CANDIDAT CAMPAIGN	FORM C/OH COVER SHEET PG 1		
The C/OH Instruction	Guide explains how to complete this form.		2 Total pages filed: 20
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Christopher	MI	OFFICE USE ONLY  PECEIVED  Date Received
	NICKNAME LAST Robin	SÜFFIX	OCT <b>07</b> 2024
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; 5310 Anselmo Ave	ZIP CODE	Date Hand toll was a Company of the Hand toll was a Company of
Change of Address	Groves, TX 77619		Date Processed
			Date imaged
5 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST Lauren	MI	
	NICKNAME LAST Edgar	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUIT	E#; CITY; CrAOVES	STATE: ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION  (409)		
8 REPORT TYPE	January 15 X 30th day before election Runoff  July 15 Exceed reportin	ed modified g limit	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year 1 07/01/2024 THROUGH	Month Day 09/26/2024	Year
10 ELECTION	Month Day Year Primary F	CTION TYPE Runoff Special	Other
11 OFFICE		FICE SOUGHT (i roves City Marsh	•
	GO TO PAGE 2		

# CANDIDATE / OFFICEHOLDER REPORT:

## FORM C/OH COVER SHEET PG 2

SUPPORT	& TOTALS			2 of 20
13 C / OH NAME	Robin, Christopher		14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without d officeholders are required to report this information	the candidate's or officel	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS	<u> </u>	
	SPECIFIC			
	:	COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	-
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$ 36,840.33
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$ 150.15
	4. TOTAL POLITIC	CAL EXPENDITURES		\$ 32,623.62
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	CAL CONTRIBUTIONS MAINTAINED AS OF THE L	AST DAY OF THE	\$ 8,043,02
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS RTING PERIOD	OF THE LAST DAY	\$ 0,00
17 AFFIDAVIT		l swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
	CLARISBEL LOPEZ My Notary ID # 133384 Expires October 12, 20	782	andidate or Officehold	er
	TARY STAMP / SEAL AB cribed before me, by the s	Claretopher Polin	, this the	the day
Signature of office	2 (n cer authinistering	Printed name of officer administering	Debut Title of bifficer	4 Cley K administering oath

## **SUBTOTALS - C/OH**

# FORM C/OH COVER SHEET PG 3

					3 of 20	
18 FILER NAME Robin, Christopher  19 Filer ID						
20 SCHEDULE SUBTOTALS						
N.A	ME OF	SCHEDULE			SUBTOTAL AMOUNT	
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	34,230.00	
2.	×	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	2,610.33	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
4.		SCHEDULE E: LOANS		\$		
5.	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS				26,496,71	
6.	6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS					
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$		
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$		
9.	х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	6,126.91	
10	. 🗆	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$		
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$						
12	· 🗆	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$		
İ						

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A</b> 1.
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/3 Rpt: 5/20	
!	FILER NAME			3	Filer ID	
	Robin, Chris					
ļ	Date 09/25/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$100.00
		J Groves, TX 77619				
3	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
_	D-4-	Full name of contributor Out-of-state PAC (ID#:_	\	_	Amount of Contribution (\$)	
	Date 08/28/2024	Osteen, David			Autobile of Contribution (4)	\$5.00
	0012012024	41-45-411-01-0-10-10-10-10-10-10-10-10-10-10-10	***************************************			•
		Contributor address; City; State; Zip Code				
		Schertz, TX 78154				
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
		,				
_	Date	Full name of contributor   out-of-state PAC (ID#:_	)	Г	Amount of Contribution (\$)	
	08/28/2024	Osteen, David				\$5.00
		Contributor address; City; State; Zip Code	***************************************			
		Schertz, TX 78154				
	Dringing age	pation / Job title (See Instructions)	Employer (See Instructions	۲. ۲		
	Pitticipal occi	paron 7 sob title (see institutions)	Employer (occ mandonalis	•,		
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	09/20/2024	Phillips, Ronnie				\$200.00
		Contributor address; City; State; Zip Code	>=>>=>=================================			
				١		
		Groves, TX 77619		Ļ		
	Principal occi	rpation / Job title (See Instructions)	Employer (See Instructions	5)		
-	Date	Full name of contributor   out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)	
	08/28/2024	Robin, Randy		ļ	,	\$5,000.00
		Contributor address; City; State; Zip Code	<del>9</del> 99954104134504174543413122443416771154164166641179169164			
		, , , , , , , , , , , , , , , , , , , ,		l		
		Nederland, TX 77627				
	Principal occi	pation / Job title (See Instructions)	Employer (See Instructions	s)		
					· · · · · · · · · · · · · · · · · · ·	
_					Vorcion V// 1	I N 4045E16

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUI	E A1
	The Instru	he Instruction Guide explains how to complete this form.			Total pages Schedule A1: Sch: 1/3 Rpt: 4/20	
2	FILER NAME			3	Filer ID	
	Robin, Chris	obin, Christopher				
1	Date 09/20/2024	5 Full name of contributor out-of-state PAC (ID#: Akhtar, Jeff		7	Amount of Contribution (\$)	\$2,500.00
		6 Contributor address; City; State; Zip Code  † -				
		Orange, TX 77630				
}	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
_				_	1 (A)	
	Date	Full name of contributor Out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$200,00
	09/20/2024	Armentor, Sherry	***************************************			Ψ200,00
		Contributor address; City; State; Zip Code				
		·				
		Groves, TX 77619				
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	09/03/2024	Bailey, Candace				\$500.00
		Contributor address; City; State; Zip Code				
		Sour Lake, TX 77659				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>L</u>		
	1 Intolpal occi	pation, don the (ede mondation)		,		
-	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/19/2024	Crandall, Andv				\$100.00
		Contributor address; City; State; Zip Code	***************************************	ĺ		
				١		
				l		
		Groves, TX 77619		L		· · · · · · · · · · · · · · · · · · ·
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
_	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	08/28/2024	Edgar, Chad				\$100.00
		Contributor address; City; State; Zip Code	***************************************			
		_				
		O TV 77040				
_	Dringinal oper	Groves, TX 77619 pation / Job title (See Instructions)	Employer (See Instructions	<u>_</u>		<del></del>
	Principal occi	panon / oob me (oce moneonors)	Employer (See manacuons	-,		
_					<u>.</u>	
			,			
C	rms provided	by Texas Ethics Commission www.ethics.	state.tx.us		Version V4.3	1.0.48da51

MONET	ARY POLITICAL CONTRIBUT	IONS	SCHEDULE A1
The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule A1: Sch: 3/3 Rpt: 6/20
2 FILER NAME			3 Filer ID
Robin, Chris			
4 Date 08/29/2024	Full name of contributor	7 Amount of Cantribution (\$) \$25,000.0	
	6 Contributor address; City; State; Zip Code  Nederland, TX 77627		
8 Principal occ	pation / Job title (See Instructions)	9 Employer (See Instruction	ns)
Date	Full name of contributor  out-of-state PAC (ID	#:)	Amount of Contribution (\$)
08/09/2024	Savant, Stephen		\$500.
	Contributor address; City; State; Zip Code		
		•	
	Nederland, TX 77627		
Principal occ	upation / Job title (See Instructions)	Employer (See Instruction	ns)
Date	Full name of contributor Out-of-state PAC (ID	#:)	Amount of Contribution (\$)
08/28/2024	Smith, Tad		\$20.
	Contributor address; City; State; Zip Code		
	Nederland, TX 77627		
Principal occ	upation / Job title (See Instructions)	Employer (See Instruction	ns)
Page	Last Tayon Ethion Commission	nics.state.tx.us	Version V4.1.0.48da
roms provided	by Texas Ethics Commission www.eth	11C2.21G1E.1X.U2	version v4.1.0.40083

CONTRIBUTIONS	<u></u>	SCHEDULE A2			
The Instruction Guide explains how to complete this	orm. 1 Total pages Sc Sch: 1/4 Rpt:				
2 FILER NAME Robin, Christopher	3 Filer ID				
TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIB	utions \$				
5 Date 6 Full name of contributor out-of-state PAC (ID#: 08/24/2024 Edgar, Chad 7 Contributor address; City; State; Zip Code Groves, TX 77619		9 In-kind contribution description 170 Engraved aluminum campaign cards 1 1 1 1 1 outside of Texas, Complete Schedule T.			
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		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 (\$) \$150.00	In-kind contribution description 120 engraved aluminum campaign cards			
Groves, TX 77619  Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON-JUDICIAL) (See	outside of Texas, Complete Schedule T. 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)	contributor's spouse (if any) (FOR JUDICIAL)			
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date Full name of contributor out-of-state PAC (ID#:		In-kind contribution description Sign frames 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)					
Forms provided by Texas Ethics Commission www.ethic	s.state.tx.us	Version V4.1.0.48da51f7			

### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 2/4 Rpt: 8/20 3 Filer ID 2 FILER NAME Robin, Christopher \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Amount of In-kind contribution 6 Full name of contributor 5 Date out-of-state PAC (ID#: contribution (\$) description 09/09/2024 Robin, Teresa \$100.66 | Canopy Contributor address; City; State; Zip Code Nederland, TX 77627 Check if travel outside of Texas. Complete Schedule T. 11 Employer (FOR NON-JUDICIAL) (See instructions) 10 Principal occupation / Job title (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 In-kind contribution Date description contribution (\$) 09/09/2024 Robin, Teresa \$212.12 Table cloths Contributor address; City; State; Zip Code Nederland, TX 77627 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 job title (FOR JUDICIAL) Contributor's principal occupation (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) In-kind contribution Full name of contributor Amount of Date out-of-state PAC (ID#: contribution (\$) description 09/09/2024 Robin, Teresa \$556.09 I flag poles, flag banners, Contributor address; City; State; Zip Code flags, sun shades, table decor, tent rope, party idecor Nederland, TX 77627 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 job title (FOR JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) (See instructions) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 3/4 Rpt: 9/20 3 Filer ID 2 FILER NAME Robin, Christopher \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 9 In-kind contribution 8 Amount of 6 Full name of contributor out-of-state PAC (ID#: contribution (\$) description 09/14/2024 Robin, Teresa \$58,42 i TBL, curtain Contributor address; City; State; Zip Code Nederland, TX 77627 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) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 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) Amount of In-kind contribution Full name of contributor out-of-state PAC (ID#: contribution (\$) description 09/14/2024 Robin, Teresa \$556.53 Balloons, party decor, Contributor address; City; State; Zip Code American flags, name stickers, pins Nederland, TX 77627 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See Instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Amount of In-kind contribution Full name of contributor Date out-of-state PAC (ID#:\_ description contribution (\$); 09/15/2024 Robin, Teresa \$138,48 i TBL small flags Contributor address; City; State; Zip Code Nederland, TX 77627 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Version V4.1.0.48da51f Forms provided by Texas Ethics Commission www.ethics.state.tx.us

### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 4/4 Rpt: 10/20 3 Filer ID 2 FILER NAME Robin, Christopher TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$ In-kind contribution Amount of 6 Full name of contributor out-of-state PAC (ID#: description contribution (\$) 09/18/2024 Robin, Teresa \$69,221TBL umbrella Contributor address; City; State; Zip Code Nederland, TX 77627 Check if travel outside of Texas. Complete Schedule T. 11 Employer (FOR NON-JUDICIAL) (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Full name of contributor Date out-of-state PAC (ID#: description contribution (\$) 09/19/2024 Robin, Teresa \$492.251 Basket, chair pads, TBL Contributor address; City; State; Zip Code police dog items Nederland, TX 77627 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) 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) In-kind contribution Full name of contributor Date out-of-state PAC (ID#: Amount of contribution (\$) description 09/21/2024 Robin, Teresa \$14.06 ITBL stickers Contributor address; City; State; Zip Code Nederland, TX 77627 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Version V4,1.0,48da51f7 Forms provided by Texas Ethics Commission www.ethics.state.tx.us

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 1/6 Rpt: 11/20	2 FILER NAME Robin, Christopher	
4	Date 09/12/2024	5 Payee name Allure Group LLC	
6	Amount (\$) \$617.02	7 Payee address; City; State; Zip Code  Tyler, TX 75712	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check If travel outside of Texas. Complete Schedule T.  Check If Austin, TX, officeholder living expense  10x40' vinyl production & design. 39th Street double.	s
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH	
	Date 09/12/2024	Payee name Allure Group LLC	
	Amount (\$) \$94.29	Payee address; City; State; Zip Code	
		Tyler, TX 75712	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check If Austin, TX, officeholder living expense  Billboard display 11/05-11/08.  39th St. S double	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH	
	Date 08/29/2024	Payee name Allure Group LLC	
	Amount (\$) \$660.00	Payee address; City; State; Zip Code	
		Tyler, TX 75712	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check If travel outside of Texas. Complete Schedule T.  Check If Austin, TX, officeholder living expense  Billboard deposit. 39th St.	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH	

### SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wanes/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 2/6 Rpt: 12/20	Robin, Christopher
4	Date	5 Payee name
	08/29/2024	Allure Group LLC
6	Amount (\$) \$3,022.49	7 Payee address; City; State; Zip Code
		Tyler, TX 75712
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  3 Vinyl productions & design. 39th St.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Γ	Date	Payee name
	09/23/2024	Cloud Key Studios
	Amount (\$) \$600.00	Payee address; City; State; Zip Code
		Port Arthur, TX 77640
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  100 24x18 yard signs
<u> </u>	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	09/19/2024	Cloud Key Studios
	Amount (\$) \$812.80	Payee address; City; State; Zip Code e
L		Port Arthur, TX 77640
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Shirts & caps
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
		•

### SCHEDULE F1

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

Fees
Food/Beverage Expense
Glit/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarles/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 3/6 Rpt: 13/20 Robin, Christopher 4 Date Payee name 09/12/2024 Cloud Key Studios Payee address: Amount (\$) City: State; Zip Code \$3,371,26 Port Arthur, TX 77640 PURPOSE 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense EXPENDITURE Check if Austin, TX, officeholder living expense Banners, yard signs, t-shirts, buttons Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH Date Payee name 08/28/2024 Cloud Key Studios Amount (\$) Payee address; City; State; Zip Code \$4,040.00 Port Arthur, TX 77640 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Advertising Expense Check if travel outside of Texas, Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Yard signs & stakes Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/29/2024 JGI Outdoor Advertising Amount (\$) Payee address: City; State; Zip Code \$2,400.00 Katy, TX 77450 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Advertising Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense 73/25th Street Billboard Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

## SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Waces/Contract Lebor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salanes/wages/Contract La  The Instruction Guide explains how to complete this for	
1 Total pages Schedule F1:		3 Filer 1D
Sch: 4/6 Rpt: 14/20	Robin, Christopher	
4 Date	5 Payee name	
08/29/2024	JGI Outdoor Advertising	
6 Amount (\$)	7 Payee address; City; State; Zip Code	<del></del>
\$2,600.00	_ 2	
	Katy, TX 77450	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descripti	
OF EXPENDITURE	I Auvertisina Expense I 🗀	if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense
	·	ty/Hogaboom billboard.
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	PH .	
Date	Payee name	
08/29/2024	Lamar	<u> </u>
Amount (\$)	Payee address; City; State; Zip Code	
\$1,750.00		
	Beaumont, TX 77720	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descript	
OF EXPENDITURE	I Muyeriasi I La	if travel outside of Texas, Complete Schedule T,  If Austin, TX, officeholder living expense
	· · · · · · · · · · · · · · · · · · ·	ity/Hogaboom W/S billboard.
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	)H	
Date	Payee name	
08/14/2024	My Creative Shop, Inc.	
Amount (\$)	Payee address; City; State; Zip Code	
\$89.69		
	Fargo, ND 58104	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descript	
EXPENDITURE	Muvettising Expense   LL	If travel outside of Texas, Complete Schedule T. If Austin, TX, officeholder living expense
	6x4 car	
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	)H	

### SCHEDULE F1

Adventising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 5/6 Rpt: 15/20	Robin, Christopher
1	Date	5 Payee name
7	08/15/2024	My Creative Shop, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$89.69	<del></del>
		Fargo, ND 58104
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	LA LIBITORE	Check if Austin, TX, officeholder living expense  6x4 cards
		6X4 carus
9	Complete ONLY if direct expenditure to benefit C/Oi	Candidate/Officeholder name Office sought Office held
	axpananaro to bottom or o	
	Date	Payee name
	08/28/2024	My Creative Shop, Inc.
_	Amount (\$)	Payee address; City; State; Zip Code
	\$99.32	
	ţ	
		Fargo, ND 58104
-	PURPOSE	
	OF	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		4x4 signs
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
=	Date	Dougo namo
	09/13/2024	Payee name Outfront Media
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,250.00	-
		Fairfield, NJ 07004
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EVENDERING	Advertising Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Hwy 73 billboard
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>d</del>
Т		

### SCHEDULE F1

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Fees Food/Beverage Expense Gilt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarles/Wages/Contract Labor

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

Credit Card	Payment	Com	The Instruction Guid	de explains how to co	mple	lete this form.
1 Total page	s Schedule F1:	2 1		· .		3 Filer ID
	Rpt: 16/20		Robin, Christopher			
4 Date		5 1	Payee name			
09/13/202			Outfront Media			
6 Amount (\$	\$850,00°	-	Payee address; City;  — Fairfield, NJ 07004	State; Zip Co	ode	
8 PURPO OF EXPEND	:		Category (See Categories listed at the Advertising Expense	top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder Eving expense Hwy 73 billboard installation
9 Complete expenditur	ONLY if direct re to benefit C/O	C 1	andidate/Officeholder name	Office sou	ight	t Office held

### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Loan Repayment/Reimbursement Event Expense Advertising Expense Accounting/Banking Office Overhead/Rental Expense Polling Expense Food/Beverage Expense Glft/Awards/Memorials Expense Travel in District Consulting Expense Contributions/ Donations Made By Travel Out of District Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Credit Card Payment Legal Services The Instruction Guide explains how to complete this form. 3 Filer ID 2 FILER NAME 1 Total pages Schedule G: Robin, Christopher Sch: 1/4 Rpt: 17/20 Date Pavee name 07/27/2024 Allure Group LLC State: Zip Code 7 Payee address; City; 6 Amount (\$) \$1,905.00 Reimbursement from political contributions intended X Tyler, TX 75712 Check if travel outside of Texas. Complete Schedule T. (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Billboard vinyl production Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name Allure Group LLC 07/01/2024 Amount (\$) Payee address; City; State; Zip Code \$660.00 Reimbursement from political contributions intended Tyler, TX 75712 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Description Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Billboard deposit Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 08/01/2024 Allure Group LLC State; Zip Code Payee address; City; Amount (\$) \$1,981.20 Reimbursement from political contributions intended Ι×Ι Tyler, TX 75712 PURPOSE Description Check if travel outside of Texas, Complete Schedule T. Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Billboard Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit CIOH

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Event Expense Loan Repayment/Reimbursement Advertising Expense Transportation Equipment & Related Expense Travel in District Office Overhead/Rental Expense Accounting/Banking Fees Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District Contributions/ Donations Made By -OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID Total pages Schedule G: 2 FILER NAME Robin, Christopher Sch: 2/4 Rpt: 18/20 Date Payee name 07/01/2024 Allure Group LLC Payee address; State; Zip Code 6 Amount (\$) City; \$660.00 Reimbursement from Х political contributions intended Tyler, TX 75712 PURPOSE (b) Description Check if travel outside of Texas. Complete Schedule T. (a) Category (See Categories listed at the top of this schedule) ΩF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Billboard deposit Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit CIOH Date Payee name 07/22/2024 City of Groves Payee address; State; Zip Code Amount (\$) City; \$25.00 Reimbursement from political contributions intended X Groves, TX 77619 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Fees **EXPENDITURE** City Filing fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/08/2024 My Creative Shop, Inc. Amount (\$) Payee address; City; State; Zip Code \$19.95 Reimbursement from x political contributions intended Fargo, ND 58104 **PURPOSE** Description Check if travel outside of Texas, Complete Schedule T. Category (See Categories listed at the top of this schedule) OE Check if Austin, TX, officeholder living expense Fees **EXPENDITURE** Subscription fee Candidate/Officeholder name Office held Complete ONLY if direct Office sought

expenditure to benefit

CIOH

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G EXPENDITURE CATEGORIES FOR BOX 8(a) Solicitation/Fundralsing Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Advertising Expense Accounting/Banking Transportation Equipment & Related Expense Fees Food/Beverage Expense Polling Expense Travel in District Consulting Expense Contributions/ Donations Made By Travel Out of District Printing Expense Salaries/Wages/Contract Labor Git/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Credit Card Payment The Instruction Guide explains how to complete this form. Filer ID FILER NAME Total pages Schedule G: Robin, Christopher Sch: 3/4 Rpt: 19/20 4 Date Payee name 09/07/2024 My Creative Shop, Inc. State; Zip Code 7 Payee address; City; 6 Amount (\$) \$203,57 Reimbursement from potitical contributions intended X Fargo, ND 58104 Check it travel outside of Texas. Complete Schedule T. (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense OF Advertising Expense **EXPENDITURE** 2500 6x4 cards Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit CIOH Date Payee name U S Postal Service 08/07/2024 Amount (\$) Payee address; City; State; Zip Code \$85.00 Reimbursement from political contributions intended X Groves, TX 77619 Check if travel outside of Texas. Complete Schedule T. Description **PURPOSE** Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense OF Office Overhead/Rental Expense **EXPENDITURE** Post office box rental Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 07/20/2024 WIX.com LTD Payee address; State; Zip Code City; Amount (\$) \$467.64 Yunitsman 5 Reimbursement from political contributions intended X Tel Aviv Israel **PURPOSE** Description Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense **EXPENDITURE** Website Office held Office sought Candidate/Officeholder name Complete ONLY if direct expenditure to benefit CIOH

### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Advertising Expense Accounting/Banking Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Travel in District Travel Out of District Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME 3 Filer ID 1 Total pages Schedule G: Robin, Christopher Sch: 4/4 Rpt: 20/20 4 Date Payee name 08/07/2024 Wal Mart 7 Payee address; City; State; Zip Code 6 Amount (\$) \$119.55 Reimbursement from political contributions intended X Port Arthur, TX 77642 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense OF Office Overhead/Rental Expense EXPENDITURE Cell phone purchase Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.48da51f7