONSTABLE CHRIS JONES		3 Filer ID (Ethics Commission Filers)
4 Date 04/10/2025	5 Full name of contributor out-of-state PAC (ID#: _____) Casey Estes 6 Contributor address; City; State; Zip Code 27015 Spring Woods, Magnolia, TX 77354	7 Amount of contribution (\$) 9,315.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/10/2025	Full name of contributor out-of-state PAC (ID#: _____) Donna Gatewood Contributor address; City; State; Zip Code 28223 Meadow Falls, Magnolia, TX 77355	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/10/2025	Full name of contributor out-of-state PAC (ID#: _____) Eva Gordon Contributor address; City; State; Zip Code PO Box 1461, Magnolia, TX 77353	Amount of contribution (\$) 210.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/10/2025	Full name of contributor out-of-state PAC (ID#: _____) Angela Hahn Contributor address; City; State; Zip Code 18886 Maverick Ranch Rd, Magnolia, TX 77355	Amount of contribution (\$) 245.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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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:

27

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

04/10/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

Rowdy Hayden

6 Contributor address;

City;

State;

Zip Code

21130 US 59, New Caney, TX 77357

7 Amount of contribution (\$)

2,000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Lacey Hedrick

Contributor address;

City;

State;

Zip Code

30819 Roadie Pass, Magnolia, TX 77355

Amount of contribution (\$)

210.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Ben Herman

Contributor address;

City;

State;

Zip Code

23557 High Meadow Estates Dr, Montgomery, TX 77316

Amount of contribution (\$)

75.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Colby Herman

Contributor address;

City;

State;

Zip Code

23557 High Meadow Estates Dr, Montgomery, TX 77316

Amount of contribution (\$)

6,100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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: 27
2 FILER NAME CONSTABLE CHRIS JONES		3 Filer ID (Ethics Commission Filers)
4 Date 04/10/2025	5 Full name of contributor out-of-state PAC (ID#: _____) Jason Herrman 6 Contributor address; City; State; Zip Code 33505 Comanche Trail, Magnolia, TX 77355	7 Amount of contribution (\$) 1,125.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/10/2025	Full name of contributor out-of-state PAC (ID#: _____) Jan Johnston Contributor address; City; State; Zip Code 40111 Country Forest Dr, Magnolia, TX 77354	Amount of contribution (\$) 185.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/10/2025	Full name of contributor out-of-state PAC (ID#: _____) Kelly Jones Contributor address; City; State; Zip Code 5 Huntington Woods Estates Dr, Tomball, TX 77377	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/10/2025	Full name of contributor out-of-state PAC (ID#: _____) Jennifer Jordan Contributor address; City; State; Zip Code PO Box 222, Magnolia, TX 77353	Amount of contribution (\$) 215.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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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:

27

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

02/24/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

Jennifer Jordan

7 Amount of contribution (\$)

120.00

6 Contributor address;

City;

State;

Zip Code

PO Box 222, Magnolia, TX 77353

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Michael Kassoof

Amount of contribution (\$)

200.00

Contributor address;

City;

State;

Zip Code

6533 W Sam Houston Pkwy, Houston, TX 77041

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Jeff Lauderdale

Amount of contribution (\$)

2,220.00

Contributor address;

City;

State;

Zip Code

29032 Champions Dr, Magnolia, TX 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Matt Mitchell

Amount of contribution (\$)

225.00

Contributor address;

City;

State;

Zip Code

162 Dina Ln, Montgomery, TX 77356

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**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:

21

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

04/10/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

Chris Murray

7 Amount of contribution (\$)

2,700.00

6 Contributor address;

City;

State;

Zip Code

1010 Towering Oaks St, Magnolia, TX 77355

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Mike Overman

Amount of contribution (\$)

210.00

Contributor address;

City;

State;

Zip Code

41629 N Brenda Ln, Magnolia, TX 77354

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Joey Parker

Amount of contribution (\$)

1,925.00

Contributor address;

