

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:

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS (MR)

FIRST

MI

NICKNAME

LAST

SUFFIX

Bradley
Tegeles

S

OFFICE USE ONLY

Date Received

1/15/2026

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

PO Box 1052

Brenham

TX 77834

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(832) 715 2455

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Robert
Stork

Jr

Date Hand-delivered or Date Postmarked

1/15/2026

Receipt #

Amount \$

Date Processed

1/15/2026

Date Imaged

1/15/2026

7 CAMPAIGN
TREASURER
ADDRESS

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

CITY;

STATE;

ZIP CODE

708 E Tam Green St Brenham TX 77837

(Residence or Business)

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(979) 203 5636

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

Month

Day

Year

10 / 28 / 2025

THROUGH

12 / 31 / 25

11 ELECTION

ELECTION DATE

Month

Day

Year

03 / 03 / 26

ELECTION TYPE

☒ Primary

☐ Runoff

☐ Other
Description

☐ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

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

Brad Tegeler Campaign

16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION
TOTALS

1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR
CONTRIBUTIONS MADE ELECTRONICALLY)

\$

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 11,550.00

EXPENDITURE
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$

0

4. TOTAL POLITICAL EXPENDITURES

\$ 10,931.42

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

\$ 45,618.58

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

18 SIGNATURE

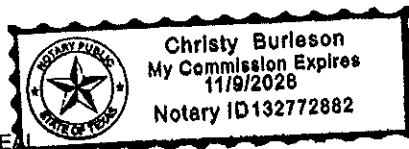
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Brad Tegeler

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Brad Tegeler this the 15 day of January

