CORRECTION/AMENDMENT AFFIDAVIT
FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 40	OFFICE USE ONLY RECEIVED

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST **John**	MI	Date Received **FEB 3 2026**
	NICKNAME	LAST **Nix**	SUFFIX	

CITY CLERK'S OFFICE
City of Tyler

4 ORIGINAL REPORT TYPE	☑ January 15	☐ Runoff	☐ Final report	Date Hand-delivered or Date Postmarked
	☐ July 15	☐ Exceeded modified reporting limit		
	☐ 30th day before election	☐ Other (specify)	Receipt #	Amount $
	☐ 8th day before election	☐ 15th day after treasurer appointment (officeholder only)	Date Processed	

5 ORIGINAL PERIOD COVERED	Month **7** / Day **1** / Year **25** THROUGH Month **12** / Day **31** / Year **25**	Date Imaged

6 EXPLANATION OF CORRECTION

Corrected missing & delayed information.

7 SIGNATURE   I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

☐ Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepre-sent the information contained in the report.

☑ Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

_____
Signature of Candidate/Officeholder

Please complete either option below:

Derrah Nicole Helms
My Commission Expires
5/23/2029
Notary ID 135516795

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ John Nix _____ this the __30__ day of __January__.

20 __26__ , to certify which, witness my hand and seal of office.

_____	Derrah Nicole Helms	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 Candidate/Officeholder (Declarant)

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

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: 39

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: Mr FIRST: John MI:	**OFFICE USE ONLY**
	NICKNAME: LAST: Nix SUFFIX:	Date Received

| **4** CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of Address | ADDRESS / PO BOX: PO Box 130126 APT / SUITE #: CITY: Tyler STATE: TX ZIP CODE: 75713 | |

5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE: (903) PHONE NUMBER: 376-4291 EXTENSION:	Date Hand-delivered or Date Postmarked

6 CAMPAIGN TREASURER NAME	MS / MRS / MR: Mrs FIRST: Jennifer MI:	Receipt #	Amount $
	NICKNAME: LAST: Walsh SUFFIX:	Date Processed	
		Date Imaged	

| **7** CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE): 5750 Reed Rd APT / SUITE #: CITY: Tyler STATE: TX ZIP CODE: 75707 |

| **8** CAMPAIGN TREASURER PHONE | AREA CODE: (903) PHONE NUMBER: 561-5061 EXTENSION: |

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 7 / Day 1 / Year 2025 THROUGH Month 12 / Day 31 / Year 2025

11 ELECTION

ELECTION DATE: Month 5 / Day 2 / Year 2026

ELECTION TYPE: ☐ Primary ☐ Runoff ☐ Other Description ☑ General ☐ Special

12 OFFICE	OFFICE HELD (if any): None	**13** OFFICE SOUGHT (if known): Tyler City Mayor

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
☐ Additional Pages	COMMITTEE CAMPAIGN TREASURER ADDRESS

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER
# CAMPAIGN FINANCE REPORT

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

15 C/OH NAME	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)	$ 0
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$12,695.27
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$ 0
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 57,181.18
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 28,779.06
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 51,000.00

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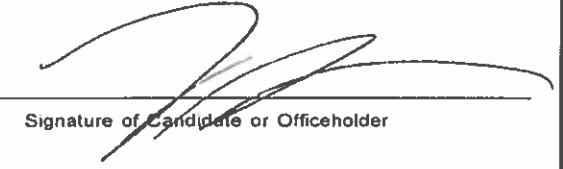
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit
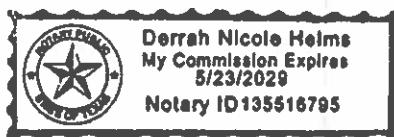
```
Derrah Nicole Helms
My Commission Expires
5/23/2029
Notary ID135516795
```

NOTARY STAMP/SEAL

Sworn to and subscribed before me by ___John Nix___ this the __30__ day of __January__ 20 __26__, to certify which, witness my hand and seal of office.

Signature of officer administering oath	_Derrah Nicole Helms_ Printed name of officer administering oath	_Notary_ 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	20 Filer ID (Ethics Commission Filers)
John Nix	

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	☑ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$11,800.00
2.	☑ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$895.27
3.	☐ SCHEDULE B: PLEDGED CONTRIBUTIONS	$0
4.	☐ SCHEDULE E: LOANS	$
5.	☑ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$32,383.86
6.	☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$ 0
7.	☐ SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	$ 0
8.	☑ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$ 23,329.53
9.	☐ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	$ 0
10.	☑ SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	$1,467.79
11.	☐ SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 0
12.	☐ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	$ 0

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 8

2 FILER NAME
John Nix

3 Filer ID (Ethics Commission Filers)

4 Date	**5** Full name of contributor	☐ out-of-state PAC (ID#:_____)	**7** Amount of contribution ($)
08/12/2025	Charles R. Reid		$1500.00

6 Contributor address; City; State; Zip Code

11911 CR 1168   Tyler   TX   75703

8 Principal occupation / Job title (See Instructions)   **9** Employer (See Instructions)

Date	Full name of contributor	☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
08/22/25	Justin Weiner		$250.00

Contributor address; City; State; Zip Code

17961 Timothy Ct   Tyler   TX   75703

Principal occupation / Job title (See Instructions)   Employer (See Instructions)

Date	Full name of contributor	☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
9/17/25	Dr Larry Goddard		$50.00

Contributor address; City; State; Zip Code

1222 Jeff Davis Dr   Tyler   TX   75703

Principal occupation / Job title (See Instructions)   Employer (See Instructions)

