

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed: **18**

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR

Mr.

FIRST

Ted

MI

W

NICKNAME

Teddy

LAST

Reel

SUFFIX

II

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

2004 Creekview Dr.
Commerce, Tx 75428

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(903)

274-0802

6 CAMPAIGN TREASURER NAME

MS / MRS / MR

Mrs.

FIRST

Lorene

MI

Ann

NICKNAME

LAST

Reel

SUFFIX

7 CAMPAIGN TREASURER ADDRESS

(Residence or Business)

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

CITY;

2004 Creekview Dr.
Commerce, Tx 75428

8 CAMPAIGN TREASURER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(903)

453-4907

9 REPORT TYPE

January 15

30th day before election

Runoff

15th day after campaign treasurer appointment (Officeholder Only)

July 15

8th day before election

Exceeded Modified Reporting Limit

Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month

Day

Year

01 / 23 / 2026

THROUGH

Month

Day

Year

02 / 21 / 2026

11 ELECTION

ELECTION DATE

Month

Day

Year

03 / 03 / 2026

ELECTION TYPE

Primary

Runoff

Other Description

General

Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Hunt County Judge

14 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

GO TO PAGE 2

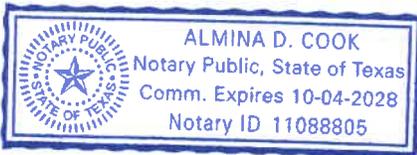
CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Ted W. Reel II		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)	\$95.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$5,174.05
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$0
	4. TOTAL POLITICAL EXPENDITURES	\$6,867.46
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$7,451.12
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.

Ted Reel
Signature of Candidate or Officeholder



Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Ted Reel this the 23rd day of February,

2024, to certify which, witness my hand and seal of office.

Almira Cook

Almira Cook

Clerk

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

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

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME <i>Ted W. Reel II</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,774.05
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 400.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ 0
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 6867.46
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

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: 5
2 FILER NAME Ted W. Reel II		3 Filer ID (Ethics Commission Filers)
4 Date 1/28/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Cook	7 Amount of contribution (\$) \$ 485.20
6 Contributor address; City; State; Zip Code 600 Angela Ln. Greenville, Tx 75402		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 1/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jason Cunningham	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code P.O. Box 507 Commerce, Tx 75429		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 1/29/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitch Madre	Amount of contribution (\$) \$ 193.90
Contributor address; City; State; Zip Code 1816 CR 4106 Greenville, Tx 75402		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 2/5/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jerry Pursell	Amount of contribution (\$) \$ 970.70
Contributor address; City; State; Zip Code 215 Palo Duro St. Scroggins, Tx 75480		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **5**

2 FILER NAME

Ted W. Reel II

3 Filer ID (Ethics Commission Filers)

4 Date

2/3/2026

5 Full name of contributor

Wyman Williams

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

7 Amount of contribution (\$)

\$300.00

6 Contributor address;

City;

State;

Zip Code

2806 Tanglewood Commerce, Tx 75428

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2/3/2026

Full name of contributor

Claire Reynolds

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

Amount of contribution (\$)

\$500.00

Contributor address;

City;

State;

Zip Code

2138 McKenzie Rd. Campbell, Tx 75422

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/6/2026

Full name of contributor

Robin Alexander

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

Amount of contribution (\$)

\$ 193.90

Contributor address;

City;

State;

Zip Code

2327 E. Beach Dr. Greenville, Tx 75402

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/9/2026

Full name of contributor

Carolyn Trezevant

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

Amount of contribution (\$)

\$ 193.90

Contributor address;

City;

State;

Zip Code

2510 Washington St. Commerce, Tx 75428

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5
2 FILER NAME Ted W. Reel II		3 Filer ID (Ethics Commission Filers)
4 Date 2/12/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharon Royal	7 Amount of contribution (\$) \$ 96.80
6 Contributor address; City; State; Zip Code 7001 Shady Lake Rd. Quinlan, Tx 75474		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 2/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glenda Henderson	Amount of contribution (\$) \$ 200.00
Contributor address; City; State; Zip Code 1310 Tiffany Ln. Commerce, Tx 75428		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 2/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard Latson	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code 6556 CR 4704 Commerce, Tx 75428		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 2/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greg Hooten	Amount of contribution (\$) \$ 150.00
Contributor address; City; State; Zip Code 5124 CR 4400 Commerce, Tx 75428		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **5**

2 FILER NAME

Ted W. Reel II

3 Filer ID (Ethics Commission Filers)

4 Date

2/13/2026

5 Full name of contributor

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

Robert Draughn

7 Amount of contribution (\$)

\$250.00

6 Contributor address;

City;

State;

Zip Code

2210 Charity Rd. Commerce Tx 75428

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2/5/2026

Full name of contributor

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

Richard Selvaggi

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

3376 CR 4403 Commerce Tx 75428

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/9/2026

Full name of contributor

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

Angie Money

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

1009 CR 1031 Greenville Tx 75401

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/18/2026

Full name of contributor

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

Brent Billingslea

Amount of contribution (\$)

\$ 96.80

Contributor address;

City;

State;

Zip Code

5894 Deer Crossing Ln. Quinlan, Tx 75474

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **5**

2 FILER NAME
Ted W. Reel II

3 Filer ID (Ethics Commission Filers)

4 Date
2/19/2026

5 Full name of contributor out-of-state PAC (ID#: _____)
Jimmy Clark

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
160 Park St. Commerce, Tx 75428

\$ 47.85

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
2/20/2026

Full name of contributor out-of-state PAC (ID#: _____)
Jim Bob Grove

Amount of contribution (\$)

Contributor address; City; State; Zip Code
7412 FM 71 Commerce, Tx 75428

\$ 200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

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: 1	
2 FILER NAME Ted W. Reel II		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0	
5 Date 2/15/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jerry Ramson	8 Amount of Contribution \$ \$400.00	9 In-kind contribution description Get Out to Vote Rally Event
7 Contributor address; City; State; Zip Code P.O. Box 8703 Greenville, Tx 75404		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
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: 9 8	2 FILER NAME Ted W. Reel II	3 Filer ID (Ethics Commission Filers)
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4 Date 1/23/2026	5 Payee name QT - Greenville
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6 Amount (\$) \$36.05	7 Payee address; City; State; Zip Code 1400 Joe Ramsey Blvd. N Greenville, TX 75402
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel in the County	(b) Description Gas
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/26/2026	Payee name Amazon Marketplace
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Amount (\$) \$201.01	Payee address; City; State; Zip Code Online order
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Give aways for Meet & Greets and Campaigning
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/26/2026	Payee name Amazon Marketplace
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Amount (\$) \$180.70	Payee address; City; State; Zip Code Online Order
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Give aways for Meet & Greets and Campaigning
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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: 9 8	2 FILER NAME Ted W. Reel II	3 Filer ID (Ethics Commission Filers)
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4 Date 1/28/2026	5 Payee name Citi Card
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6 Amount (\$) \$1310.41	7 Payee address; P.O. Box 658202 Dallas, Tx 75265-8202
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description unpaid incurred obligations
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/29/2026	Payee name City Mart
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Amount (\$) \$22.93	Payee address; 1410 Live Oak St. Commerce, Tx 75428
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel in the County	Description Gas
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense.	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/29/2026	Payee name Landon Winery
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Amount (\$) \$79.75	Payee address; 2508 Lee St. Greenville, Tx 75401
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food & Beverage Expense	Description For Meets & Greet Event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense.	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 9 8	2 FILER NAME Ted W. Reel II	3 Filer ID (Ethics Commission Filers)
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4 Date 1/29/2026	5 Payee name Amazon Marketplace
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6 Amount (\$) \$86.60	7 Payee address; Online Order	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description "Give aways" for Meet & Greets and campaigning
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/30/2026	Payee name American National Bank of Texas
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Amount (\$) \$2.95	Payee address; 5809 Wesley St. Greenville, Tx 75402	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Campaign Account fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/20/2026	Payee name WalMart
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Amount (\$) \$42.09	Payee address; 2701 Hwy 50 Commerce, Tx 75428	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description "Give aways" for Meets & Greets and campaigning
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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: 9 8	2 FILER NAME Ted W. Reel II	3 Filer ID (Ethics Commission Filers)
4 Date 2/2/2026	5 Payee name Mariachi Mexican	
6 Amount (\$) \$ 111.26	7 Payee address; City; State; Zip Code 5403 Wesley St. Greenville, Tx 75402	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food & Beverage Expense	(b) Description Campaign planning meeting
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 2/2/2026	Payee name Walmart	
Amount (\$) \$ 84.96	Payee address; City; State; Zip Code 2701 Hwy 50 Commerce, Tx 75428	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food & Beverage Expense	Description For Meet & Greet Event
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 2/3/2026	Payee name Brookshires - Gas	
Amount (\$) \$ 32.13	Payee address; City; State; Zip Code 1603 Culver St. Commerce, Tx 75428	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel in the County	Description Gas
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 98	2 FILER NAME Ted W. Reel II	3 Filer ID (Ethics Commission Filers)
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4 Date 2/4/2026	5 Payee name Walmart
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6 Amount (\$) \$46.50	7 Payee address; 2701 Hwy 50 Commerce, Tx 75428	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food & Beverage Expense	(b) Description For Meet & Greet Event
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/4/2026	Payee name Personalized Printing
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Amount (\$) \$559.65	Payee address; 1300 Bonham St. Commerce, Tx 75428	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Campaign T-shirts
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/4/2026	Payee name Walmart
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Amount (\$) \$98.64	Payee address; 2701 Hwy 50 Commerce, Tx 75428	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food & Beverage Expense	Description For Meet & Greet Event
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: 9 B	2 FILER NAME Ted W. Reel II	3 Filer ID (Ethics Commission Filers)
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4 Date 2/5/2026	5 Payee name Brookshires
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6 Amount (\$) \$ 18.17	7 Payee address; City; State; Zip Code 1603 Culver St. Commerce, TX 75428
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food & Beverage Expense	(b) Description Meets & Greet Event
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/9/2026	Payee name Latsons.Com
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Amount (\$) \$ 1,361.26	Payee address; City; State; Zip Code 1105 Main St. Commerce, Tx 75428
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Mailer cards
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/9/2026	Payee name Brookshires - Gas
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Amount (\$) \$ 27.41	Payee address; City; State; Zip Code 1603 Culver St. Commerce, Tx 75428
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel in the County	Description Gas
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: 9 8	2 FILER NAME Ted W. Reel II	3 Filer ID (Ethics Commission Filers)
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4 Date 2/9/2026	5 Payee name Walmart
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6 Amount (\$) \$ 59.57	7 Payee address; 2701 Hwy 50. Commerce, Tx 75428
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food & Beverage	(b) Description Meet & Greet Event
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/11/2026	Payee name City Mart
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Amount (\$) \$ 35.78	Payee address; 1410 Live Oak St. Commerce, Tx 75428
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel in the County	Description Gas
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/12/2026	Payee name Facebook
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Amount (\$) \$ 99.91	Payee address; Falls Drive Wilmington, DE
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Ad Push
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 9 8	2 FILER NAME Ted W. Reel II	3 Filer ID (Ethics Commission Filers)
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4 Date 2/17/2026	5 Payee name Latsons.com
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6 Amount (\$) \$ 1361.26	7 Payee address; 1105 Main St. Commerce, Tx 75428	City; Commerce	State; Tx	Zip Code 75428
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising/Printing Expense	(b) Description 2nd Mailer cards
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/17/2026	Payee name Mariachi Mexican
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Amount (\$) \$ 162.31	Payee address; 5403 Wesley St. Greenville, Tx 75402	City; Greenville	State; Tx	Zip Code 75402
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food & Beverage Expense	Description Campaign planning meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/17/2026	Payee name Brookshires - Gas
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Amount (\$) \$ 33.78	Payee address; 1603 Culver St. Commerce, Tx 75428	City; Commerce	State; Tx	Zip Code 75428
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel in the County	Description Gas
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 9	2 FILER NAME Ted W. Reel II	3 Filer ID (Ethics Commission Filers)
4 Date 2/19/2026	5 Payee name Merit Baptist Church	
6 Amount (\$) \$150.00	7 Payee address; City; State; Zip Code 2576 Lake Ave. Farmersville, Tx 75442	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Rental of gym
	(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
Date 2/20/2026	Payee name Daniel Starks	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 2613 Washington St. Commerce, Tx 75428	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expenses	Description maintain campaign website & Facebook pages
	<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
Date 2/20/2026	Payee name Personalized Printing	
Amount (\$) \$162.38	Payee address; City; State; Zip Code 1300 Bonham St. Commerce, Tx 75428	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising/Printing Expense	Description Yard Signs
	<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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