20 26 to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

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

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

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

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

Bred Tegeter

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

| | | | |
|-----|-------------------------------------|--|--------------|
| 1. | <input checked="" type="checkbox"/> | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 11,550 |
| 2. | <input type="checkbox"/> | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ |
| 3. | <input type="checkbox"/> | SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input checked="" type="checkbox"/> | SCHEDULE E: LOANS | \$ 45,000 |
| 5. | <input checked="" type="checkbox"/> | SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ 10,931.42 |
| 6. | <input type="checkbox"/> | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 7. | <input type="checkbox"/> | SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS | \$ |
| 8. | <input checked="" type="checkbox"/> | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ 9,884.42 |
| 9. | <input type="checkbox"/> | SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS | \$ |
| 10. | <input type="checkbox"/> | SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. | <input type="checkbox"/> | SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. | <input type="checkbox"/> | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 16 |
| 2 FILER NAME Bred Tegeler | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/05/25 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Cathy DeWitt 6 Contributor address; City; State; Zip Code 11215 Tatemwood Dr. Austin TX 78750 | 7 Amount of contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) Regional Manager | | 9 Employer (See Instructions) General Motors |
| Date 12/05/25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Robert Flanagan Contributor address; City; State; Zip Code 1347 Lamonte Ln Houston TX 77018 | Amount of contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Self Employed | | Employer (See Instructions) Self |
| Date 12-29-25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Julie Tegeler Contributor address; City; State; Zip Code 3550 FM 109 Brecken TX 77837 | Amount of contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 12-30-25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Peggy Kramer Contributor address; City; State; Zip Code 7926 FM 2621 Brecken TX 77837 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) County Treasurer | | Employer (See Instructions) Washington County |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 16 |
| 2 FILER NAME Broad Tegeler | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/31/25 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paule Betts | 7 Amount of contribution (\$) \$100.~ |
| 6 Contributor address; City; State; Zip Code PO Box 1028 Brenham TX 77834 | | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 12/31/25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Lucas | Amount of contribution (\$) \$500.~ |
| Contributor address; City; State; Zip Code 2023 Sandy Point Rd Harker Heights TX 76548 | | |
| Principal occupation / Job title (See Instructions) Consulting | | Employer (See Instructions) Self |
| Date 12/31/25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheron Guelker | Amount of contribution (\$) \$250.~ |
| Contributor address; City; State; Zip Code 1507 S Jackson Brenham TX 77833 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 12/31/25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cherie McMichael | Amount of contribution (\$) \$100.~ |
| Contributor address; City; State; Zip Code 2459 Shannon PI SE Washington DC 20020 | | |
| Principal occupation / Job title (See Instructions) Nonprofit | | Employer (See Instructions) JFNA |
| | | |
| <p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 16 |
| 2 FILER NAME Bred Tegeler Campaign | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/31/25 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: David Iglesias 6 Contributor address; City; State; Zip Code 3618 Jill Cir Tyler TX 75701 | 7 Amount of contribution (\$) \$500⁰⁰ |
| 8 Principal occupation / Job title (See Instructions) Lawyer | | 9 Employer (See Instructions) Iglesias, PLLC |
| Date 12/31/25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Cary Choate Contributor address; City; State; Zip Code 2705 Alderwood Dr Austin TX 78745 | Amount of contribution (\$) \$25⁰⁰ |
| Principal occupation / Job title (See Instructions) Project Manager | | Employer (See Instructions) City of Austin |
| Date 12/31/25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Lucinda Sexon Contributor address; City; State; Zip Code 19424 See Island Dr Pflugerville TX 78660 | Amount of contribution (\$) \$100⁰⁰ |
| Principal occupation / Job title (See Instructions) Govt Relations | | Employer (See Instructions) Self |
| Date 12/31/25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Carol Hutchens Contributor address; City; State; Zip Code 2426 Airlin Dr Brenhan TX 77833 | Amount of contribution (\$) \$50⁰⁰ |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| | | |
| <p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| 2 FILER NAME Broed Teger | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/31/25 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Lindsey Fricke 6 Contributor address; City; State; Zip Code 1606 Morgan St Brenham TX 77833 | 7 Amount of contribution (\$) \$10.00 |
| 8 Principal occupation / Job title (See Instructions) Subrogation Specialist | | 9 Employer (See Instructions) Germania Insurance |
| Date 12/31/25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: John Stavinoch Contributor address; City; State; Zip Code 3707 Tanglewood Rd Houston TX 77005 | Amount of contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Bricewell LLP |
| Date 12/31/25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Shauna Ciperlitz Contributor address; City; State; Zip Code 2550 Selma Ln Brenham TX 77833 | Amount of contribution (\$) \$45.00 |
| Principal occupation / Job title (See Instructions) Training + Development Specialist | | Employer (See Instructions) TXDPS |
| Date 12/31/25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Harold Stone Contributor address; City; State; Zip Code 2205 Gila Pass Austin TX 78734 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) COS | | Employer (See Instructions) Texas Senate |
| <p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 16 |
| 2 FILER NAME Brod Teger | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/31/25 | 5 Full name of contributor Cheri Tanner <input type="checkbox"/> out-of-state PAC (ID#: _____) | 7 Amount of contribution (\$) \$100.00 |
| 6 Contributor address; City; State; Zip Code 903 E. Alamo St Brenham TX 77833 | | |
| 8 Principal occupation / Job title (See Instructions) Self | | 9 Employer (See Instructions) Brenham Charenterie |
| Date 12/31/25 | Full name of contributor Dencie Durham <input type="checkbox"/> out-of-state PAC (ID#: _____) | Amount of contribution (\$) \$250.00 |
| Contributor address; City; State; Zip Code 1534 Cortland St, Houston TX 77008 | | |
| Principal occupation / Job title (See Instructions) COO | | Employer (See Instructions) HTX Labs |
| Date 12/31/25 | Full name of contributor Addie Brazier <input type="checkbox"/> out-of-state PAC (ID#: _____) | Amount of contribution (\$) \$250.00 |
| Contributor address; City; State; Zip Code 7931 Wooded Way Dr. Spring TX 77389 | | |
| Principal occupation / Job title (See Instructions) HR | | Employer (See Instructions) Aramco Americas |
| Date 12/31/25 | Full name of contributor Amanda Stolz <input type="checkbox"/> out-of-state PAC (ID#: _____) | Amount of contribution (\$) \$250.00 |
| Contributor address; City; State; Zip Code 15701 FM 1155E, Washington TX 77880 | | |
| Principal occupation / Job title (See Instructions) CPA | | Employer (See Instructions) Seidel Schroeder |
| <p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| 2 FILER NAME Brad Tegeler | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/31/25 | 5 Full name of contributor Rance Poinsett <input type="checkbox"/> out-of-state PAC (ID#: _____) | 7 Amount of contribution (\$) \$250.00 |
| 6 Contributor address; City; State; Zip Code 1122 Colorado St, Suite 100, Austin, TX 78701 | | |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) Poinsett PLLC |
| Date 12/30/25 | Full name of contributor Tom Millikin <input type="checkbox"/> out-of-state PAC (ID#: _____) | Amount of contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code 821 W Brainerd Dr Brenham TX 77833 | | |
| Principal occupation / Job title (See Instructions) Director of IT | | Employer (See Instructions) Independence Contract Drilling |
| Date 12/30/25 | Full name of contributor Susan Cates <input type="checkbox"/> out-of-state PAC (ID#: _____) | Amount of contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code 3317 Tamy Ln. Brenham TX 77833 | | |
| Principal occupation / Job title (See Instructions) Demographer | | Employer (See Instructions) Population & Survey Analysis |
| Date 12/30/25 | Full name of contributor Den Seeker Emerson <input type="checkbox"/> out-of-state PAC (ID#: _____) | Amount of contribution (\$) \$250.00 |
| Contributor address; City; State; Zip Code 10558 W 168th Ter. Overland Park, KS 66221 | | |
| Principal occupation / Job title (See Instructions) SVP Consumer Strategy | | Employer (See Instructions) Green Dot Corp. |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 16 |
| 2 FILER NAME Brod Tegele | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/30/25 | 5 Full name of contributor Tara Steele <input type="checkbox"/> out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code 1527 Pecan Glen Rd Brenham TX 77833 | 7 Amount of contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) Self employed | | 9 Employer (See Instructions) Self Employed |
| Date 12/30/25 | Full name of contributor Dora Ann Busteenik <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code PO Box 449 Pattison TX 77466 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Rancher | | Employer (See Instructions) Self |
| Date 12/30/25 | Full name of contributor Lara Wendler <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 2314 East 11th St. Austin TX 78702 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) Retired |
| Date 12/30/25 | Full name of contributor Kenn Cruser <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 5411 Fairmont Circle Austin TX 78745 | Amount of contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) State of Texas |
| <p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 16 |
| 2 FILER NAME Bred Tegele | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/30/25 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandi Conway 6 Contributor address; City; State; Zip Code 1008 Spencer St. Brenham TX 77833 | 7 Amount of contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) retired |
| Date 12/30/25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheri Huddleston Contributor address; City; State; Zip Code 101 Quarry Park Cv, Liberty Hill TX 78642 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) legislative consultant | | Employer (See Instructions) Hance Scarborough, LLP |
| Date 12/30/25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrie Little Contributor address; City; State; Zip Code 4580 Vogler Ln Brenham TX 77833 | Amount of contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Accounting | | Employer (See Instructions) MR Unlimited LLC |
| Date 12/30/25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J.C. Morris Contributor address; City; State; Zip Code PO Box 293392 Kenville TX 78029 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Self |
| | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements. | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| | | |
|---|---|--|
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| 2 FILER NAME Bred Tegele | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/30/25 | 5 Full name of contributor Johanna Fatheree <input type="checkbox"/> out-of-state PAC (ID#: 6 Contributor address; 700 Ross St Brenham TX 77833 City; State; Zip Code | 7 Amount of contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) Realtor | | 9 Employer (See Instructions) Self |
| Date 12/30/25 | Full name of contributor Natearah Anstin <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; 1470 Allen Rd Brenham TX 77833 City; State; Zip Code | Amount of contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Director, Business Process Improvement | | Employer (See Instructions) |
| Date 12/30/25 | Full name of contributor Linda Pitts <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; 801 S Anstin St Brenham TX 77833 City; State; Zip Code | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Sales | | Employer (See Instructions) K+M |
| Date 12/30/25 | Full name of contributor Casey Haney <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; 1122 Colorado St, APT 1207, Austin, TX 78701 City; State; Zip Code | Amount of contribution (\$) \$1500.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Self Employed |

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| | | |
|--|---|---|
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| 2 FILER NAME Bred Tegeler | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/30/25 | 5 Full name of contributor Harper Lange 6 Contributor address; City; State; Zip Code 3335 Desirable Cir Brenham, TX 77833 | 7 Amount of contribution (\$) \$250.00 |
| 8 Principal occupation / Job title (See Instructions) IT | | 9 Employer (See Instructions) Computer Helpers |
| Date 12/30/25 | Full name of contributor Jolie Weidemann Contributor address; City; State; Zip Code 2916 Twisted Oak Dr, Brenham TX 77833 | Amount of contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Homemaker | | Employer (See Instructions) Homemaker |
| Date 12/30/25 | Full name of contributor Lornie Tegeler Contributor address; City; State; Zip Code 5400 Wonder Hill Rd, Chaparral TX 77426 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 12/30/25 | Full name of contributor Juliana Warek Contributor address; City; State; Zip Code 2407 Ryan St Brenham TX 77833 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Teacher | | Employer (See Instructions) Bryan ISD |

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| | | |
|--|--|---|
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| 2 FILER NAME Bred Tegele | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/30/25 | 5 Full name of contributor Chris Brein <input type="checkbox"/> out-of-state PAC (ID#: 6 Contributor address; City; State; Zip Code 4603 Pleasant Hill School Rd Brenham TX 77833 | 7 Amount of contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) Vice President | | 9 Employer (See Instructions) Mike Hopkins Dist |
| Date 12/30/25 | Full name of contributor Chris Wackman <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code Le Villerooy Way Spring TX 77382 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Tractor Sales | | Employer (See Instructions) Netractor |
| Date 12/30/25 | Full name of contributor Cornelia M. Wilder <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code 409 W. Alamo St Brenham TX 77833 | Amount of contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 12/29/25 | Full name of contributor Dale Simpson <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code 505 E. Alamo St. Brenham TX 77833 | Amount of contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Architect | | Employer (See Instructions) Terrlab Landscape Architects |
| <p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 16 |
| 2 FILER NAME Brad Teseler | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/29/25 | 5 Full name of contributor Anthony Jasinski 6 Contributor address; City; State; Zip Code 5900 Scander Rd Brenham TX 77833 | 7 Amount of contribution (\$) \$250.00 |
| 8 Principal occupation / Job title (See Instructions) Sales | | 9 Employer (See Instructions) Mattrezzz Guyt |
| Date 12/29/25 | Full name of contributor Heather Thielemann Contributor address; City; State; Zip Code 1410 Allison St Brenham TX 77833 | Amount of contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Sr. VP | | Employer (See Instructions) SHSL |
| Date 12/29/25 | Full name of contributor Phillip Van Dorn Contributor address; City; State; Zip Code 507 Walnut Hill Dr. Brenham TX 77833 | Amount of contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Insurance | | Employer (See Instructions) Germanie |
| Date 12/29/25 | Full name of contributor Ronnie Heidemann Contributor address; City; State; Zip Code 7355 Hall Rd. Brenham TX 77833 | Amount of contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| <p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 16 |
| 2 FILER NAME Bred Tegele | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/29/25 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jerry Merten | 7 Amount of contribution (\$) \$25.00 |
| 6 Contributor address; City; State; Zip Code 5063 Roadrunner Ln Brenham TX 77833 | | |
| 8 Principal occupation / Job title (See Instructions) Sales | | 9 Employer (See Instructions) LaRoche |
| Date 12/29/25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rebecca Merten | Amount of contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code 1700 Key St Brenham TX 77833 | | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 12/29/25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronnie Neutzler | Amount of contribution (\$) \$250.00 |
| Contributor address; City; State; Zip Code 1650 FM 109 Brenham TX 77833 | | |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) K&M grocery |
| Date 12/29/25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell Neinast | Amount of contribution (\$) \$500.00 |
| Contributor address; City; State; Zip Code 5026 Rehburg Rd Burton TX 77835 | | |
| Principal occupation / Job title (See Instructions) Landman | | Employer (See Instructions) RMN Oil & Gas LLC |
| | | |
| <p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 16 |
| 2 FILER NAME Bred Togelev | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/29/25 | 5 Full name of contributor Alli Stark <input type="checkbox"/> out-of-state PAC (ID#: 6 Contributor address; City; State; Zip Code 708 E Tom Green St Brenham TX 77833 | 7 Amount of contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) Owner | | 9 Employer (See Instructions) Alli Stark Art |
| Date 12/29/25 | Full name of contributor Roy Thibodeaux <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code 804 Bilske Ln Brenham TX 77833 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Project Manager | | Employer (See Instructions) Partners in Building |
| Date 12/29/25 | Full name of contributor Tom Newman <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code 4670 Old Chappell Hill Rd Brenham TX 77833 | Amount of contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Energy | | Employer (See Instructions) Verdon |
| Date 12/29/25 | Full name of contributor Leah Cook <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code 308 Woodside Dr Brenham TX 77833 | Amount of contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Self | | Employer (See Instructions) LTS BBQ |

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: 16 |
| 2 FILER NAME Bred Tegeler | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/16/25 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Mary Anne Mahoney Pena 6 Contributor address; City; State; Zip Code 2404 Cheril Ln Brenham TX 77833 | 7 Amount of contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) retired |
| Date 12/16/25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Kenneth McCallough Contributor address; City; State; Zip Code 345 Stone Hill Dr Brenham TX 77833 APT 3 | Amount of contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 12/16/25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Leigh Linden Contributor address; City; State; Zip Code 2711 East Cheril Ln Brenham TX 77833 | Amount of contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Main Street Manager | | Employer (See Instructions) City of Brenham |
| Date 12/11/25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Johanna Gessner Contributor address; City; State; Zip Code 1018 Sanctuary Ct College Station TX 77840 | Amount of contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) Gessner Engineering |
| | | |
| 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: 16 |
| 2 FILER NAME Bred Tegeler Campaign | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12-17-25 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Mary Thornhill 6 Contributor address; City; State; Zip Code 311 E Main Brenham TX 77831 | 7 Amount of contribution (\$) 1502 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 11/10/25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Dan Bunker Contributor address; City; State; Zip Code 105 W Alamo Brenham TX 77833 | Amount of contribution (\$) \$500⁰⁰/1- |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) The Bunker Law Firm |
| Date 11-19-25 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Mary H. Giles Contributor address; City; State; Zip Code 30642 Indigo Falls Fulshear TX 77423 | Amount of contribution (\$) \$500⁰⁰ |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code | Amount of contribution (\$) |
| 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.

LOANS**SCHEDULE E**

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 E: <div style="text-align: center;">1</div> | |
| 2 FILER NAME <div style="font-size: 1.2em; font-family: cursive;">Brad Tegeler Campaign</div> | | | | 3 Filer ID (Ethics Commission Filers) | |
| 4 TOTAL OF UNITEMIZED LOANS | | | | \$ 45,000 | |
| 5 Date of loan 10-31-25 | | 7 Name of lender Brad Tegeler | | 9 Loan Amount (\$) \$45,000.00 | |
| 6 Is lender a financial institution? Y <input checked="" type="radio"/> N | | 8 Lender address; City; State; Zip Code 135 W Alamo Brenham TX 77837 | | 10 Interest rate 0% | |
| | | | | 11 Maturity date 12-31-30 | |
| 12 Principal occupation / Job title (See Instructions) Attorney | | | 13 Employer (See Instructions) Tegeler Chevrolet | | |
| 14 Description of Collateral <input checked="" type="checkbox"/> none | | | 15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions) | | |
| 16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable | | 17 Name of guarantor 18 Guarantor address; City; State; Zip Code | | 19 Amount Guaranteed (\$) | |
| 20 Principal Occupation (See Instructions) | | | 21 Employer (See Instructions) | | |

| | | | | | |
|--|--|---|---|------------------------|--|
| Date of loan | | Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) | | Loan Amount (\$) | |
| Is lender a financial institution? Y N | | Lender address; City; State; Zip Code | | Interest rate | |
| | | | | Maturity date | |
| Principal occupation / Job title (See Instructions) | | | Employer (See Instructions) | | |
| Description of Collateral <input type="checkbox"/> none | | | <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions) | | |
| GUARANTOR INFORMATION <input type="checkbox"/> not applicable | | Name of guarantor Guarantor address; City; State; Zip Code | | Amount Guaranteed (\$) | |
| Principal Occupation (See Instructions) | | | Employer (See Instructions) | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender 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
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: 2 | | 2 FILER NAME Brew Tegele | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 11/24/25 | | 5 Payee name Washington County Republican Party | | | |
| 6 Amount (\$) \$750⁰⁰ | | 7 Payee address; City; State; Zip Code PO Box 479 Brenher TX 77834 <input type="checkbox"/> Check if individual's residence address. | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | | (b) Description Filing fee | | |
| | (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 | | | | | |
| Date 12-1-25 | | Payee name Chase Bank | | | |
| Amount (\$) 1,045.11 | | Payee address; City; State; Zip Code PO Box 1423 Charlotte NC 28201 <input type="checkbox"/> Check if individual's residence address. | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Credit Card Payment | | Description Chase - World of Hyatt card | | |
| | <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 | | | | | |
| Date 12-9-25 | | Payee name Brenher Anchor Club | | | |
| Amount (\$) 102⁰⁰ | | Payee address; City; State; Zip Code Brenher TX 77837 <input type="checkbox"/> Check if individual's residence address. | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Gift expense | | Description Donation for wreath across Amice | | |
| | <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 | | | | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | | | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|---|---|---|---------------------------------------|--------------|
| 1 Total pages Schedule F1: 2 | | 2 FILER NAME Bred Tegeler | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 12-29-25 | | 5 Payee name Chase Credit Card - World of Hyatt | | | |
| 6 Amount (\$) \$1,689.61 | | 7 Payee address; PO Box 1423 | | City; Charlotte | State; NC |
| | | | | Zip Code 28201 | |
| | | <input type="checkbox"/> Check if individual's residence address. | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card payment | | (b) Description Chase card payment | | |
| | (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 | | | | | |
| Date 12-30-25 | | Payee name Bank of America - Atmos | | | |
| Amount (\$) 7,149.70 | | Payee address; PO Box 672050 | | City; Dallas | State; TX |
| | | | | Zip Code 75267 | |
| | | <input type="checkbox"/> Check if individual's residence address. | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Credit Card Payment | | Description BOA atmos payment | | |
| | <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 | | | | | |
| Date 12-30-25 | | Payee name KWHI | | | |
| Amount (\$) \$195.00 | | Payee address; 223 E Main | | City; Brenham | State; TX |
| | | | | Zip Code 77833 | |
| | | <input type="checkbox"/> Check if individual's residence address. | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | | Description Candidate Forum payment | | |
| | <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 | | | | | |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(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) |

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

| | | | |
|---|---|---|---|
| 1 TOTAL PAGES SCHEDULE F4: 13 | 2 FILER NAME Brod Tegele Campaign | | 3 FILER ID (Ethics Commission Filers) |
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | | | \$ 9,884.42 |
| 5 CREDIT CARD ISSUER | Name of financial institution Chase World of Hyatt | | |
| 6 PAYMENT | (a) Amount Charged \$ 597⁰⁰ | (b) Date Expenditure Charged 11-01-25 | (c) Date(s) Credit Card Issuer Paid 11-01-2025 |
| 7 PAYEE | (a) Payee name The Data Group | (b) Payee address; City, State, Zip Code 3208 E Colonial Dr 118 Orlando FL 32803 <input type="checkbox"/> Check if individual's residence address. | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Other | | (b) Description Data list of names |
| (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 Brod Tegele | | Office Sought County Judge Office Held |
| PAYMENT | (a) Amount Charged \$ 350⁰⁰ | (b) Date Expenditure Charged 11-03 | (c) Date(s) Credit Card Issuer Paid 11-03 |
| PAYEE | (a) Payee name Kolton King | (b) Payee address; City, State, Zip Code 115 W Allen Brenham TX 77833 <input type="checkbox"/> Check if individual's residence address. | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Advertising Expense | | (b) Description Photography |
| (c) <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 Brod Tegele | | Office Sought County Judge Office Held N/A |
| PAYMENT | (a) Amount Charged \$ 25.44 | (b) Date Expenditure Charged 11-03 | (c) Date(s) Credit Card Issuer Paid 11-03 |
| PAYEE | (a) Payee name HEB Grocery | (b) Payee address; City, State, Zip Code 2508 S. Day Brenham TX 77833 <input type="checkbox"/> Check if individual's residence address. | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Food/Beverage | | (b) Description Candy for parade |
| (c) <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 Brod Tegele | | Office Sought County Judge Office Held |

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(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) |