Date	Full name of contributor	☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
9/22/25	Jim Masten		20.00

Contributor address; City; State; Zip Code

2307 McDonald Rd   Tyler   TX

Principal occupation / Job title (See Instructions)   Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule A1:
2 FILER NAME John Nix	**3** Filer ID (Ethics Commission Filers)

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of contribution ($)
9/22/25	Mary Anne Aiken	$20.00
	6 Contributor address; City; State; Zip Code	
	19183 Country Estates Cir Tyler TX 75762	

8 Principal occupation / Job title (See Instructions)   **9** Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
9/22/25	Toni Fabry	$25.00
	Contributor address; City; State; Zip Code	
	7338 Willow Creek Dr Tyler TX 75703	

Principal occupation / Job title (See Instructions)   Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
9/22/25	Kim Holley	$5.00
	Contributor address; City; State; Zip Code	

Principal occupation / Job title (See Instructions)   Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
9/22/25	Sheryl Hazelwood	$25.00
	Contributor address; City; State; Zip Code	
	5401 Hollytree Dr #2302 Tyler TX 75703	

Principal occupation / Job title (See Instructions)   Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule A1:

2 FILER NAME	**3** Filer ID (Ethics Commission Filers)
John Nix	

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of contribution ($)
9/22/25	Dennis G.or Pamela Black	$1000.00
	6 Contributor address; City; State; Zip Code	
	20218 CR 2171 Whitehouse TX 75791	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
	David Emmert & Sharon Emmert	$500.00
	Contributor address; City; State; Zip Code	
9/22/25	3610 Chapel Downs Tyler TX 75707	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
9/22/25	Sharon C. Guthrie	$250.00
	Contributor address; City; State; Zip Code	
	6808 Gleneagles Dr. Tyler TX 75703	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
9/22/25	Cash donation	$5.00
	Contributor address; City; State; Zip Code	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

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

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:
2 FILER NAME John Nix	**3** Filer ID (Ethics Commission Filers)

4 Date	**5** Full name of contributor	☐ out-of-state PAC (ID#:_____)	**7** Amount of contribution ($)
9/25/25	Susan McGee Goolsbee William Scott Goolsbee		$250.00
	6 Contributor address; City; State; Zip Code		
	1608 Skidmore Ln Tyler TX 75703		

8 Principal occupation / Job title (See Instructions)   **9** Employer (See Instructions)

Date	Full name of contributor	☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
9/25/25	A.E. Shull		$100.00
	Contributor address; City; State; Zip Code		
	7028 Calumet Dr Tyler TX 75703		

Principal occupation / Job title (See Instructions)   Employer (See Instructions)

Date	Full name of contributor	☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
9/25/25	John C. Lowe		$100.00
	Contributor address; City; State; Zip Code		
	3208 Teakwood Dr Tyler, TX 75701		

Principal occupation / Job title (See Instructions)   Employer (See Instructions)

Date	Full name of contributor	☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
9/25/25	Ashley Ferguson		$500.00
	Contributor address; City; State; Zip Code		
	407 West 7th St Tyler, TX 75701		

Principal occupation / Job title (See Instructions)   Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule A1:
2 FILER NAME **John Nix**	**3** Filer ID (Ethics Commission Filers)

4 Date	5 Full name of contributor	☐ out-of-state PAC (ID#:_____)	7 Amount of contribution ($)
9/25/25	**Janet Plymale**		**$100.00**
	6 Contributor address; City; State; Zip Code		
	9117 Canyon Rd Tyler, TX 75703		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)

Date	Full name of contributor	☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
9/29/25	**Vinny Cookson**		**$100.00**
	Contributor address; City; State; Zip Code		
	15080 CR 1104 Flint, TX 75762		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor	☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
9/30/25	**Sharon C. Guthrie**		**$50.00**
	Contributor address; City; State; Zip Code		
	6808 Gleneagles Dr Tyler, TX 75703		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor	☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
10/6/25	**Steve Nix**		**$250.00**
	Contributor address; City; State; Zip Code		
	5523 Preston Fairways Dr Dallas TX 75252		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule A1:

2 FILER NAME	**3** Filer ID (Ethics Commission Filers)
John Nix	

4 Date	**5** Full name of contributor	☐ out-of-state PAC (ID#:_____)	**7** Amount of contribution ($)
10/9/25	Thomas & Margarita Grahm		$500.00
	6 Contributor address; City; State; Zip Code		
	533 Wilder Way Tyler TX 75703		

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)

Date	Full name of contributor	☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
10/15/25	Wayne & Charlesa Karaki		$500.00
	Contributor address; City; State; Zip Code		
	2406 Merrill Dr Tyler TX 75701		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor	☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
10/20/25	Weldon Les Miller Marjorie Miller		$250.00
	Contributor address; City; State; Zip Code		
	731 Bentley Ct Tyler TX 75703		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor	☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
10/30/25	Sharon C. Guthrie		$50.00
	Contributor address; City; State; Zip Code		
	6808 Gleneagles Dr Tyler, TX 75703		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule A1:

2 FILER NAME	**3** Filer ID (Ethics Commission Filers)
John Nix	

4 Date	**5** Full name of contributor	☐ out-of-state PAC (ID#:_____)	**7** Amount of contribution ($)
11/30/25	Sharon Guthrie		$50.00
	6 Contributor address; City; State; Zip Code		
	6808 Gleneagles Dr Tyler, TX 75703		

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)

Date	Full name of contributor	☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
12/10/25	John W Gibson Julie J Gibson		$4000.00
	Contributor address; City; State; Zip Code		
	22933 CR 422 Lindale, TX 75771		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor	☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
12/15/25	Laurie Turman		$100.00
	Contributor address; City; State; Zip Code		
	622 Ridge Creek Dr Tyler, TX 75703		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor	☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
12/18/25	Jarad Kent		$250.00
	Contributor address; City; State; Zip Code		
	6223 Bedford Dr Tyler TX 75703		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule A1:
2 FILER NAME	**3** Filer ID (Ethics Commission Filers)

2 FILER NAME

John Nix

3 Filer ID (Ethics Commission Filers)

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of contribution ($)
12/19/25	**Phil Burks**	$1000.00
	6 Contributor address; City; State; Zip Code	
	2005 Stonegate Valley Dr Tyler TX 75703	

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
	Contributor address; City; State; Zip Code	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
	Contributor address; City; State; Zip Code	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
	Contributor address; City; State; Zip Code	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule A2: 1
2 FILER NAME John Nix	**3** Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS	$ 0

5 Date 09/22/25	**6** Full name of contributor ☐ out-of-state PAC (ID#:_____) **Grassroots America**	**8** Amount of Contribution $ $895.27	**9** In-kind contribution description Meet & greet with Candidate
	7 Contributor address; City; State; Zip Code PO Box 130012 Tyler TX 75713		☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	**11** Employer (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's principal occupation (FOR JUDICIAL)	**13** Contributor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)	**15** Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution $	In-kind contribution description
	Contributor address; City; State; Zip Code		☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employer (FOR NON-JUDICIAL)(See Instructions)
Contributor's principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See Instructions)
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
5	John Nix	

4 Date	5 Payee name
07/01/2025	Austin Bank

6 Amount ($)	7 Payee address;	City;	State;	Zip Code
$53.50	108 Market Square Blvd	Tyler	TX	75703

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Other	Ordered checks for expenditures

(c) [ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense

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

Date	Payee name
08/02/2025	Brett Rogers

Amount ($)	Payee address;	City;	State;	Zip Code
$2,200.00	4514 Edinburgh Dr.	Tyler	TX	75703

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Consulting Expense	Campaign Consulting

[ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	John Nix	Tyler City Mayor	None

Date	Payee name
09/01/25	Brett Rogers

Amount ($)	Payee address;	City;	State;	Zip Code
$1200.00	4514 Edinburgh Drive	Tyler	TX	75703

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Consulting Expense	Campaign Consulting

[ ] Check if travel outside of Texas. Complete Schedule T. [ ] Check if Austin, TX, officeholder living expense

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE
FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME John Nix	3 Filer ID (Ethics Commission Filers)

4 Date 09/02/25	5 Payee name Gravity Films			
6 Amount ($) $5926.69	**7 Payee address;** 3409 McMillan Dr	**City;** Tyler	**State;** TX	**Zip Code** 75701

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Media

	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ Check if Austin, TX, officeholder living expense

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

Date 7/1/25-12/31/25	Payee name Anedot			
Amount ($) $158.50	**Payee address;** 1340 Poydras St. #1770	**City;** New Orleans	**State;** LA	**Zip Code** 70112

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Online contribution fees

	☐ Check if travel outside of Texas. Complete Schedule T.	☐ Check if Austin, TX, officeholder living expense

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

Date 7/3/25	Payee name Austin Bank			
Amount ($) $2007.50	**Payee address;** 108 Market Square Blvd	**City;** Tyler	**State;** TX	**Zip Code** 75703

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/banking	Description NSF contribution check-$2000.00 Bank fee-$7.50

	☐ Check if travel outside of Texas. Complete Schedule T.	☐ Check if Austin, TX, officeholder living expense

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME John Nix	3 Filer ID (Ethics Commission Filers)

4 Date 09/25/25	5 Payee name Marcelo Landeros			
6 Amount ($) $866.00	**7 Payee address:** 1269 Hagan Rd	City: Whitehouse	State: TX	Zip Code 75791

8 **PURPOSE OF EXPENDITURE**	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Videos & pictures for event
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ Check if Austin, TX, officeholder living expense

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

Date 10/1/25	Payee name Brett Rogers			
Amount ($) $1200.00	**Payee address:** 4514 Edinburgh Drive	City: Tyler	State: TX	Zip Code 75703

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Campaign Consulting
	☐ Check if travel outside of Texas. Complete Schedule T.	☐ Check if Austin, TX, officeholder living expense

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

Date 11/05/25	Payee name Brett Rogers			
Amount ($) $1200.00	**Payee address:** 4514 Edinburgh Drive	City: Tyler	State: TX	Zip Code 75703

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Campaign Consulting
	☐ Check if travel outside of Texas. Complete Schedule T.	☐ Check if Austin, TX, officeholder living expense

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense 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 FILER NAME	3 Filer ID (Ethics Commission Filers)

4 Date 12/9/25	5 Payee name Xpresso Print Cafe			

6 Amount ($) $11024.36	7 Payee address: 113 University Place	City: Tyler,	State: TX	Zip Code 75702

8 **PURPOSE OF EXPENDITURE**	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Christmas Mailer

(c) ☐ Check if travel outside of Texas. Complete Schedule T.   ☐ Check if Austin, TX, officeholder living expense

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

---

Date	Payee name			

Amount ($)	Payee address:	City:	State:	Zip Code

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description

☐ Check if travel outside of Texas. Complete Schedule T.   ☐ Check if Austin, TX, officeholder living expense

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

---

Date	Payee name			

Amount ($)	Payee address:	City:	State:	Zip Code

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description

☐ Check if travel outside of Texas. Complete Schedule T.   ☐ Check if Austin, TX, officeholder living expense

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE
FROM POLITICAL CONTRIBUTIONS

SCHEDULE **F1**

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME John Nix	3 Filer ID (Ethics Commission Filers)

4 Date 11/17/25	5 Payee name Joe Matthews			

6 Amount ($) $350.00	7 Payee address: 2504 Memory Lane	City: Tyler,	State: TX	Zip Code 75701

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Podcast interview

(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

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

Date 12/16/25	Payee name Gravity Films			

Amount ($) $6197.31	Payee address: 3409 McMillan Dr	City: Tyler,	State: TX	Zip Code 75701

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Video production

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

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

Date	Payee name			

Amount ($)	Payee address:	City:	State:	Zip Code

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description

☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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

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

SCHEDULE F4

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: 21	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$ 0

5 CREDIT CARD ISSUER	Name of financial institution **American Express Platinum**

6 PAYMENT	(a) Amount Charged $ 167.69	(b) Date Expenditure Charged 7/21/25	(c) Date(s) Credit Card Issuer Paid 8/18/25

7 PAYEE	(a) Payee name EasyDNS.com	(b) Payee address; City, State, Zip Code

8 PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description Website/domain
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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 $ 360.82	(b) Date Expenditure Charged 08/06/25	(c) Date(s) Credit Card Issuer Paid 09/22/25

PAYEE	(a) Payee name Champions for Freedom	(b) Payee address; PO Box 130012	City, Tyler,	State, TX	Zip Code 75713

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description Grassroots event
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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

PURPOSE OF EXPENDITURE ☐ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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

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

SCHEDULE **F4**

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:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$0

5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture X Business

6 PAYMENT	(a) Amount Charged $140.73	(b) Date Expenditure Charged 09/03/25	(c) Date(s) Credit Card Issuer Paid 10/13/25

7 PAYEE	(a) Payee name Sadie's Stichery	(b) Payee address; City, State, Zip Code 4588 Old Troup Hwy Suite 50 Tyler, TX 75707

8 PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description Thank you gifts

(c) ☐ Check if travel outside of Texas. Complete Schedule T.   ☐ 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 $2672.70	(b) Date Expenditure Charged 9/30/25	(c) Date(s) Credit Card Issuer Paid 11/19/25

PAYEE	(a) Payee name Digital Skyrocket	(b) Payee address; City, State, Zip Code PO Box 131763 Tyler TX 75713

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Website maintenance

(c) ☐ Check if travel outside of Texas. Complete Schedule T.   ☐ 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 $150.00	(b) Date Expenditure Charged 10/08/2025	(c) Date(s) Credit Card Issuer Paid 11/19/25

PAYEE	(a) Payee name WAGS of East Texas Inc.	(b) Payee address; City, State, Zip Code 323 ESE Loop 323 Tyler TX 75701

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Pars Fore Paws event

(c) ☐ Check if travel outside of Texas. Complete Schedule T.   ☐ 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
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:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$ 0

5 CREDIT CARD ISSUER	Name of financial institution **Capital One Venture X Business**

6 PAYMENT	(a) Amount Charged $128.82	(b) Date Expenditure Charged 10/21/25	(c) Date(s) Credit Card Issuer Paid 11/19/25

7 PAYEE	(a) Payee name **Digital Skyrocket**	(b) Payee address; PO Box 131763	City, Tyler	State, TX	Zip Code 75713

8 PURPOSE OF EXPENDITURE [✓] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) **Advertising Expense**	(b) Description **Website management**

(c) [ ] Check if travel outside of Texas. Complete Schedule T.   [ ] 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 $	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid

PAYEE	(a) Payee name	(b) Payee address;	City,	State, Zip Code

PURPOSE OF EXPENDITURE [ ] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description

(c) [ ] Check if travel outside of Texas. Complete Schedule T.   [ ] 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

PURPOSE OF EXPENDITURE [ ] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description

(c) [ ] Check if travel outside of Texas. Complete Schedule T.   [ ] 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
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:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture

6 PAYMENT	(a) Amount Charged $ 275.95	(b) Date Expenditure Charged 06/19/2025	(c) Date(s) Credit Card Issuer Paid 08/08/2025

7 PAYEE	(a) Payee name easyDNSTECH.com	(b) Payee address; City, State, Zip Code

8 PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description Website/domain
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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 $541.25	(b) Date Expenditure Charged 8/22/25	(c) Date(s) Credit Card Issuer Paid 10/9/25

PAYEE	(a) Payee name Callynth Photography	(b) Payee address; 117 E Erwin St City, Tyler State, TX Zip Code 75702

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Head shots-photos
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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 $1732.00	(b) Date Expenditure Charged 8/29/25	(c) Date(s) Credit Card Issuer Paid 10/9/25

PAYEE	(a) Payee name True Vine Brewing Company	(b) Payee address; 2453 Earl Campbell pkwy Tyler TX 75701

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Pavillion rental for kick off event
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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	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:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 CREDIT CARD ISSUER	Name of financial institution **Capital One Venture**

6 PAYMENT	(a) Amount Charged $ 35.71	(b) Date Expenditure Charged 9/11/25	(c) Date(s) Credit Card Issuer Paid 10/9/25

7 PAYEE	(a) Payee name **Amazon**	(b) Payee address; PO Box 81226	City, Seattle,	State, WA	Zip Code 98108-1226

8 PURPOSE OF EXPENDITURE
- [✓] Political
- [ ] Non-Political

(a) Category (See Categories listed at the top of this schedule) **Advertising Expense**	(b) Description **Sign holders**
(c) [ ] Check if travel outside of Texas. Complete Schedule T.	[ ] 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 $86.59	(b) Date Expenditure Charged 9/11/25	(c) Date(s) Credit Card Issuer Paid 10/9/25

PAYEE	(a) Payee name **Amazon**	(b) Payee address; PO Box 81226	City, Seattle,	State, WA	Zip Code 98108-1226

PURPOSE OF EXPENDITURE
- [✓] Political
- [ ] Non-Political

(a) Category (See Categories listed at the top of this schedule) **Advertising Expense**	(b) Description **Ring light for videos**
(c) [ ] Check if travel outside of Texas. Complete Schedule T.	[ ] 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 $46.54	(b) Date Expenditure Charged 9/15/25	(c) Date(s) Credit Card Issuer Paid 10/9/25

PAYEE	(a) Payee name **Amazon**	(b) Payee address; PO Box 81226	City, Seattle,	State, WA	Zip Code 98108-1226

PURPOSE OF EXPENDITURE
- [✓] Political
- [ ] Non-Political

(a) Category (See Categories listed at the top of this schedule) **Advertising Expense**	(b) Description **Sign holders**
(c) [ ] Check if travel outside of Texas. Complete Schedule T.	[ ] 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:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture

6 PAYMENT	(a) Amount Charged $ 990.00	(b) Date Expenditure Charged 8/31/25	(c) Date(s) Credit Card Issuer Paid 10/13/25

7 PAYEE	(a) Payee name Danielle Reeves	(b) Payee address; City, State, Zip Code 7777 Glen America Dr. Apt 330 Dallas TX 75225

8 PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Graphic Design for website
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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 $ 103.83	(b) Date Expenditure Charged 9/9/25	(c) Date(s) Credit Card Issuer Paid 10/13/25

PAYEE	(a) Payee name Michaels	(b) Payee address; City, State, Zip Code 5839 S Broadway Ave Tyler, TX 75703

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Storage boxes for tshirts and supplies
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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 $ 121.18	(b) Date Expenditure Charged 9/10/25	(c) Date(s) Credit Card Issuer Paid 10/13/25

PAYEE	(a) Payee name Wall Monkeys	(b) Payee address; City, State, Zip Code 2021 St Augustine Rd E. Jacksonville, FL 32207

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Large decal for sign
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 CREDIT CARD ISSUER	Name of financial institution **Capital One Venture**

6 PAYMENT	(a) Amount Charged $ 300.00	(b) Date Expenditure Charged 8/30/25	(c) Date(s) Credit Card Issuer Paid 10/9/25

7 PAYEE	(a) Payee name Bethesda Health Clinic	(b) Payee address; 409 W Ferguson St.	City, Tyler	State, TX	Zip Code 75702

8 PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Bethesda event ticket purchase
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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 $ 684.95	(b) Date Expenditure Charged 9/2/25	(c) Date(s) Credit Card Issuer Paid 10/9/25

PAYEE	(a) Payee name SociaLily	(b) Payee address; 192 CR 4707	City, Troup	State, TX	Zip Code 75789

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Social Media management
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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 $389.70	(b) Date Expenditure Charged 9/3/25	(c) Date(s) Credit Card Issuer Paid 10/9/25

PAYEE	(a) Payee name Impressive Image Works	(b) Payee address; 2901 Teague Dr	City, Tyler,	State, TX	Zip Code 75701

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Sign
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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
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:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 CREDIT CARD ISSUER	Name of financial institution **Capital One Venture**

6 PAYMENT	(a) Amount Charged **$ 64.89**	(b) Date Expenditure Charged **9/13/25**	(c) Date(s) Credit Card Issuer Paid **10/13/25**

7 PAYEE	(a) Payee name **Michaels**	(b) Payee address; City, State, Zip Code **5839 S Broadway Ave Tyler, TX 75703**

8 PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) **Advertising Expense**	(b) Description **Addtl storage**
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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 **$46.54**	(b) Date Expenditure Charged **9/18/25**	(c) Date(s) Credit Card Issuer Paid **11/13/25**

PAYEE	(a) Payee name **Amazon**	(b) Payee address; City, State, Zip Code **PO Box 81226 Seattle WA 98108-1226**

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) **Advertising Expense**	(b) Description **Signs**
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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 **$ 205.66**	(b) Date Expenditure Charged **9/19/25**	(c) Date(s) Credit Card Issuer Paid **11/13/25**

PAYEE	(a) Payee name **Amazon**	(b) Payee address; City, State, Zip Code **PO Box 81226 Seattle WA 98108-1226**

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) **Advertising Expense**	(b) Description **Shelving**
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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
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:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture

6 PAYMENT	(a) Amount Charged $123.92	(b) Date Expenditure Charged 9/22/25	(c) Date(s) Credit Card Issuer Paid 11/13/25

7 PAYEE	(a) Payee name Amazon	(b) Payee address; PO Box 81226	City, Seattle	State, WA	Zip Code 98108-1226

8 PURPOSE OF EXPENDITURE

☑ Political
☐ Non-Political

(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Hardware for bumper signs
(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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 $35.71	(b) Date Expenditure Charged 10/1/25	(c) Date(s) Credit Card Issuer Paid 11/13/25

PAYEE	(a) Payee name Amazon	(b) Payee address; PO Box 81226	City, Seattle	State, WA	Zip Code 98108-1226

PURPOSE OF EXPENDITURE

☑ Political
☐ Non-Political

(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Microphone
(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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

PURPOSE OF EXPENDITURE

☐ Political
☐ Non-Political

(a) Category (See Categories listed at the top of this schedule)	(b) Description
(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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

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

SCHEDULE **F4**

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:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture

6 PAYMENT	(a) Amount Charged $ 16.41	(b) Date Expenditure Charged 9/24/25	(c) Date(s) Credit Card Issuer Paid 11/13/25

7 PAYEE	(a) Payee name Walmart	(b) Payee address; 5050 Troup HWY	City, Tyler	State, TX	Zip Code 75707

8 PURPOSE OF EXPENDITURE
☑ Political
☐ Non-Political

(a) Category (See Categories listed at the top of this schedule) **Food & Beverage expense**

(b) Description **Waters for event**

(c) ☐ Check if travel outside of Texas. Complete Schedule T.   ☐ 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 $ 97.99	(b) Date Expenditure Charged 9/24/25	(c) Date(s) Credit Card Issuer Paid 11/13/25

PAYEE	(a) Payee name Office Depot	(b) Payee address; 4329 Old Bullard rd	City, Tyler	State, TX	Zip Code 75703

PURPOSE OF EXPENDITURE
☑ Political
☐ Non-Political

(a) Category (See Categories listed at the top of this schedule) **Event Expense**

(b) Description **Paper, scissors, pens, pamphlet holder**

(c) ☐ Check if travel outside of Texas. Complete Schedule T.   ☐ 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 $ 29.20	(b) Date Expenditure Charged 9/25/25	(c) Date(s) Credit Card Issuer Paid 11/13/25

PAYEE	(a) Payee name Office Depot	(b) Payee address; 4329 Old Bullard rd	City, Tyler	State, TX	Zip Code 75703

PURPOSE OF EXPENDITURE
☑ Political
☐ Non-Political

(a) Category (See Categories listed at the top of this schedule) **Event Expense**

(b) Description **Name tags**

(c) ☐ Check if travel outside of Texas. Complete Schedule T.   ☐ 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:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 CREDIT CARD ISSUER	Name of financial institution
	Capital One Venture

6 PAYMENT	(a) Amount Charged	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
	$18.37	9/25/25	11/13/25

7 PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code
	Walmart	6801 S. Broadway ave. Tyler TX 75703

8 PURPOSE OF EXPENDITURE
☑ Political
☐ Non-Political

(a) Category (See Categories listed at the top of this schedule)	(b) Description
Event Expense	Cash lock box

(c) ☐ Check if travel outside of Texas. Complete Schedule T.   ☐ 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	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
	$18.39	11/12/25	12/13/25

PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code
	Amazon	PO Box 81226 Seattle, WA 98108-1226

PURPOSE OF EXPENDITURE
☑ Political
☐ Non-Political

(a) Category (See Categories listed at the top of this schedule)	(b) Description
Other	e

(c) ☐ Check if travel outside of Texas. Complete Schedule T.   ☐ 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
	$360.00	11/2/25	12/13/25

PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code
	Danielle Reeves	7777 Glen America Dr. Apt 330 Dallas TX 75225

PURPOSE OF EXPENDITURE
☑ Political
☐ Non-Political

(a) Category (See Categories listed at the top of this schedule)	(b) Description
Advertising Expense	Graphic Design for website

(c) ☐ Check if travel outside of Texas. Complete Schedule T.   ☐ 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

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

SCHEDULE F4

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:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 CREDIT CARD ISSUER	Name of financial institution **Capital One Venture**

6 PAYMENT	(a) Amount Charged $5.68	(b) Date Expenditure Charged 11/17/25	(c) Date(s) Credit Card Issuer Paid 5

7 PAYEE	(a) Payee name Crema	(b) Payee address; City, State, Zip Code 2251 Three Lakes Pkwy #107 Tyler, TX 75703

8 PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/beverage Expense	(b) Description Coffee with Gravity Films
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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 $ 180.00	(b) Date Expenditure Charged 12/6/25	(c) Date(s) Credit Card Issuer Paid 1/2026

PAYEE	(a) Payee name Danielle Reeves	(b) Payee address; City, State, Zip Code 7777 Glen America Dr. Apt 330 Dallas, TX 75225

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Christmas mailer design
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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

PURPOSE OF EXPENDITURE ☐ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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
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:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 CREDIT CARD ISSUER	Name of financial Institution Capital One Venture X

6 PAYMENT	(a) Amount Charged $ 38.32	(b) Date Expenditure Charged 07/01/25	(c) Date(s) Credit Card Issuer Paid 8/13/25

7 PAYEE	(a) Payee name AT&T	(b) Payee address; City, State, Zip Code 4757 S. Broadway Ave. Tyler TX 75703

8 PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead	(b) Description Phone line
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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 $44.23	(b) Date Expenditure Charged 07/31/25	(c) Date(s) Credit Card Issuer Paid 9/4/25

PAYEE	(a) Payee name AT&T	(b) Payee address; City, State, Zip Code 4757 S. Broadway Ave. Tyler TX 75703

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead	(b) Description
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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 $ 638.40	(b) Date Expenditure Charged 8/15/25	(c) Date(s) Credit Card Issuer Paid 9/12/25

PAYEE	(a) Payee name OpenAI	(b) Payee address; City, State, Zip Code NA

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description Research Tool
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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
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:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture X

6 PAYMENT	(a) Amount Charged $ 359.01	(b) Date Expenditure Charged 8/27/25	(c) Date(s) Credit Card Issuer Paid 10/9/25

7 PAYEE	(a) Payee name Gotprint.com	(b) Payee address; 7651 N. San Fernando Rd	City, Burbank	State, CA	Zip Code 91505

8 PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Informational hand-outs

(c) ☐ Check if travel outside of Texas. Complete Schedule T.   ☐ 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 $64.59	(b) Date Expenditure Charged 8/27/25	(c) Date(s) Credit Card Issuer Paid 10/9/25

PAYEE	(a) Payee name Gotprint.com	(b) Payee address; 7651 N. San Fernando Rd	City, Burbank	State, CA	Zip Code 91505

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Informational hand-outs

(c) ☐ Check if travel outside of Texas. Complete Schedule T.   ☐ 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 $ 204.12	(b) Date Expenditure Charged 8/27/25	(c) Date(s) Credit Card Issuer Paid 10/9/25

PAYEE	(a) Payee name Sticker Mule	(b) Payee address; 336 Forest Ave.	City, Amsterdam	State, NY	Zip Code 12010

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Car magnets

(c) ☐ Check if travel outside of Texas. Complete Schedule T.   ☐ 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:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 CREDIT CARD ISSUER	Name of financial institution **Capital One Venture X**

6 PAYMENT	(a) Amount Charged **$204.12**	(b) Date Expenditure Charged **9/8/25**	(c) Date(s) Credit Card Issuer Paid **10/9/25**

7 PAYEE	(a) Payee name **Sticker Mule**	(b) Payee address; **336 Forest Ave.** City, **Amsterdam** State, **NY** Zip Code **12010**

8 PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) **Advertising Expense**	(b) Description **ar a ne s**
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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 **$118.19**	(b) Date Expenditure Charged **9/8/25**	(c) Date(s) Credit Card Issuer Paid **10/9/25**

PAYEE	(a) Payee name **Gotprint.com**	(b) Payee address; **7651 N San Fernando Rd** City, State, Zip Code **Burbank CA 91505**

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) **Printing Expense**	(b) Description **Informational hand-outs**
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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 **$3726.51**	(b) Date Expenditure Charged **9/10/25**	(c) Date(s) Credit Card Issuer Paid **10/9/25**

PAYEE	(a) Payee name **Impressive Image Works**	(b) Payee address; **2901 Teague Dr** City, **Tyler,** State, **TX** Zip Code **75701**

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) **Advertising Expense**	(b) Description **T-shirts**
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 CREDIT CARD ISSUER	Name of financial Institution **Capital One Venture X**

6 PAYMENT	(a) Amount Charged $ 90.54	(b) Date Expenditure Charged 8/27/25	(c) Date(s) Credit Card Issuer Paid 10/13/25

7 PAYEE	(a) Payee name Gotprint.com	(b) Payee address; City, State, Zip Code 7651 N. Fernando rd Burbank CA 91505

8 PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) **Advertising Expense**	(b) Description **Handouts**
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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 $	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid

PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code

PURPOSE OF EXPENDITURE ☐ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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

PURPOSE OF EXPENDITURE ☐ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 CREDIT CARD ISSUER	Name of financial institution **Capital One Venture X**

6 PAYMENT	(a) Amount Charged $70.95	(b) Date Expenditure Charged 9/11/25	(c) Date(s) Credit Card Issuer Paid 10/9/25

7 PAYEE	(a) Payee name Gotprint.com	(b) Payee address; City, State, Zip Code 7651 N. San Fernando Burbank CA 91505

8 PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) **Printing Expense**	(b) Description **Post Cards**
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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 $ 38.99	(b) Date Expenditure Charged 9/11/25	(c) Date(s) Credit Card Issuer Paid 10/9/25

PAYEE	(a) Payee name Gotprint.com	(b) Payee address; City, State, Zip Code 7651 N. San Fernando Burbank CA 91505

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) **Printing Expense**	(b) Description **Business Cards**
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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 $ 216.50	(b) Date Expenditure Charged 9/18/25	(c) Date(s) Credit Card Issuer Paid 10/9/25

PAYEE	(a) Payee name Sugarfina	(b) Payee address; City, State, Zip Code 6080 Center Dr Los Angeles CA 90303

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) **Gift Expense**	(b) Description **Thank you gifts**
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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	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:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture X

6 PAYMENT	(a) Amount Charged $179.55	(b) Date Expenditure Charged 9/18/25	(c) Date(s) Credit Card Issuer Paid 10/9/25

7 PAYEE	(a) Payee name Fastener	(b) Payee address; City, State, Zip Code 2302 Wisconsin Ave Downers Grove, IL 60515

8 PURPOSE OF EXPENDITURE
☑ Political
☐ Non-Political

(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Hardware for bumper signs
(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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 $173.20	(b) Date Expenditure Charged 9/30/25	(c) Date(s) Credit Card Issuer Paid 11/13/25

PAYEE	(a) Payee name Impressive Image Works	(b) Payee address; City, State, Zip Code 2901 Teague Dr Tyler, TX 75701

PURPOSE OF EXPENDITURE
☑ Political
☐ Non-Political

(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Thrive Signs
(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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 $2083.13	(b) Date Expenditure Charged 9/26/25	(c) Date(s) Credit Card Issuer Paid 11/13/25

PAYEE	(a) Payee name Sola Bread	(b) Payee address; City, State, Zip Code 2453 Earl Campbell pkwy Tyler, TX 75701

PURPOSE OF EXPENDITURE
☑ Political
☐ Non-Political

(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Food for Event
(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture X

6 PAYMENT	(a) Amount Charged $ 1442.00	(b) Date Expenditure Charged 10/2/25	(c) Date(s) Credit Card Issuer Paid 11/13/25

7 PAYEE	(a) Payee name SocialLily	(b) Payee address; 192 CR 4707	City, Troup	State, TX	Zip Code 75789

8 PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Social Media

(c) ☐ Check if travel outside of Texas. Complete Schedule T.   ☐ 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 $ 62.81	(b) Date Expenditure Charged 10/6/25	(c) Date(s) Credit Card Issuer Paid 11/13/25

PAYEE	(a) Payee name AT&T	(b) Payee address; PO Box 6463	City, Carol Stream	State, IL	Zip Code 60197

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead	(b) Description Phone

(c) ☐ Check if travel outside of Texas. Complete Schedule T.   ☐ 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 $69.03	(b) Date Expenditure Charged 10/2/25	(c) Date(s) Credit Card Issuer Paid 11/13/25

PAYEE	(a) Payee name Gotprint.com	(b) Payee address; 7651 San Fernando rd Burbank	City,	State, CA	Zip Code 91505

PURPOSE OF EXPENDITURE ☑ Political ☐ Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Informational hand-outs

(c) ☐ Check if travel outside of Texas. Complete Schedule T.   ☐ 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:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 CREDIT CARD ISSUER	Name of financial institution **Capital One Venture X**

6 PAYMENT	(a) Amount Charged $ 115.00	(b) Date Expenditure Charged 10/5/25	(c) Date(s) Credit Card Issuer Paid 11/13/25

7 PAYEE	(a) Payee name Smith County Republican Women	(b) Payee address; 3923 S Broadway Ave	City, Tyler	State, Zip Code TX, 75701

8 PURPOSE OF EXPENDITURE
☑ Political
☐ Non-Political

(a) Category (See Categories listed at the top of this schedule) **Advertising Expense**

(b) Description Smith Co Republican Women's lunch event

(c) ☐ Check if travel outside of Texas. Complete Schedule T.   ☐ 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 $ 424.44	(b) Date Expenditure Charged 10/23/25	(c) Date(s) Credit Card Issuer Paid 12/13/25

PAYEE	(a) Payee name Sticker Mule	(b) Payee address; 336 Forest Ave.	City, Amsterdam	State, Zip Code NY 12010

PURPOSE OF EXPENDITURE
☑ Political
☐ Non-Political

(a) Category (See Categories listed at the top of this schedule) **Advertising Expense**

(b) Description Car magnets

(c) ☐ Check if travel outside of Texas. Complete Schedule T.   ☐ 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 $ 200.00	(b) Date Expenditure Charged 10/29/29	(c) Date(s) Credit Card Issuer Paid 12/13/25

PAYEE	(a) Payee name Junior League of Tyler	(b) Payee address; 1919 S. Donnybrook	City, Tyler	State, Zip Code TX 75701

PURPOSE OF EXPENDITURE
☑ Political
☐ Non-Political

(a) Category (See Categories listed at the top of this schedule) **Advertising Expense**

(b) Description Mistletoe & Magic event

(c) ☐ Check if travel outside of Texas. Complete Schedule T.   ☐ 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
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:	2 FILER NAME John Nix	3 FILER ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	$

5 CREDIT CARD ISSUER	Name of financial institution Capital One Venture X

6 PAYMENT	(a) Amount Charged $ 487.13	(b) Date Expenditure Charged 10/29/25	(c) Date(s) Credit Card Issuer Paid 12/13/25

7 PAYEE	(a) Payee name Digital Skyrocket	(b) Payee address; PO Box 131763	City, Tyler,	State, Zip Code TX 75713

8 PURPOSE OF EXPENDITURE [✓] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Website management

(c) [ ] Check if travel outside of Texas. Complete Schedule T.   [ ] 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 $ 1272.05	(b) Date Expenditure Charged 11/2/25	(c) Date(s) Credit Card Issuer Paid 12/13/25

PAYEE	(a) Payee name SociaLily	(b) Payee address; 192 CR 4707	City, Troup	State, Zip Code TX 75789

PURPOSE OF EXPENDITURE [✓] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Social media management

(c) [ ] Check if travel outside of Texas. Complete Schedule T.   [ ] 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 $ 875.50	(b) Date Expenditure Charged 12/1/25	(c) Date(s) Credit Card Issuer Paid 1/2026

PAYEE	(a) Payee name SociaLily	(b) Payee address; 192 CR 4707	City, Troup	State, Zip Code TX 75789-7449

PURPOSE OF EXPENDITURE [✓] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Social Media management

(c) [ ] Check if travel outside of Texas. Complete Schedule T.   [ ] 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

PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule H:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
1	John Nix		

4 Date	5 Business name			
10/24/25	Nix Construction, Inc.			

6 Amount ($)	7 Business address;	City;	State;	Zip Code
$1467.79	1515 Jeff Davis Dr	Tyler	TX	75703

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Advertising Expense	Materials & labor for building and installing "Nix" bumper signs & Campaign Phone bill.

(c) ☐ Check if travel outside of Texas. Complete Schedule T.   ☐ Check if Austin, TX, officeholder living expense

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

Date	Business name			

Amount ($)	Business address;	City;	State;	Zip Code

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description

☐ Check if travel outside of Texas. Complete Schedule T.   ☐ Check if Austin, TX, officeholder living expense

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

Date	Business name			

Amount ($)	Business address;	City;	State;	Zip Code

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description

☐ Check if travel outside of Texas. Complete Schedule T.   ☐ 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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