City;

State;

Zip Code

44065 Enderli St, Magnolia, TX 77354

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Jennifer Porter

Amount of contribution (\$)

650.00

Contributor address;

City;

State;

Zip Code

25434 Hardin Store 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:

27

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

04/10/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

Denton Rowley

7 Amount of contribution (\$)

305.00

6 Contributor address;

City;

State;

Zip Code

42930 O'Neal, Magnolia, TX 77354

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Connie Schultz

Amount of contribution (\$)

300.00

Contributor address;

City;

State;

Zip Code

5306 Ranchers Lake Dr, Magnolia, TX 77354

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Kyle Soeder

Amount of contribution (\$)

2,900.00

Contributor address;

City;

State;

Zip Code

40018 Barksdale Dr, Magnolia, TX 77354

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Adam Stanford

Amount of contribution (\$)

14,300.00

Contributor address;

City;

State;

Zip Code

5003 Whispering Meadow, 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: 27
2 FILER NAME CONSTABLE CHRIS JONES		3 Filer ID (Ethics Commission Filers)
4 Date 04/10/2025	5 Full name of contributor out-of-state PAC (ID#: _____) Linda Stuckey <hr/> 6 Contributor address; City; State; Zip Code 30310 Charlie Ln, Magnolia, TX 77355	7 Amount of contribution (\$) 625.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/10/2025	Full name of contributor out-of-state PAC (ID#: _____) Tammy Teale <hr/> Contributor address; City; State; Zip Code 24610 Nottingham Circle, Hockley, TX 77447	Amount of contribution (\$) 235.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/10/2025	Full name of contributor out-of-state PAC (ID#: _____) Laura Zulim <hr/> Contributor address; City; State; Zip Code 23916 Macedonia, Hockley, TX 77447	Amount of contribution (\$) 16,600.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/10/2025	Full name of contributor out-of-state PAC (ID#: _____) Ron Hinkleman <hr/> Contributor address; City; State; Zip Code 17828 Lake Placid Ln, Magnolia, TX 77354	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:

27

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 Date

04/28/2025

5 Full name of contributor

out-of-state PAC (ID#: _____)

Trent Tacker

7 Amount of contribution (\$)

3,000.00

6 Contributor address;

City;

State;

Zip Code

30225 Tudor Way, Magnolia, TX 77355

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/25/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Larry Robinson

Amount of contribution (\$)

200.00

Contributor address;

City;

State;

Zip Code

38022 Clubhouse, Magnolia, TX 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/29/2025

Full name of contributor

out-of-state PAC (ID#: _____)

Brian Oglesbee

Amount of contribution (\$)

200.00

Contributor address;

City;

State;

Zip Code

29513 Timber Village Ct, Magnolia, TX 77355

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE A2

The Instruction Guide explains how to complete this form.

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

\$ 1,835.00

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

8 Amount of Contribution \$

9 In-kind contribution description

04/10/2025

7 Contributor address; City; State; Zip Code

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
1	100% of the cost of the equipment used in the project.
2	100% of the cost of the materials used in the project.
3	100% of the cost of the labor used in the project.
4	100% of the cost of the travel used in the project.
5	100% of the cost of the lodging used in the project.
6	100% of the cost of the food used in the project.
7	100% of the cost of the telephone used in the project.
8	100% of the cost of the postage used in the project.
9	100% of the cost of the printing used in the project.
10	100% of the cost of the reproduction used in the project.
11	100% of the cost of the translation used in the project.
12	100% of the cost of the interpretation used in the project.
13	100% of the cost of the transcription used in the project.
14	100% of the cost of the editing used in the project.
15	100% of the cost of the proofreading used in the project.
16	100% of the cost of the typesetting used in the project.
17	100% of the cost of the binding used in the project.
18	100% of the cost of the distribution used in the project.
19	100% of the cost of the promotion used in the project.
20	100% of the cost of the advertising used in the project.
21	100% of the cost of the public relations used in the project.
22	100% of the cost of the research used in the project.
23	100% of the cost of the development used in the project.
24	100% of the cost of the testing used in the project.
25	100% of the cost of the evaluation used in the project.
26	100% of the cost of the implementation used in the project.
27	100% of the cost of the monitoring used in the project.
28	100% of the cost of the reporting used in the project.
29	100% of the cost of the documentation used in the project.
30	100% of the cost of the archiving used in the project.
31	100% of the cost of the preservation used in the project.
32	100% of the cost of the restoration used in the project.
33	100% of the cost of the conservation used in the project.
34	100% of the cost of the maintenance used in the project.
35	100% of the cost of the repair used in the project.
36	100% of the cost of the replacement used in the project.
37	100% of the cost of the upgrade used in the project.
38	100% of the cost of the renovation used in the project.
39	100% of the cost of the reconstruction used in the project.
40	100% of the cost of the remodeling used in the project.
41	100% of the cost of the redecoration used in the project.
42	100% of the cost of the repainting used in the project.
43	100% of the cost of the retiling used in the project.
44	100% of the cost of the replumbing used in the project.
45	100% of the cost of the rewiring used in the project.
46	100% of the cost of the reconditioning used in the project.
47	100% of the cost of the refurbishing used in the project.
48	100% of the cost of the refinishing used in the project.
49	100% of the cost of the refitting used in the project.
50	100% of the cost of the refurnishing used in the project.
51	100% of the cost of the refabrication used in the project.
52	100% of the cost of the refashioning used in the project.
53	100% of the cost of the refitting used in the project.
54	100% of the cost of the refurnishing used in the project.
55	100% of the cost of the refabrication used in the project.
56	100% of the cost of the refashioning used in the project.
57	100% of the cost of the refitting used in the project.
58	100% of the cost of the refurnishing used in the project.
59	100% of the cost of the refabrication used in the project.
60	100% of the cost of the refashioning used in the project.
61	100% of the cost of the refitting used in the project.
62	100% of the cost of the refurnishing used in the project.
63	100% of the cost of the refabrication used in the project.
64	100% of the cost of the refashioning used in the project.
65	100% of the cost of the refitting used in the project.
66	100% of the cost of the refurnishing used in the project.
67	100% of the cost of the refabrication used in the project.
68	100% of the cost of the refashioning used in the project.
69	100% of the cost of the refitting used in the project.
70	100% of the cost of the refurnishing used in the project.
71	100% of the cost of the refabrication used in the project.
72	100% of the cost of the refashioning used in the project.
73	100% of the cost of the refitting used in the project.
74	100% of the cost of the refurnishing used in the project.
75	100% of the cost of the refabrication used in the project.
76	100% of the cost of the refashioning used in the project.
77	100% of the cost of the refitting used in the project.
78	100% of the cost of the refurnishing used in the project.
79	100% of the cost of the refabrication used in the project.
80	100% of the cost of the refashioning used in the project.
81	100% of the cost of the refitting used in the project.
82	100% of the cost of the refurnishing used in the project.
83	100% of the cost of the refabrication used in the project.
84	100% of the cost of the refashioning used in the project.
85	100% of the cost of the refitting used in the project.
86	100% of the cost of the refurnishing used in the project.
87	100% of the cost of the refabrication used in the project.
88	100% of the cost of the refashioning used in the project.
89	100% of the cost of the refitting used in the project.
90	100% of the cost of the refurnishing used in the project.
91	100% of the cost of the refabrication used in the project.
92	100% of the cost of the refashioning used in the project.
93	100% of the cost of the refitting used in the project.
94	100% of the cost of the refurnishing used in the project.
95	100% of the cost of the refabrication used in the project.
96	100% of the cost of the refashioning used in the project.
97	100% of the cost of the refitting used in the project.
98	100% of the cost of the refurnishing used in the project.
99	100% of the cost of the refabrication used in the project.
100	100% of the cost of the refashioning used in the project.

04/10/2025

Contributor address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

Employer (FOR NON-JUDICIAL)(See Instructions)

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

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Forms provided by Texas Ethics Commission

SCHEDULE A2

The Instruction Guide explains how to complete this form.

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

\$ 1,835.00

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
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41	100
42	100
43	100
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45	100
46	100
47	100
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49	100
50	100
51	100
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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

3,100.00

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)

Full name of contributor ☐ out-of-state PAC (ID#:Amount of
Contribution \$

Contributor address: City: State: Zip Code

18,000.00

4 Special edition Henry rifles

Check if travel outside of Texas. Complete Schedule T.

Employer (FOR NON-JUDICIAL) (See Instructions)

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

Law firm of contributor's spouse (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: 23	
2 FILER NAME CONSTABLE CHRIS JONES		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 1,835.00	
5 Date 04/10/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billy Masden Campaign 7 Contributor address; City; State; Zip Code PO Box 77, Magnolia, TX 77353	8 Amount of Contribution \$ 1,900.00	9 In-kind contribution description Gullo car museum tour <small>Check if travel outside of Texas. Complete Schedule T.</small>
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 04/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cindy Anderson Contributor address; City; State; Zip Code 22615 Baneberry Rd, Magnolia, TX 77355	Amount of Contribution \$ 1,500.00	In-kind contribution description Gibson SG Special guitar <small>Check if travel outside of Texas. Complete Schedule T.</small>
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.			

SCHEDULE A2

The Instruction Guide explains how to complete this form.

3 Filer ID (Ethics Commission Filers)

CONSTABLE CHRIS JONES

\$ 1,835.00

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)

Check if travel outside of Texas. Complete Schedule T.

Employer (FOR NON-JUDICIAL)(See Instructions)

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

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

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: 23

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$ 1,835.00

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)

Check if travel outside of Texas. Complete Schedule T.

Employer (FOR NON-JUDICIAL)(See Instructions)

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

Law firm of contributor's spouse (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: 23

2 FILER NAME

CONSTABLE CHRIS JONES

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$ 1,835.00

5 Date

04/10/2025

6 Full name of contributor

Becky Bible

☐ out-of-state PAC (ID#)

7 Contributor address;

City;

State;

Zip Code

30806 Green Forest Dr, Magnolia, TX 77354

8 Amount of Contribution \$

225.00

9 In-kind contribution description

Gun cleaning kit, dog boarding basket

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

04/10/2025

Full name of contributor

David Marler

☐ out-of-state PAC (ID#)

Contributor address;

City;

State;

Zip Code

326 Creekside Dr, Magnolia, TX 77354

Amount of Contribution \$

280.00

In-kind contribution description

Flag art, Skin care basket

Check if travel outside of Texas. Complete Schedule T.

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

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

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

Contributor's employer/law firm (FOR JUDICIAL)

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

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE A2

The Instruction Guide explains how to complete this form.

2 FILER NAME

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

\$ 1,835

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

8 Amount of Contribution \$

7 Contributor address: _____ **City:** _____ **State:** _____ **Zip Code** _____

4 zones of
irrigation installed

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 \$

04/10/2025

Contributor address; City; State; Zip Code

1,600.00

Rossi 357 cal rifle

Check if travel outside of Texas. Complete Schedule T.

Employer (FOR NON-JUDICIAL)(See Instructions)

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

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Forms provided by Texas Ethics Commission

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: 23

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

CONSTABLE CHRIS JONES

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$ 1,835.00

5 Date

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

8 Amount of Contribution \$

9	In-kind contribution
	description

04/10/2025

Kedra Brown

1,500.00

Labradoodle puppy

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

28233 Eagle Cove, Magnolia, TX 77355

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

04/10/2025

Hunter Lauderdale

650.00

Side Chick cooler
& swag

Contributor address; City; State; Zip Code

29032 Champions Dr, Magnolia, TX 77355

Check if travel outside of Texas. Complete Schedule T.

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

Employer (FOR NON-JUDICIAL)(See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

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

Contributor's employer/law firm (FOR JUDICIAL)

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

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 23	
2 FILER NAME CONSTABLE CHRIS JONES		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 1,835.00	
5 Date 04/10/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunter Adams 7 Contributor address; City; State; Zip Code 41902 FM 1774, Magnolia, TX 77354	8 Amount of Contribution \$ 4,600.00	9 In-kind contribution description Exotic deer hunt 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 04/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeff Lauderdale Contributor address; City; State; Zip Code 29032 Champions Dr, Magnolia, TX 77355	Amount of Contribution \$ 2,900.00	In-kind contribution description 10 pallets of grass installed Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: 23

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$ 1,835.00

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

8 Amount of Contribution \$

7 Contributor address; City; State; Zip Code

700.00

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)

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

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

Amount of
Contribution \$

Contributor address; City; State; Zip Code

2,500.00

AR 15

Check If travel outside of Texas. Complete Schedule T.

Employer (FOR NON-JUDICIAL)(See Instructions)

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

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.

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: 23

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$ 1,835.00

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

8 Amount of Contribution \$

04/10/2025

7 Contributor address: City: State: Zip Code

2,000.00

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)

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

Amount of Contribution \$

04/10/2025

Contributor address; City; State; Zip Code

750.00

Michael Kors bag set,
Tory Burch bag set

5 Huntingtonwoods Estates Dr, Tomball, TX 77377

Check if travel outside of Texas. Complete Schedule T.

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

Employer (FOR NON-JUDICIAL)(See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

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

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (If any) (FOR JUDICIAL)

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

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: 23	
2 FILER NAME CONSTABLE CHRIS JONES		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 1,835.00	
5 Date 04/10/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laura Watson 7 Contributor address; City; State; Zip Code 10 Wellesly Ct, Magnolia, TX 77355	8 Amount of Contribution \$ 750.00	9 In-kind contribution description Hibachi at home for 10 <small>Check if travel outside of Texas. Complete Schedule T.</small>
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 04/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linda Stuckey Contributor address; City; State; Zip Code 30310 Charlie Ln, Magnolia, TX 77355	Amount of Contribution \$ 245.00	In-kind contribution description Gardening Basket <small>Check if travel outside of Texas. Complete Schedule T.</small>
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

SCHEDULE A2

The Instruction Guide explains how to complete this form.

3 Filer ID (Ethics Commission Filers)

CONSTABLE CHRIS JONES

\$ 1,835.00

Check if travel outside of Texas. Complete Schedule T.

Check if travel outside of Texas. Complete Schedule T.

Revised 1/1/2025

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 23	
2 FILER NAME CONSTABLE CHRIS JONES		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 1,835.00	
5 Date 04/10/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melissa Jones 7 Contributor address; City; State; Zip Code 22619 Baneberry Rd, Magnolia, TX 77355	8 Amount of Contribution \$ 4,000.00	9 In-kind contribution description Texans Tickets w/ parking pass, Nutoracker market trip, home basket, sunglasses 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 04/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michelle Bull Contributor address; City; State; Zip Code 33219 Forest West St, Magnolia, TX 77354	Amount of Contribution \$ 625.00	In-kind contribution description a year of massages Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.			

SCHEDULE A2

The Instruction Guide explains how to complete this form.

3 Filer ID (Ethics Commission Filers)

CONSTABLE CHRIS JONES

Check if travel outside of Texas. Complete Schedule T.

Check if travel outside of Texas. Complete Schedule T.

Revised 1/1/2025

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 23	
2 FILER NAME CONSTABLE CHRIS JONES		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 1,835.00	
5 Date 04/10/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mindy Harmon 7 Contributor address; City; State; Zip Code 25166 Grogans Park Dr, The Woodlands, TX 77380	8 Amount of Contribution \$ 300.00	9 In-kind contribution description Photography package, salon gift card
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 04/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paula Jones Contributor address; City; State; Zip Code 17366 Sunset Ranch Dr, Montgomery, TX 77316	Amount of Contribution \$ 1,000.00	In-kind contribution description Liquor gift baskets, pocket knives, bluetooth speaker
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.			

SCHEDULE A2

The Instruction Guide explains how to complete this form.

3 Filer ID (Ethics Commission Filers)

CONSTABLE CHRIS JONES

\$1,835.00

9 In-kind contribution description

Trump edition
gold 9mm Glock

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)

1	In-kind contribution
1	description

Beretta APX 9 mm
with range bag

Check if travel outside of Texas. Complete Schedule T.

Employer (FOR NON-JUDICIAL)(See Instructions)

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

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

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

CONSTABLE CHRIS JONES

\$ 1,835.00

Simon Sequeira

3,000.00

Hunting trip,
Astros tickets

7 Contributor address; City; State; Zip Code

26926 FM 2978, Magnolia, TX 77354

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 _____

Amount of Contribution \$

1	In-kind contribution
1	description

04/10/2025

Ralph Smith

200.00

Golf for 4 at Margaritaville

Contributor address; City; State; Zip Code

6871 Spring Branch Rd, Montgomery, TX 77316

Check if travel outside of Texas. Complete Schedule T.

Employer (FOR NON-JUDICIAL)(See Instructions)

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

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.

SCHEDULE A2

The Instruction Guide explains how to complete this form.

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

\$ 1,835.00

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

8	Amount of Contribution \$	
	1,500.00	

04/10/2025

PO Box 558, Pinehurst, TX 77362

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 \$

1	2	3	4	5	6	7	8	9	10

04/10/2025

Contributor address; City; State; Zip Code

450.00

Binoculars

Check if travel outside of Texas. Complete Schedule T.

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

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

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.

SCHEDULE A2

The Instruction Guide explains how to complete this form.

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

\$ 1,835.00

9 In-kind contribution
description

250.00

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 _____

Amount of Contribution \$

In-kind contribution description

10,000.00

Blue Glock 9mm, AR
15 Trump edition

Check if travel outside of Texas. Complete Schedule T.

Employer (FOR NON-JUDICIAL)(See Instructions)

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

Law firm of contributor's spouse (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)

\$ 1,835.00

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

8 Amount of Contribution \$

04/10/2025

7 Contributor address; City; State; Zip Code

175.00

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

04/10/2025

Contributor address; City; State; Zip Code

450.00

Rod & Reel
combo

Check if travel outside of Texas. Complete Schedule T.

Employer (FOR NON-JUDICIAL)(See Instructions)

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

Law firm of contributor's spouse (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: 23

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$ 1,835.00

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

8 Amount of Contribution \$

9 In-kind contribution description

7 Contributor address; City; State; Zip Code

100.00

Las Fuentes gift card

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)

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

Amount of Contribution \$

In-kind contribution description

Contributor address; City; State; Zip Code

650.00

Auto detailing kit,
cast iron basket

Check if travel outside of Texas. Complete Schedule T.

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

Employer (FOR NON-JUDICIAL)(See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

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

Contributor's employer/law firm (FOR JUDICIAL)

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

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

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: 23

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$ 1,835.00

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

8	Amount of Contribution \$
---	---------------------------

7 Contributor address; City; State; Zip Code

300.00

Tailgater 2

Check if travel outside of Texas. Complete Schedule T.

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

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

12 Contributor's principal occupation (FOR JUDICIAL)

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

14 Contributor's employer/law firm (FOR JUDICIAL)

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

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

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

Amount of Contribution \$

Contributor address; City; State; Zip Code

300.00

Bogg bag w/ pool accessories

30101 Hazy Hollow Rd, Magnolia, TX 77355

Check if travel outside of Texas. Complete Schedule T.

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

Employer (FOR NON-JUDICIAL)(See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

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

Contributor's employer/law firm (FOR JUDICIAL)

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

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

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