

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

| | | | |
|--|--|---|--|
| The C/OH Instruction Guide explains how to complete this form. | | 1 Filer ID | 2 Total pages filed: 19 |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR FIRST MI | OFFICE USE ONLY Date Received Waller Co. Elections JAN 15 2026 RECEIVED Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged | |
| | NICKNAME LAST SUFFIX | | |
| Justin Beckendorff | | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE | | |
| | 3506 Pitts Road Katy, TX 77493 | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST MI | | |
| | NICKNAME LAST SUFFIX | | |
| Mrs. Ashley N. Beckendorff | | | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3506 Pitts Road Katy TX 77493 | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION 979-877-9483 | | |
| 8 REPORT TYPE | <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR) | | |
| 9 PERIOD COVERED | Month Day Year Month Day Year 07/01/2025 THROUGH 12/31/2025 | | |
| 10 ELECTION | ELECTION DATE Month Day Year | ELECTION TYPE | |
| | 03/03/2026 | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special | |
| 11 OFFICE | OFFICE HELD (if any) County Commissioner Precinct 4 Waller | | 12 OFFICE SOUGHT (if known) Waller County Judge |

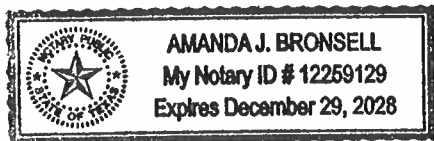
GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2
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| | | | |
|---|--|--------------------------|------------|
| 13 C / OH NAME Beckendorff, Justin | | 14 Filer ID | |
| 15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. | | |
| | COMMITTEE TYPE | COMMITTEE NAME | |
| | <input type="checkbox"/> GENERAL | COMMITTEE ADDRESS | |
| | <input type="checkbox"/> SPECIFIC | | |
| | COMMITTEE CAMPAIGN TREASURER NAME | | |
| COMMITTEE CAMPAIGN TREASURER ADDRESS | | | |
| 16 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 49,000.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 51,706.39 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 165,106.50 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 0.00 |

17 AFFIDAVIT



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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Justin Beckendorff, this the 14th day of January, 20 26, to certify which, witness my hand and seal of office.

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3
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| | |
|--------------------------------------|-------------|
| 18 FILER NAME Beckendorff, Justin | 19 Filer ID |
|--------------------------------------|-------------|

| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
|---|---|-----------------|
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 49,000.00 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 0.00 |
| 3. | <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ 0.00 |
| 4. | <input checked="" type="checkbox"/> SCHEDULE E: LOANS | \$ 0.00 |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 51,706.39 |
| 6. | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ 0.00 |
| 7. | <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ 0.00 |
| 8. | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ 0.00 |
| 9. | <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ 0.00 |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/7 Rpt: 4/20 |
| 2 FILER NAME Beckendorff, Justin | | 3 Filer ID |
| 4 Date 11/05/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AIA Engineers PAC | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code 15310 Park Row Houston, TX 77084 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 11/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barfield, Larry (Mr.) | Amount of Contribution (\$) \$625.00 |
| | Contributor address; City; State; Zip Code 10827 Painted Crescent Court Cypress, TX 77433 | |
| Principal occupation / Job title (See Instructions) COO | | Employer (See Instructions) DCCM |
| Date 12/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Basavaraju, Raj (Mr.) | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code 20918 Velvet Wing Drive Cypress, TX 77433 | |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Transcend Engineering |
| Date 11/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Binkley, James Brett (Mr.) | Amount of Contribution (\$) \$625.00 |
| | Contributor address; City; State; Zip Code 9209 Stagecoach Drive Houston, TX 77041 | |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) DCCM |
| Date 12/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cannon, Jeff (Mr.) | Amount of Contribution (\$) \$3,750.00 |
| | Contributor address; City; State; Zip Code 4315 Whickham Drive Fulshear, TX 77441 | |
| Principal occupation / Job title (See Instructions) VP | | Employer (See Instructions) LJA Engineering |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/7 Rpt: 5/20 |
| 2 FILER NAME Beckendorff, Justin | | 3 Filer ID |
| 4 Date 10/13/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobb Fendley PAC 6 Contributor address; City; State; Zip Code 4424 W. Sam Houston Pkwy., Suite 600 Houston, TX 77041 | 7 Amount of Contribution (\$) \$1,250.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 12/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dollins, J.R. (Mr.) Contributor address; City; State; Zip Code PO Box 900 Katy, TX 77492 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doty, Robert (Mr.) Contributor address; City; State; Zip Code 4416 Lone Street Bellaire, TX 77401 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Director | | Employer (See Instructions) WSB |
| Date 12/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EHRA Engineering PAC Contributor address; City; State; Zip Code 10011 Meadowglen Lane Houston, TX 77042 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EHRA Engineering PAC Contributor address; City; State; Zip Code 10011 Meadowglen Lane Houston, TX 77042 | Amount of Contribution (\$) \$1,500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/7 Rpt: 6/20 |
| 2 FILER NAME Beckendorff, Justin | | 3 Filer ID |
| 4 Date 11/06/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freese & Nichols PAC 6 Contributor address; City; State; Zip Code 4055 International Plaza, Suite 200 Fort Worth, TX 76109 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 10/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garg, Gaurav (Mr.) Contributor address; City; State; Zip Code 15915 Katy Freeway, Suite 260 Houston, TX 77041 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) Project Manager | | Employer (See Instructions) Cascade Civil Services |
| Date 11/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gehring, Mark (Mr.) Contributor address; City; State; Zip Code 5714 Ashley Spring Court Katy, TX 77494 | Amount of Contribution (\$) \$750.00 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) DCCM |
| Date 11/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HR Green Texas PAC Contributor address; City; State; Zip Code 11011 Richmond Avenue, Suite 200 Houston, TX 77042 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halff Associates State PAC Contributor address; City; State; Zip Code 2380 Performance Dr., Bldg C, Suite 150 Richardson, TX 75082 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/7 Rpt: 7/20 |
| 2 FILER NAME Beckendorff, Justin | | 3 Filer ID |
| 4 Date 11/03/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, David (Mr.) 6 Contributor address; City; State; Zip Code 12315 Woodthorpe Lane Houston, TX 77024 | 7 Amount of Contribution (\$) \$625.00 |
| 8 Principal occupation / Job title (See Instructions) VP | | 9 Employer (See Instructions) DCCM |
| Date 11/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haq, Syed S. (Mr.) Contributor address; City; State; Zip Code 3423 Coral Springs Drive Manvel, TX 77578 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Infratech |
| Date 10/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IDS Engineering Group PAC Contributor address; City; State; Zip Code 13430 Northwest Freeway, Suite 700 Houston, TX 77040 | Amount of Contribution (\$) \$1,500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IEA PAC Contributor address; City; State; Zip Code 6505 Mapleshade Lane Dallas, TX 75252 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/05/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubala, David (Mr.) Contributor address; City; State; Zip Code 1564 Beaconshire Road Houston, TX 77077 | Amount of Contribution (\$) \$750.00 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) DCCM |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/7 Rpt: 8/20 |
| 2 FILER NAME Beckendorff, Justin | | 3 Filer ID |
| 4 Date 11/04/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuykendall, Jr., Thomas (Mr.) 6 Contributor address; City; State; Zip Code 31718 Churchill Field Lane Fulshear, TX 77441 | 7 Amount of Contribution (\$) \$1,250.00 |
| 8 Principal occupation / Job title (See Instructions) VP | | 9 Employer (See Instructions) CivilCorp |
| Date 11/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laham, Youssef (Mr.) Contributor address; City; State; Zip Code 23230 Summers Creek Court Katy, TX 77494 | Amount of Contribution (\$) \$625.00 |
| Principal occupation / Job title (See Instructions) President | | Employer (See Instructions) DCCM |
| Date 11/17/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pape Dawson Engineers PAC Contributor address; City; State; Zip Code 2000 NW Loop 410 San Antonio, TX 78213 | Amount of Contribution (\$) \$2,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raba-Kistner PAC, Inc. Contributor address; City; State; Zip Code PO Box 690287 San Antonio, TX 78269 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rapolu, Vijaya K. (Mr.) Contributor address; City; State; Zip Code 27822 Acacia Glen Lane Katy, TX 77494 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) Project Manager | | Employer (See Instructions) Kavi Consulting |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/7 Rpt: 9/20 |
| 2 FILER NAME Beckendorff, Justin | | 3 Filer ID |
| 4 Date 10/07/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Responsible Government PAC | 7 Amount of Contribution (\$) \$1,500.00 |
| | 6 Contributor address; City; State; Zip Code 5005 Riverway, Suite 500 Houston, TX 77056 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 11/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salgado, Oliver (Mr.) | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code 3103 Lakes of Katy Lane Katy, TX 77493 | |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) B2Z Engineering |
| Date 11/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sunderwala, Jay (Mr.) | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code 16602 Arbor Oak Leaf Court Cypress, TX 77433 | |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Ninyo & Moore |
| Date 11/07/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TNP Political Action Committee | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code 5237 N. Riverside Drive, Suite 100 Fort Worth, TX 76137 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/07/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TNP Political Action Committee | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code 5237 N. Riverside Drive, Suite 100 Fort Worth, TX 76137 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/7 Rpt: 10/20 |
| 2 FILER NAME Beckendorff, Justin | | 3 Filer ID |
| 4 Date 10/16/2025 | 5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C000457853) TSVC, Inc. Political Action Committee (Terracon PAC) 6 Contributor address; City; State; Zip Code 10841 S. Ridgeway Road Kansas, TX 66061 | 7 Amount of Contribution (\$) \$1,500.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 11/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:) The Muller Group, PLLC Contributor address; City; State; Zip Code 202 Century Square Blvd. Sugar Land, TX 77478 | Amount of Contribution (\$) \$1,250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/24/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:) Westwood Political Action Committee (Texas) Contributor address; City; State; Zip Code PO Box 42307 Portland, OR 97242 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:) Whitney & Associates, DBA Contributor address; City; State; Zip Code 2040 N. Loop 336 W, Suite 305 Conroe, TX 77304 | Amount of Contribution (\$) \$1,250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