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

| | | |
|----------------------------------|-----------------------------|---------------------------------------|
| 1 TOTAL PAGES SCHEDULE F4: 13 | 2 FILER NAME Bred Tegele | 3 FILER ID (Ethics Commission Filers) |
|----------------------------------|-----------------------------|---------------------------------------|

| | |
|---|----|
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ |
|---|----|

| | |
|-------------------------|---|
| 5 CREDIT CARD ISSUER | Name of financial institution Chase - World of Hyatt |
|-------------------------|---|

| | | | |
|-----------|--------------------------------|---|--|
| 6 PAYMENT | (a) Amount Charged \$ 81.19 | (b) Date Expenditure Charged 11-4-25 | (c) Date(s) Credit Card Issuer Paid 11-4-25 |
|-----------|--------------------------------|---|--|

| | | |
|---------|------------------------------------|--|
| 7 PAYEE | (a) Payee name Brandit Graphics | (b) Payee address; City, State, Zip Code 2507 Becker Dr Brenham TX 77833 <input type="checkbox"/> Check if individual's residence address. |
|---------|------------------------------------|--|

| | | |
|--|---|---|
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Printing Expenses | (b) Description 5 name tags |
| (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 Bred Tegele | Office Sought County Judge | Office Held N/A |
|--|--|-------------------------------|--------------------|

| | | | |
|---------|--------------------------------|---|---|
| PAYMENT | (a) Amount Charged \$ 44.28 | (b) Date Expenditure Charged 11-4-25 | (c) Date(s) Credit Card Issuer Paid 11-04-25 |
|---------|--------------------------------|---|---|

| | | |
|-------|---------------------------|--|
| PAYEE | (a) Payee name Danny's | (b) Payee address; City, State, Zip Code 425 Perk Brenham TX 77833 <input type="checkbox"/> Check if individual's residence address. |
|-------|---------------------------|--|

| | | |
|--|---|---|
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Food - Beverage | (b) Description Dinner w/ elected official |
| (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 Bred Tegele | Office Sought County Judge | Office Held N/A |
|--|--|-------------------------------|--------------------|

| | | | |
|---------|--------------------------------|--|--|
| PAYMENT | (a) Amount Charged \$568.31 | (b) Date Expenditure Charged 5-6-24 11-6 | (c) Date(s) Credit Card Issuer Paid 11-6-25 |
|---------|--------------------------------|--|--|

| | | |
|-------|------------------------------------|--|
| PAYEE | (a) Payee name Brandit Graphics | (b) Payee address; City, State, Zip Code 2507 Becker Dr Brenham TX 77833 <input type="checkbox"/> Check if individual's residence address. |
|-------|------------------------------------|--|

| | | |
|--|--|---|
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description Window Decal - Install |
| (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 Bred Tegele | Office Sought County Judge | Office Held N/A |
|--|--|-------------------------------|--------------------|

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(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) |

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

| | | |
|---|---|---|
| 1 TOTAL PAGES SCHEDULE F4: 13 | 2 FILER NAME Brod Tegeler | 3 FILER ID (Ethics Commission Filers) |
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | | \$ |
| 5 CREDIT CARD ISSUER | Name of financial institution Chase World of Hyatt | |
| 6 PAYMENT | (a) Amount Charged \$80 ⁰⁸ | (b) Date Expenditure Charged 11-7-25 |
| | (c) Date(s) Credit Card Issuer Paid 11-7-25 | |
| 7 PAYEE | (a) Payee name Vista Print | (b) Payee address; 275 Wyman City, Waltham State, MA Zip Code, 02451 <input type="checkbox"/> Check if individual's residence address. |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expenses | |
| <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (b) Description Business Card | |
| | (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 Brod Tegeler | |
| | Office Sought County Judge | Office Held N/A |
| PAYMENT | (a) Amount Charged \$81 ¹⁹ | (b) Date Expenditure Charged 11-18 |
| | (c) Date(s) Credit Card Issuer Paid 11-18 | |
| PAYEE | (a) Payee name Brandonit Graphics | (b) Payee address; 2507 Beck City, Brenham State, TX Zip Code, 77831 <input type="checkbox"/> Check if individual's residence address. |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing expenses | |
| <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (b) Description Name Tag | |
| | (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 Brod Tegeler | |
| | Office Sought County Judge | Office Held |
| PAYMENT | (a) Amount Charged \$648 ¹⁰ | (b) Date Expenditure Charged 11-24 |
| | (c) Date(s) Credit Card Issuer Paid 11-24 | |
| PAYEE | (a) Payee name Laramie Messaging | (b) Payee address; 3731 City, Pecan State, TX Zip Code, 77578 <input type="checkbox"/> Check if individual's residence address. |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising | |
| <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (b) Description Text messaging | |
| | (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 Brod Tegeler | |
| | Office Sought County Judge | Office Held |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising 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

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.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

| | | |
|--|---|--|
| 1 TOTAL PAGES SCHEDULE F4: 13 | 2 FILER NAME Brod Tegel | 3 FILER ID (Ethics Commission Filers) |
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | | \$ |
| 5 CREDIT CARD ISSUER | Name of financial institution Chase - World of Hyatt | |
| 6 PAYMENT | (a) Amount Charged \$ 29.00 | (b) Date Expenditure Charged 11/26 |
| 7 PAYEE | (a) Payee name Chase - World of Hyatt | (c) Date(s) Credit Card Issuer Paid 11/26 |
| 8 PURPOSE OF EXPENDITURE | (b) Payee address; PO Box 1423 Charlotte NC 28201 | City, State, Zip Code |
| <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Other | (b) Description Fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| PAYMENT | (a) Amount Charged \$ | (b) Date Expenditure Charged |
| PAYEE | (a) Payee name | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE | (b) Payee address; <input type="checkbox"/> Check if individual's residence address. | City, State, Zip Code |
| <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| Complete ONLY if direct expenditure to benefit C/OH | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| PAYMENT | (a) Amount Charged \$ | (b) Date Expenditure Charged |
| PAYEE | (a) Payee name | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE | (b) Payee address; <input type="checkbox"/> Check if individual's residence address. | City, State, Zip Code |
| <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| Complete ONLY if direct expenditure to benefit C/OH | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(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) |

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

| | | |
|---|------------------------------|---------------------------------------|
| 1 TOTAL PAGES SCHEDULE F4: 13 | 2 FILER NAME Brad Tegeler | 3 FILER ID (Ethics Commission Filers) |
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | | \$ |

| | |
|-------------------------|--|
| 5 CREDIT CARD ISSUER | Name of financial institution Bank of America - Atmos |
|-------------------------|--|

| | | | |
|-----------|---------------------------------|--|--|
| 6 PAYMENT | (a) Amount Charged \$2950.00 | (b) Date Expenditure Charged 11-25-05 | (c) Date(s) Credit Card Issuer Paid 12-05 |
|-----------|---------------------------------|--|--|

| | | |
|---|-----------------------------------|--|
| 7 PAYEE | (a) Payee name Dibrell & Assoc | (b) Payee address; City, State, Zip Code 4203 Clark Shadow Ct Katy TX 77444 |
| <input type="checkbox"/> Check if individual's residence address. | | |

| | | |
|---|--|-------------------------------------|
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description Road & Yard Sign |
| (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 Brad Tegeler | Office Sought County Judge | Office Held |
|--|---|-------------------------------|-------------|

| | | | |
|---------|--------------------------------|--|--|
| PAYMENT | (a) Amount Charged \$122.32 | (b) Date Expenditure Charged 12-05-25 | (c) Date(s) Credit Card Issuer Paid 12-06 |
|---------|--------------------------------|--|--|

| | | |
|---|-----------------------------|--|
| PAYEE | (a) Payee name Mailchimp | (b) Payee address; City, State, Zip Code 405 N Angier Ave NE Atlanta GA 30308 |
| <input type="checkbox"/> Check if individual's residence address. | | |

| | | |
|---|---|---------------------------|
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Advertising | (b) Description Emails |
| (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 Brad Tegeler | Office Sought County Judge | Office Held |
|--|---|-------------------------------|-------------|

| | | | |
|---------|-------------------------------|--|---|
| PAYMENT | (a) Amount Charged \$15.63 | (b) Date Expenditure Charged 12-05-25 | (c) Date(s) Credit Card Issuer Paid 12-06-25 |
|---------|-------------------------------|--|---|

| | | |
|---|----------------------------|--|
| PAYEE | (a) Payee name Wal Mart | (b) Payee address; City, State, Zip Code 203 US Loop 290 W Brenham TX 77833 |
| <input type="checkbox"/> Check if individual's residence address. | | |

| | | |
|---|--|--|
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Event expenses | (b) Description Christmas parade supplies |
| (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 Brad Tegeler | Office Sought County Judge | Office Held |
|--|---|-------------------------------|-------------|

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising 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

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.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

| | | | | | |
|--|--|--|---|---|-----------------------------|
| 1 TOTAL PAGES SCHEDULE F4: 13 | | 2 FILER NAME Brad Tegeler | | 3 FILER ID (Ethics Commission Filers) | |
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | | | | \$ | |
| 5 CREDIT CARD ISSUER | | Name of financial institution Bank of America - Atmos | | | |
| 6 PAYMENT | | (a) Amount Charged \$123.25 | (b) Date Expenditure Charged 12-5-26 | (c) Date(s) Credit Card Issuer Paid 12-6-25 | |
| 7 PAYEE | | (a) Payee name Walmart | (b) Payee address; 203 US290 Loop W Brenham <input type="checkbox"/> Check if individual's residence address. | City, Brenham | State, Zip Code TX 77833 |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Event expenses | | (b) Description Brenham parade expenses | |
| | | (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 Brad Tegeler | | Office Sought County Judge | Office Held |
| PAYMENT | | (a) Amount Charged \$757.75 | (b) Date Expenditure Charged 12-15-25 | (c) Date(s) Credit Card Issuer Paid 12-16-25 | |
| PAYEE | | (a) Payee name Brandit Graphics | (b) Payee address; 2507 Becker Dr Brenham <input type="checkbox"/> Check if individual's residence address. | City, Brenham | State, Zip Code TX 77833 |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Printing Expense | | (b) Description 6"x4" Post Cards | |
| | | (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 Brad Tegeler | | Office Sought County Judge | Office Held |
| PAYMENT | | (a) Amount Charged \$63.95 | (b) Date Expenditure Charged 12-15 | (c) Date(s) Credit Card Issuer Paid 12-16 | |
| PAYEE | | (a) Payee name Spec's | (b) Payee address; 280 W Hwy 290 Brenham <input type="checkbox"/> Check if individual's residence address. | City, Brenham | State, Zip Code TX 77833 |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Gift expense + food + beverage | | (b) Description Christmas party gift | |
| | | (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 Brad Tegeler | | Office Sought County Judge | Office Held |

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising 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

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.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

| | | | |
|---|--|---|---|
| 1 TOTAL PAGES SCHEDULE F4: <u>13</u> | 2 FILER NAME <u>Brod Tegeler</u> | | 3 FILER ID (Ethics Commission Filers) |
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | | | \$ |
| 5 CREDIT CARD ISSUER | Name of financial institution <u>Bank of America - Atmos</u> | | |
| 6 PAYMENT | (a) Amount Charged <u>\$20.02</u> | (b) Date Expenditure Charged <u>12-16</u> | (c) Date(s) Credit Card Issuer Paid <u>12-18</u> |
| 7 PAYEE | (a) Payee name <u>Shell Oil</u> | (b) Payee address; <u>1309 Prairie Lee</u> <input type="checkbox"/> Check if individual's residence address. | City, State, Zip Code <u>Brenham TX 77833</u> |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) <u>Travel in District</u> | | (b) Description <u>Gas</u> |
| (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 <u>Brod Tegeler</u> <u>County Judge</u> | | |
| PAYMENT | (a) Amount Charged <u>\$162.38</u> | (b) Date Expenditure Charged <u>12-17-25</u> | (c) Date(s) Credit Card Issuer Paid <u>12-18-25</u> |
| PAYEE | (a) Payee name <u>Cattlemen's supply</u> | (b) Payee address; <u>1850 TX 105</u> <input type="checkbox"/> Check if individual's residence address. | City, State, Zip Code <u>Brenham TX 77833</u> |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) <u>Advertising expense</u> | | (b) Description <u>T-Post for large sign</u> |
| (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 <u>Brod Tegeler</u> <u>County Judge</u> | | |
| PAYMENT | (a) Amount Charged <u>\$537.00</u> | (b) Date Expenditure Charged <u>12-17-25</u> | (c) Date(s) Credit Card Issuer Paid <u>12-18-25</u> |
| PAYEE | (a) Payee name <u>Dibrell & Assoc</u> | (b) Payee address; <u>4203 Colode shadow Ct</u> <input type="checkbox"/> Check if individual's residence address. | City, State, Zip Code <u>Katy TX 77494</u> |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) <u>Printing expenses</u> | | (b) Description <u>T-shirt design & production</u> |
| (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 <u>Brod Tegeler</u> <u>County Judge</u> | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising 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

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.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

| | | | | | |
|---|--|---|--|--|--|
| 1 TOTAL PAGES SCHEDULE F4: 13 | | 2 FILER NAME Brad Tegele | | 3 FILER ID (Ethics Commission Filers) | |
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | | | | \$ | |
| 5 CREDIT CARD ISSUER | | Name of financial institution Bank of America-Atmos | | | |
| 6 PAYMENT | | (a) Amount Charged \$86.55 | (b) Date Expenditure Charged 12-19-25 | (c) Date(s) Credit Card Issuer Paid 12-20-25 | |
| 7 PAYEE | | (a) Payee name Brenner Ace Hardware | | (b) Payee address; City, State, Zip Code 307 N Austin Pkwy Brenner TX 77837 <input type="checkbox"/> Check if individual's residence address. | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising expense | | (b) Description 4x8 sign accessories | |
| <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (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 Brad Tegele | | Office Sought County Judge Office Held | |
| PAYMENT | | (a) Amount Charged \$14.04 | (b) Date Expenditure Charged 12-19-25 | (c) Date(s) Credit Card Issuer Paid 12-22-2025 | |
| PAYEE | | (a) Payee name Brenner Home Depot | | (b) Payee address; City, State, Zip Code 2801 Wood Ridge Blvd Brenner TX 77837 <input type="checkbox"/> Check if individual's residence address. | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Other | | (b) Description hardware - mini flush cutters | |
| <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (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 Brad Tegele | | Office Sought County Judge Office Held | |
| PAYMENT | | (a) Amount Charged \$85.35 | (b) Date Expenditure Charged 12-21-25 | (c) Date(s) Credit Card Issuer Paid 12-22 | |
| PAYEE | | (a) Payee name Brenner Trexco Supply | | (b) Payee address; City, State, Zip Code 2718 S Market Brenner TX 77837 <input type="checkbox"/> Check if individual's residence address. | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description T Post for 4x8 sign | |
| <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (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 Brad Tegele | | Office Sought County Judge Office Held | |

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

| | | | |
|--|---|--|---|
| Advertising 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 | 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.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

| | | |
|---|---|---|
| 1 TOTAL PAGES SCHEDULE F4: 13 | 2 FILER NAME Brad Tegeler | 3 FILER ID (Ethics Commission Filers) |
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | | \$ |
| 5 CREDIT CARD ISSUER | Name of financial institution Bank of America - Atmos | |
| 6 PAYMENT | (a) Amount Charged \$42.20 | (b) Date Expenditure Charged 12-21 |
| | (c) Date(s) Credit Card Issuer Paid 12-22 | |
| 7 PAYEE | (a) Payee name Brenher Ace Hardware | (b) Payee address; City, State, Zip Code 307 N Austin Pkwy Brenher TX 77833 <input type="checkbox"/> Check if individual's residence address. |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Other | (b) Description Hardware - tools + nails |
| <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (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 Brad Tegeler | Office Sought County Judge Office Held |
| PAYMENT | (a) Amount Charged \$1700 | (b) Date Expenditure Charged 12-22-25 |
| | (c) Date(s) Credit Card Issuer Paid 12-23-2025 | |
| PAYEE | (a) Payee name Digrell & Assoc. | (b) Payee address; City, State, Zip Code 4203 Glade Shadow Ct Katy TX 77494 <input type="checkbox"/> Check if individual's residence address. |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing expenses | (b) Description Yard signs |
| <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (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 Brad Tegeler | Office Sought County Judge Office Held |
| PAYMENT | (a) Amount Charged \$22.95 | (b) Date Expenditure Charged 12-22-25 |
| | (c) Date(s) Credit Card Issuer Paid 12-23-25 | |
| PAYEE | (a) Payee name Fuel Depot #3 | (b) Payee address; City, State, Zip Code 903 S Marked St Brenher TX 77833 <input type="checkbox"/> Check if individual's residence address. |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel in District | (b) Description Fuel |
| <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (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 Brad Tegeler | Office Sought County Judge Office Held |

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising 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

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.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

| | | | | | |
|--|--|--|--|---|--|
| 1 TOTAL PAGES SCHEDULE F4: 13 | | 2 FILER NAME Bred Tegeler | | 3 FILER ID (Ethics Commission Filers) | |
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ | | | | | |
| 5 CREDIT CARD ISSUER | | Name of financial institution Bank of America - Atmos | | | |
| 6. PAYMENT | | (a) Amount Charged \$ 323 | (b) Date Expenditure Charged 12-22-25 | (c) Date(s) Credit Card Issuer Paid 12-23-25 | |
| 7 PAYEE | | (a) Payee name Brenhan HEB | (b) Payee address; City, State, Zip Code 2508 S. Day St Brenhan TX 77837 <input type="checkbox"/> Check if individual's residence address. | | |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Other | | (b) Description Office supplies - markers | |
| | | (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 Bred Tegeler | | Office Sought County Judge | |
| | | Office Held | | | |
| PAYMENT | | (a) Amount Charged \$ 11.20 | (b) Date Expenditure Charged 12-26-25 | (c) Date(s) Credit Card Issuer Paid 12-27-25 | |
| PAYEE | | (a) Payee name Rettler's #9 | (b) Payee address; City, State, Zip Code 1703 Hwy 105 Brenhan TX 77837 <input type="checkbox"/> Check if individual's residence address. | | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Food/Beverage | | (b) Description Water for sign volunteers | |
| | | (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 | | | |
| PAYMENT | | (a) Amount Charged \$ 12.00 | (b) Date Expenditure Charged 12-26-25 | (c) Date(s) Credit Card Issuer Paid 12-27-25 | |
| PAYEE | | (a) Payee name Rettler's #9 | (b) Payee address; City, State, Zip Code 1703 Hwy 105 Brenhan TX 77837 <input type="checkbox"/> Check if individual's residence address. | | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Travel in district | | (b) Description Fuel | |
| | | (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 Bred Tegeler | | Office Sought County Judge | |
| | | Office Held | | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

9

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising 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

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.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

| | | |
|---|---|---|
| 1 TOTAL PAGES SCHEDULE F4: 13 | 2 FILER NAME Brod Tegeler | 3 FILER ID (Ethics Commission Filers) |
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | | \$ |
| 5 CREDIT CARD ISSUER | Name of financial institution Bank of America - Atmos | |
| 6 PAYMENT | (a) Amount Charged \$2488 | (b) Date Expenditure Charged 12-26-25 |
| | (c) Date(s) Credit Card Issuer Paid 12-27-25 | |
| 7 PAYEE | (a) Payee name Brenhan Aca Hardware | (b) Payee address; 307 N Austin Pl City, State, Zip Code Brenhan TX 77833 <input type="checkbox"/> Check if individual's residence address. |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Other - Advertising expens | (b) Description 4x8 zip tie |
| | (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 Brod Tegeler | Office Sought County Judge Office Held |
| PAYMENT | (a) Amount Charged \$395 | (b) Date Expenditure Charged 11-29 |
| | (c) Date(s) Credit Card Issuer Paid 11-29 | |
| PAYEE | (a) Payee name BOA - Atmos | (b) Payee address; PO Box 15284 City, State, Zip Code Wilmington DE 19850 <input type="checkbox"/> Check if individual's residence address. |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political Other | (b) Description CC fee |
| | (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 |
| PAYMENT | (a) Amount Charged \$1888 | (b) Date Expenditure Charged 12-29-25 |
| | (c) Date(s) Credit Card Issuer Paid 12-30-25 | |
| PAYEE | (a) Payee name HETS Brenhan | (b) Payee address; 2508 S Day St City, State, Zip Code Brenhan TX 77833 <input type="checkbox"/> Check if individual's residence address. |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) <input type="checkbox"/> Political <input type="checkbox"/> Non-Political Other | (b) Description Office supplies |
| | (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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10

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

| | | |
|---|---|---|
| 1 TOTAL PAGES SCHEDULE F4: 13 | 2 FILER NAME Brew Tegala | 3 FILER ID (Ethics Commission Filers) |
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | | \$ |
| 5 CREDIT CARD ISSUER | Name of financial institution Bank of America - Atmos | |
| 6 PAYMENT | (a) Amount Charged \$ 2450 | (b) Date Expenditure Charged 12-29-25 |
| | (c) Date(s) Credit Card Issuer Paid 12-30-25 | |
| 7 PAYEE | (a) Payee name K&M Grocery | (b) Payee address; City, State, Zip Code 3600 Hwy 26 S Brenham TX 77837 <input type="checkbox"/> Check if individual's residence address. |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Travel in district | (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 |
| PAYMENT | (a) Amount Charged \$ 16470 | (b) Date Expenditure Charged 12-29-25 |
| | (c) Date(s) Credit Card Issuer Paid 12-30-2025 | |
| PAYEE | (a) Payee name Brenham Treeter Supply | (b) Payee address; City, State, Zip Code 2118 S. Market St Brenham TX 77837 <input type="checkbox"/> Check if individual's residence address. |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) <input type="checkbox"/> Political <input type="checkbox"/> Non-Political Other | (b) Description T-Posts for 4x8 outdoor sign |
| | (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 |
| PAYMENT | (a) Amount Charged \$ 64810 | (b) Date Expenditure Charged 12-30-25 |
| | (c) Date(s) Credit Card Issuer Paid 12-31-25 | |
| PAYEE | (a) Payee name Laramie Messaging | (b) Payee address; City, State, Zip Code 3731 Pecan Ct Waukegan TX 77578 <input type="checkbox"/> Check if individual's residence address. |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Advertising | (b) Description Text messaging |
| | (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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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising 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

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.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

| | | | | | |
|--|--|---|---|---|--|
| 1 TOTAL PAGES SCHEDULE F4: 13 | | 2 FILER NAME Brad Tegels | | 3 FILER ID (Ethics Commission Filers) | |
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | | | | \$ | |
| 5 CREDIT CARD ISSUER | | Name of financial institution Bank of America - Atmos | | | |
| 6 PAYMENT | | (a) Amount Charged \$183 ⁰⁰ | (b) Date Expenditure Charged 12-31-25 | (c) Date(s) Credit Card Issuer Paid 1-2-26 | |
| 7 PAYEE | | (a) Payee name USPS Brenham | (b) Payee address; City, State, Zip Code 309 N. Market Brenham TX 77831 <input type="checkbox"/> Check if individual's residence address. | | |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Other | | (b) Description Stamps for postcards | |
| | | (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 | |
| PAYMENT | | (a) Amount Charged \$16 ²³ | (b) Date Expenditure Charged 12-31-25 | (c) Date(s) Credit Card Issuer Paid 1-2-26 | |
| PAYEE | | (a) Payee name Brenham Ace Hardware | (b) Payee address; City, State, Zip Code 307 W Ashm Pkwy Brenham TX 77831 <input type="checkbox"/> Check if individual's residence address. | | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Other | | (b) Description cable ties for 4x8 sign | |
| | | (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 | |
| PAYMENT | | (a) Amount Charged \$ | (b) Date Expenditure Charged | (c) Date(s) Credit Card Issuer Paid | |
| PAYEE | | (a) Payee name | (b) Payee address; City, State, Zip Code <input type="checkbox"/> Check if individual's residence address. | | |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) | | (b) Description | |
| | | (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 | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



AFFIDAVIT FOR CANDIDATE OR OFFICEHOLDER: ELECTRONIC FILING EXEMPTION

An exemption affidavit must be submitted with each paper report.

Beginning on January 1, 2026, a candidate or officeholder who has accepted more than \$34,890 in political contributions or made more than \$34,890 in political expenditures in any calendar year must file all subsequent reports electronically.

OFFICE USE ONLY

Date Received

1/15/2026

Date Hand-delivered or Date Postmarked

1/15/2026

Receipt #

Amount \$

Date Processed

1/15/2026

Date Imaged

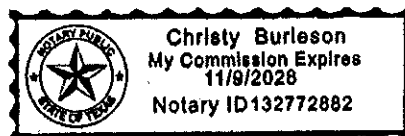
1/15/2026

| | |
|-----------------------------------|------------|
| Filer name <u>Brad Tegeler</u> | Filer ID # |
|-----------------------------------|------------|

- I swear or affirm that I have not accepted more than \$34,890 in political contributions or made more than \$34,890 in political expenditures in a calendar year.
- I further swear or affirm that I do not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I further swear or affirm that no person acting as my agent or consultant, and no person with whom I contract, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I further swear or affirm that I understand that I am required to file my campaign finance reports electronically if I, my agent or consultant, or a person with whom I contract exceeds \$34,890 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I am filing this affidavit with the County Clerk report due on January 15, 2026. I understand that this affidavit is required to be filed with each campaign finance report for which I am claiming an exemption from electronic filing.

Please complete either option below:

(1) Affidavit



Brad Tegeler
Signature of Filer

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Brad Tegeler this the 15 day of January, 2026, to certify which, witness my hand and seal of office.

Christy Burleson Christy Burleson Notary
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 Filer (Declarant)

**FILERS WHO ARE EXEMPT FROM THE ELECTRONIC FILING REQUIREMENT
ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER**