

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

15 C/OH NAME
Alan S. Trevino

16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 13,511.68
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 19,307.59
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 4,498.63
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 10,000.00

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 _____ this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

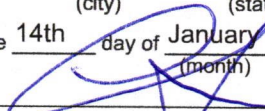
OR

(2) Unsworn Declaration

My name is Alan S. Trevino, and my date of birth is December 9, 1964.

My address is 309 First Down Dash, Burnet, TX, 78711, USA.

Executed in Burnet County, State of Texas, on the 14th day of January, 2026.


Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

Alan S. Trevino

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	■ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 11,690.00
2.	■ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,821.68
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	■ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 19,307.59
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7
2 FILER NAME Alan S. Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 07/13/2025	5 Full name of contributor out-of-state PAC (ID#: _____) Francis Meeker 6 Contributor address; City; State; Zip Code 903 N. Romberg St. Apt 4. Burnet TX 78611	7 Amount of contribution (\$) 20.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Texas Wash House
Date 07/13/2025	Full name of contributor out-of-state PAC (ID#: _____) Francis Meeker Contributor address; City; State; Zip Code 903 N. Romberg St. Apt 4, Burnet TX 78611	Amount of contribution (\$) 20.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Texas Wash House
Date 07/28/2025	Full name of contributor out-of-state PAC (ID#: _____) Dana Martin Contributor address; City; State; Zip Code 205 Coventry Rd, Spicewood TX 78669	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Friendship Homes and Hangers.LLC
Date 07/29/2025	Full name of contributor out-of-state PAC (ID#: _____) Claire Nybro Contributor address; City; State; Zip Code 410 County Rd. 100, Burnet TX 78611	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Retired		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: 7
2 FILER NAME Alan S. Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 08/09/2025	5 Full name of contributor out-of-state PAC (ID#: _____) Mark Riordan 6 Contributor address; City; State; Zip Code 17318 E. Blooming Rose Ct. Cypress TX 77429	7 Amount of contribution (\$) 200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 09/02/2025	Full name of contributor out-of-state PAC (ID#: _____) Craig Cosgray Contributor address; City; State; Zip Code 27206 Waterfall Hill Pkwy, Spicewood TX 78669	Amount of contribution (\$) 400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/03/2025	Full name of contributor out-of-state PAC (ID#: _____) Clayton Raven Contributor address; City; State; Zip Code 127 Rachel Loop, Burnet TX 78611	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Boat Town
Date 10/06/2025	Full name of contributor out-of-state PAC (ID#: _____) Gary Martin Contributor address; City; State; Zip Code PO Box 689, Marble Falls TX 78654	Amount of contribution (\$) 5,000.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
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: **7**

2 FILER NAME

Alan S. Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

10/11/2025

5 Full name of contributor

Beth Geiser

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

7 Amount of contribution (\$)

50.00

6 Contributor address;

City;

State;

Zip Code

104 Mountain View Cir. Burnet TX 78611

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Date

10/16/2025

Full name of contributor

Susann Honaker

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

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

11200 CR 200, Bertram TX 78605

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

10/17/2025

Full name of contributor

Caroline Alexander

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

Amount of contribution (\$)

50.00

Contributor address;

City;

State;

Zip Code

1101 6th St. #5209, Marble Falls TX 78654

Principal occupation / Job title (See Instructions)

Property Manager

Employer (See Instructions)

Hill Country Villas

Date

10/23/2025

Full name of contributor

Julie Partridge

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

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

PO Box 148, Spicewood TX 78669

Principal occupation / Job title (See Instructions)

Sales

Employer (See Instructions)

Self employed

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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7
2 FILER NAME Alan S. Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 10/16/2025	5 Full name of contributor out-of-state PAC (ID#: _____) Robby and Deidra Robertson 6 Contributor address; City; State; Zip Code 1 Camp Longhorn Rd. Burnet TX 78611	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/16/2025	Full name of contributor out-of-state PAC (ID#: _____) Jacki and Julia Kohlman Contributor address; City; State; Zip Code 200 County Road 119, Burnet TX 78611	Amount of contribution (\$) 20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/16/2025	Full name of contributor out-of-state PAC (ID#: _____) Alan and Kathy Snider Contributor address; City; State; Zip Code 1851 CR 108, Burnet TX 78611	Amount of contribution (\$) 60.00
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Realtor
Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: _____) Robert Taylor Didway Contributor address; City; State; Zip Code 1406 Sunset Dr. Marble Falls TX 78657	Amount of contribution (\$) 1,500.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self Employed
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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7
2 FILER NAME Alan S. Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 10/18/2025	5 Full name of contributor out-of-state PAC (ID#: _____) Dana J. Martin 6 Contributor address; City; State; Zip Code 205 Coventry Rd. Spicewood TX 78669	7 Amount of contribution (\$) 300.00
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Lake Friends Realty Inc.
Date 10/18/2025	Full name of contributor out-of-state PAC (ID#: _____) Ray and Mary Booth Contributor address; City; State; Zip Code 515 Contrails Way Spicewood TX 78669	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/18/2025	Full name of contributor out-of-state PAC (ID#: _____) Richard Lee Crow Contributor address; City; State; Zip Code 435 Coventry Rd. Spicewood TX 78669	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Retired
Date 10/18/2025	Full name of contributor out-of-state PAC (ID#: _____) Teresa Booth Contributor address; City; State; Zip Code 515 Contrails Way Spicewood TX 78669	Amount of contribution (\$) 70.00
Principal occupation / Job title (See Instructions) Retired		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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7
2 FILER NAME Alan S. Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 10/28/2025	5 Full name of contributor out-of-state PAC (ID#: _____) Lawrence Biehunko 6 Contributor address; City; State; Zip Code 641 Wesley Ridge Dr. Spicewood TX 78669	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 11/03/2025	Full name of contributor out-of-state PAC (ID#: _____) Diane Frisbie Contributor address; City; State; Zip Code 316 First Down Dash, Burnet TX 78611	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/06/2025	Full name of contributor out-of-state PAC (ID#: _____) Dennis and Lenore Langley Contributor address; City; State; Zip Code 302 Highland Dr. Burnet TX 78611	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Self Employeed
Date 11/17/2025	Full name of contributor out-of-state PAC (ID#: _____) Chris and Janet Bohanan Contributor address; City; State; Zip Code 2433 W. FM243, Bertram TX 78605	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

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: 7
2 FILER NAME Alan S. Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 11/06/2025	5 Full name of contributor out-of-state PAC (ID#: _____) STEPHANIE Sherrill	7 Amount of contribution (\$) 200.00
6 Contributor address; City; State; Zip Code 419 N River Oaks Dr. Burnet Tx 78611		
8 Principal occupation / Job title (See Instructions) Clerk		9 Employer (See Instructions) Burnet County
Date 11/13/2025	Full name of contributor out-of-state PAC (ID#: _____) Keith McBurnett	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code 315 Yellow Ribbon Burnet TX 78661		
Principal occupation / Job title (See Instructions) Assistant City Manager		Employer (See Instructions) City of Burnet
Date 11/21/2025	Full name of contributor out-of-state PAC (ID#: _____) Gregory M. Hamilton	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 1605 Augusta Bend Dr. Hutto TX 78634		
Principal occupation / Job title (See Instructions) Retired		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)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 2	
2 FILER NAME Alan S. Trevino		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 1,821.68	
5 Date 10/11/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caleb and Sydney Carrasco 7 Contributor address; City; State; Zip Code 1089 CR 334, Burnet TX 78611	8 Amount of Contribution \$ 250.00	9 In-kind contribution description Beverage Station <small>Check if travel outside of Texas. Complete Schedule T.</small>
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Self-Employed		11 Employer (FOR NON-JUDICIAL)(See Instructions) Mad Hatters Provisions	
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 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stacy Smith Contributor address; City; State; Zip Code 1429 Carson Way, Burnet TX 78611	Amount of Contribution \$ 671.68	In-kind contribution description Food/Beverage Chair/table Rental Port-a-potty <small>Check if travel outside of Texas. Complete Schedule T.</small>
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Field Rep. - Troxclair Office		Employer (FOR NON-JUDICIAL)(See Instructions) State of Texas	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 2	
2 FILER NAME Alan S Trevino		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 1,821.68	
5 Date 10/18/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bill Earnest and Rebecca Hempel 7 Contributor address; City; State; Zip Code 1117 Majestic Hills Blvd. Spicewood TX 78669	8 Amount of Contribution \$ 900.00	9 In-kind contribution description Food/Beverage
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Retired		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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of Contribution \$	In-kind contribution description
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.

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: 6	2 FILER NAME Alan S. Trevino	3 Filer ID (Ethics Commission Filers)
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4 Date 07/01/2025 ^{to} 11/25/25	5 Payee name Raise the Money
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6 Amount (\$) 127.28	7 Payee address; PO Box 26466, Little Rock AR 72221	City;	State;	Zip Code
<small>Check if individual's residence address.</small>				

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

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 07/14/2025	Payee name S&J Productions LLC
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Amount (\$) 1,221.88	Payee address; 3608 CR 330, Burnet TX 78611	City;	State;	Zip Code
<small>Check if individual's residence address.</small>				

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Half Day film and 5 reels
	<small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 07/25/2025	Payee name Burnet County Republican Club
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Amount (\$) 1,000.00	Payee address; PO Box 792, Marble Falls TX 78654	City;	State;	Zip Code
<small>Check if individual's residence address.</small>				

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution/Sponsorship	Description Platinum Sponsor for Republican Picnic
	<small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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: 6	2 FILER NAME Alan S. Trevino	3 Filer ID (Ethics Commission Filers)
4 Date 08/25/2025	5 Payee name The Sign Shop	
6 Amount (\$) 3,445.27	7 Payee address; City; State; Zip Code 1844 West Highway 29, Burnet TX 78611 <small>Check if individual's residence address.</small>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising/Printing	(b) Description Campaign Buttons, Push Cards, Hangers, Yard signs, Magnets
	(c) <small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/10/2025	Payee name Cristian Casarez	
Amount (\$) 673.75	Payee address; City; State; Zip Code 11516 Eric Heiden Ct. Austin TX 78748 <small>Check if individual's residence address.</small>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Website Design	Description Website Design, Management and Maintenance
	<small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/26/2025	Payee name XLR8	
Amount (\$) 571.56	Payee address; City; State; Zip Code 1002 N. Water Ste. 2, Burnet TX 78611 <small>Check if individual's residence address.</small>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Campaign T-shirts
	<small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	
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: 6	2 FILER NAME Alan S. Trevino	3 Filer ID (Ethics Commission Filers)
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4 Date 10/03/2025	5 Payee name S&J Productions LLC
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6 Amount (\$) 850.00	7 Payee address; 3608 CR330, Burnet TX 78611 <small>City; State; Zip Code</small> <small>Check if individual's residence address.</small>
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Filming and 4 reels
	(c) <small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/03/2025	Payee name HEB
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Amount (\$) 84.07	Payee address; 105 S. Boundary, Burnet TX 78611 <small>City; State; Zip Code</small> <small>Check if individual's residence address.</small>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage	Description Water/Beer/Sandwich tray
	<small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/06/2025	Payee name Helen Clary
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Amount (\$) 850.00	Payee address; PO Box 366, Kingsland Tx 78639 <small>City; State; Zip Code</small> <small>Check if individual's residence address.</small>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Facebook Advertisement
	<small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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: 6	2 FILER NAME Alan S. Trevino	3 Filer ID (Ethics Commission Filers)
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4 Date 10/17/2025	5 Payee name Round Mountain Cider
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6 Amount (\$) 300.00	7 Payee address; 222 Lee Ln. Round Mountain TX 78663 <small>City; State; Zip Code</small> <small>Check if individual's residence address.</small>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage	(b) Description Pizza
	(c) <small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/08/2025	Payee name Burnet County Republican Party
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Amount (\$) 750.00	Payee address; 210 South Main St. Burnet TX 78611 <small>City; State; Zip Code</small> <small>Check if individual's residence address.</small>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Application Fee
	<small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/12/2025	Payee name STAR Republican Women
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Amount (\$) 500.00	Payee address; PO Box 262, Kingsland TX 78639 <small>City; State; Zip Code</small> <small>Check if individual's residence address.</small>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Sponsorship/Contribution	Description Luncheon Sponsor
	<small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	

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: 6	2 FILER NAME Alan S. Trevino	3 Filer ID (Ethics Commission Filers)
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4 Date 11/21/2025	5 Payee name The Sign Shop
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6 Amount (\$) 5,223.28	7 Payee address; City; State; Zip Code 1844 West Highway 29, Burnet TX 78611 <small>Check if individual's residence address.</small>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising/Printing	(b) Description Campaign Signs
	(c) <small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/26/2025	Payee name Bertram Country Christmas
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Amount (\$) 250.00	Payee address; City; State; Zip Code PO Box 508. Bertram TX 78605 <small>Check if individual's residence address.</small>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description Donation
	<small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/26/2025	Payee name KBEY - Victory Media Marketing
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Amount (\$) 375.00	Payee address; City; State; Zip Code 6000 N. US Hwy. 281, Marble Falls TX 78654 <small>Check if individual's residence address.</small>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertisement	Description Toy Drive
	<small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	

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: 6	2 FILER NAME Alan S. Trevino	3 Filer ID (Ethics Commission Filers)
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4 Date 12/06/2025	5 Payee name S&J Productions, LLC
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6 Amount (\$) 212.50	7 Payee address; City; State; Zip Code 3608 CR 330, Burnet TX 78611 <small>Check if individual's residence address.</small>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Filming and Reel
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12/22/2025	Payee name Victory Media Marketing
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Amount (\$) 2,873.00	Payee address; City; State; Zip Code 6000 US 281 North, Suite B, Marble Falls TX 78654 <small>Check if individual's residence address.</small>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Option B - Election Ad Package
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code <small>Check if individual's residence address.</small>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

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