PLEDGED CONTRIBUTIONS

SCHEDULE B

| | | | |
|--|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule B: Sch: 1/1 Rpt: 11/20 | |
| 2 FILER NAME Beckendorff, Justin | | 3 Filer ID jbecken2026@yahoo.com | |
| 4 TOTAL OF UNITEMIZED PLEDGES | | \$ 0.00 | |
| 5 Date | 6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) | 8 Amount of pledge (\$) | 9 In-kind description (If applicable) |
| | 7 Pledgor Address; City; State; Zip Code | | |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| 10 Principal occupation / Job title (See Instructions) | | 11 Employer (See Instructions) | |

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
Sch: 1/1 Rpt: 12/20

2 FILER NAME
Beckendorff, Justin

3 Filer ID

4 TOTAL OF UNITEMIZED LOANS

\$ 0.00

5 Date of loan

7 Name of lender

☐ out-of-state PAC (ID#: _____)

9 Loan Amount (\$)

6 Is lender a
financial
institution?

8 Lender address; City; State; Zip Code

10 Interest Rate

11 Maturity Date

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

☐ None

15 Check if personal funds were deposited into political account
(See Instructions)

☐

16 GUARANTOR
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

☐ not applicable

18 Guarantor address; City; State; Zip Code

20 Principal occupation

21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
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: Sch: 1/8 Rpt: 13/20 | | 2 FILER NAME Beckendorff, Justin | | 3 Filer ID | |
| 4 Date 09/25/2025 | | 5 Payee name Graeme McDaniel Foundation | | | |
| 6 Amount (\$) \$1,000.00 | | 7 Payee address; City; State; Zip Code PO Box 1182 Katy, TX 77492 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Foundation. | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |
| Date 12/10/2025 | | Payee name Hempstead Knights of Columbus | | | |
| Amount (\$) \$100.00 | | Payee address; City; State; Zip Code 22892 Mack Washington Lane Hempstead, TX 77445 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Hempstead Knights of Columbus. | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |
| Date 12/12/2025 | | Payee name Katy Christian Magazine | | | |
| Amount (\$) \$800.00 | | Payee address; City; State; Zip Code 16350 Park Ten Place Houston, TX 77084 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Magazine Advertising. | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
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: Sch: 2/8 Rpt: 14/20 | | 2 FILER NAME Beckendorff, Justin | | 3 Filer ID | |
| 4 Date 07/01/2025 | | 5 Payee name Katy ISD FFA | | | |
| 6 Amount (\$) \$1,040.00 | | 7 Payee address; City; State; Zip Code 6331 Highway Blvd. Katy, TX 77494 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution for FFA Projects. | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 09/26/2025 | | Payee name Katy ISD FFA | | | |
| Amount (\$) \$250.00 | | Payee address; City; State; Zip Code 6331 Highway Blvd. Katy, TX 77494 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Catalog Advertising. | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 09/30/2025 | | Payee name Katy ISD FFA | | | |
| Amount (\$) \$50.00 | | Payee address; City; State; Zip Code 6331 Highway Blvd. Katy, TX 77494 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Catalog Advertising. | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
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: Sch: 3/8 Rpt: 15/20 | | 2 FILER NAME Beckendorff, Justin | | 3 Filer ID |
| 4 Date 10/26/2025 | | 5 Payee name Katy Masonic Lodge #1439 | | |
| 6 Amount (\$) \$100.00 | | 7 Payee address; City; State; Zip Code 3158 Katy Hockley Road Katy, TX 77493 | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation for Katy Masonic Lodge #1439. | | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |
| Date 10/29/2025 | | Payee name Katy Masonic Lodge #1439 | | |
| Amount (\$) \$100.00 | | Payee address; City; State; Zip Code 3158 Katy Hockley Road Katy, TX 77493 | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation for Katy Masonic Lodge #1439. | | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |
| Date 11/24/2025 | | Payee name Next Gen LLC | | |
| Amount (\$) \$8,800.00 | | Payee address; City; State; Zip Code 627 Royal Lakes Blvd Richmond, TX 77469 | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting. | | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
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: Sch: 4/8 Rpt: 16/20 | | 2 FILER NAME Beckendorff, Justin | | 3 Filer ID | |
| 4 Date 12/16/2025 | | 5 Payee name Oak Forest Foster Closet | | | |
| 6 Amount (\$) \$100.00 | | 7 Payee address; City; State; Zip Code 1216 Bethlehem Street Houston, TX 77018 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Oak Forest Foster Closet. | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 09/22/2025 | | Payee name Randall Beckendorff Memorial Scholarship | | | |
| Amount (\$) \$100.00 | | Payee address; City; State; Zip Code 3234 Katy Hockley Road Katy, TX 77493 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Scholarship Fund. | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 12/09/2025 | | Payee name Vu, Kaitlyn (Mrs.) | | | |
| Amount (\$) \$1,490.60 | | Payee address; City; State; Zip Code 18515 Amesbyry Manor Lane Houston, TX 77094 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Golf Fundraiser. | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
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: Sch: 5/8 Rpt: 17/20 | | 2 FILER NAME Beckendorff, Justin | | 3 Filer ID | |
| 4 Date 08/02/2025 | | 5 Payee name Waller County Crime Stoppers | | | |
| 6 Amount (\$) \$800.00 | | 7 Payee address; City; State; Zip Code 100 Sheriff R Glenn Smith Drive Hempstead, TX 77445 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Waller County Crime Stoppers. | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 11/07/2025 | | Payee name Waller County Crime Stoppers | | | |
| Amount (\$) \$335.00 | | Payee address; City; State; Zip Code 100 Sheriff R Glenn Smith Drive Hempstead, TX 77445 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Waller County Crime Stoppers. | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 09/18/2025 | | Payee name Waller County Fair | | | |
| Amount (\$) \$2,500.00 | | Payee address; City; State; Zip Code 22000 Fairgrounds Road Hempstead, TX 77445 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Waller County Fair. | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
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: Sch: 6/8 Rpt: 18/20 | 2 FILER NAME Beckendorff, Justin | 3 Filer ID |
| 4 Date 10/16/2025 | 5 Payee name Waller County Fair | |
| 6 Amount (\$) \$16,275.00 | 7 Payee address; City; State; Zip Code 22000 Fairgrounds Road Hempstead, TX 77445 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution for Fair Auction. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/30/2025 | Payee name Waller County Fair | |
| Amount (\$) \$4,800.00 | Payee address; City; State; Zip Code 22000 Fairgrounds Road Hempstead, TX 77445 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Waller County Fair. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/08/2025 | Payee name Waller County Republican Party | |
| Amount (\$) \$750.00 | Payee address; City; State; Zip Code PO Box 517 Hempstead, TX 77445 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee for Ballot. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
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: Sch: 7/8 Rpt: 19/20 | | 2 FILER NAME Beckendorff, Justin | | 3 Filer ID | |
| 4 Date 12/09/2025 | | 5 Payee name Watts, Anezra (Mrs.) | | | |
| 6 Amount (\$) \$1,790.46 | | 7 Payee address; City; State; Zip Code 22928 Kuykendahl Road, Suite B Spring, TX 77389 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Marketing Items for Golf Fundraiser. | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 09/29/2025 | | Payee name We Brand It Promotions | | | |
| Amount (\$) \$508.00 | | Payee address; City; State; Zip Code 1112 Austin Street Hempstead, TX 77445 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banners. | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 08/05/2025 | | Payee name Weston Lakes Country Club | | | |
| Amount (\$) \$250.00 | | Payee address; City; State; Zip Code 32611 FM 1093 Road Weston Lakes, TX 77441 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Venue for Golf Fundraiser. | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
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: Sch: 8/8 Rpt: 20/20 | 2 FILER NAME Beckendorff, Justin | 3 Filer ID |
| 4 Date 12/09/2025 | 5 Payee name Weston Lakes Country Club | |
| 6 Amount (\$) \$9,767.33 | 7 Payee address; City; State; Zip Code 32611 FM 1093 Road Weston Lakes, TX 77441 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Expense for Golf Fundraiser. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |