

CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORTFORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME MS / MRS (MR) <i>Mr.</i> FIRST <i>Broadley</i> MI <i>S</i> NICKNAME <i>Tegeler</i> LAST SUFFIX		OFFICE USE ONLY Date Received <i>2/2/2026 JH</i>		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ADDRESS / PO BOX: <i>PO Box 1052</i> APT / SUITE #: <i></i> CITY: <i>Brenham</i> STATE: <i>TX</i> ZIP CODE <i>77834</i> <input type="checkbox"/> Change of Address				
5 CANDIDATE/ OFFICEHOLDER PHONE AREA CODE <i>(832)</i> PHONE NUMBER <i>715 2455</i>		Date Hand-delivered or Date Postmarked <i>2/2/2026</i>		
6 CAMPAIGN TREASURER NAME MS / MRS / MR <i>Mr.</i> FIRST <i>Robert</i> MI <i>S</i> NICKNAME <i>Stark</i> LAST SUFFIX <i>Jr</i>		Receipt # <input type="text"/> Amount \$ <input type="text"/> Date Processed <i>2/2/2026</i> Date Imaged <i>2/2/2026</i>		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business) STREET ADDRESS (NO PO BOX PLEASE): <i>708 E Tom Green</i> APT / SUITE #: <i></i> CITY: <i>Brenham</i> STATE: <i>TX</i> ZIP CODE <i>77837</i>				
8 CAMPAIGN TREASURER PHONE AREA CODE <i>(979)</i> PHONE NUMBER <i>203-5636</i>				
9 REPORT TYPE <input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)				
10 PERIOD COVERED Month <i>01</i> Day <i>01</i> Year <i>/2026</i> THROUGH Month <i>01</i> Day <i>22</i> Year <i>/2026</i>				
11 ELECTION ELECTION DATE Month <i>03</i> Day <i>03</i> Year <i>/26</i>		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/>		
12 OFFICE OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) <i>County Judge</i>		
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages		THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. 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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC		
		COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

16 C/OH NAME

Brad Tegeler

16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION
TOTALS

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

\$

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

\$ 4175

EXPENDITURE
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$

4. **TOTAL POLITICAL EXPENDITURES**

\$ 4,641 15

CONTRIBUTION
BALANCE

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

\$ 48,599 99

OUTSTANDING
LOAN TOTALS

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

\$ 45,000

18 SIGNATURE

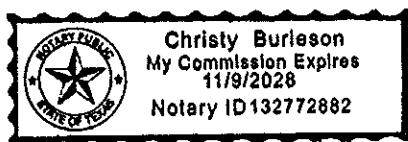
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Brad Tegeler this the 2 day of February

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

Christy Burleson

Christy Burleson

Notary

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

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

My address is _____, _____, _____, _____, _____.

(street) (city) (state) (zip code) (country)

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

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME	20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2375 ²
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1800 ⁵
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 45,000
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 4641 ¹⁵
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 4459 ⁸⁹
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: 4	
2 FILER NAME <i>Bret Tegeler</i>		3 Filer ID (Ethics Commission Filers)		
4 Date 1-16-26	5 Full name of contributor <i>Kenneth McCullough</i>	6 Contributor address; City: State: Zip Code <i>345 Stone Hill Dr Brenham TX 77831 Apt 3</i>		7 Amount of contribution (\$) <i>\$250~</i>
8 Principal occupation / Job title (See Instructions) <i>Retired</i>		9 Employer (See Instructions) <i>Retired</i>		
Date 1-14-26	Full name of contributor <i>Ashley D Gumbert</i>	□ out-of-state PAC (ID#: Contributor address; City: State: Zip Code <i>504 W Lubbock Brenham TX 77837</i>)		Amount of contribution (\$) <i>\$100~</i>
Principal occupation / Job title (See Instructions) <i>Teacher</i>		Employer (See Instructions) <i>St. Paul's Christian Day School</i>		
Date 1-09-26	Full name of contributor <i>Joseph McLean</i>	□ out-of-state PAC (ID#: Contributor address; City: State: Zip Code <i>211 E Park Ave Savannah GA 31401</i>)		Amount of contribution (\$) <i>\$250~</i>
Principal occupation / Job title (See Instructions) <i>Neonatalogist</i>		Employer (See Instructions) <i>3i</i>		
Date 1-6-26	Full name of contributor <i>Jen Klingsporn</i>	□ out-of-state PAC (ID#: Contributor address; City: State: Zip Code <i>2413 Ryan St Brenham TX 77837</i>)		Amount of contribution (\$) <i>\$100~</i>
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions) <i>Retired</i>		

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.

<p>The Instruction Guide explains how to complete this form.</p>			<p>1 Total pages Schedule A1: 4</p>
<p>2 FILER NAME <i>Bred Tegeler</i></p>			<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 Date 1-06-26</p>	<p>5 Full name of contributor <i>Virginia Geskamp</i></p>	<p><input type="checkbox"/> out-of-state PAC (ID#: _____)</p>	<p>7 Amount of contribution (\$) <i>\$100.00</i></p>
<p>6 Contributor address; <i>2200 Creekwood LN</i></p>		<p>City: <i>Brenham</i> State: <i>TX</i> Zip Code <i>77833</i></p>	
<p>8 Principal occupation / Job title (See Instructions) <i>Retired</i></p>		<p>9 Employer (See Instructions) <i>Retired</i></p>	
<p>Date 1-06-26</p>	<p>Full name of contributor <i>Lise Linden</i></p>	<p><input type="checkbox"/> out-of-state PAC (ID#: _____)</p>	<p>Amount of contribution (\$) <i>\$100.00</i></p>
<p>Contributor address; <i>4001 Hopmann</i></p>		<p>City: <i>Brenham</i> State: <i>TX</i> Zip Code <i>77831</i></p>	
<p>Principal occupation / Job title (See Instructions) <i>Retired</i></p>		<p>Employer (See Instructions) <i>Retired</i></p>	
<p>Date 1-02-26</p>	<p>Full name of contributor <i>Catherine Kenjuro</i></p>	<p><input type="checkbox"/> out-of-state PAC (ID#: _____)</p>	<p>Amount of contribution (\$) <i>\$50.00</i></p>
<p>Contributor address; <i>6675 Old Gay Hill Rd</i></p>		<p>City: <i>Brenham</i> State: <i>TX</i> Zip Code <i>77837</i></p>	
<p>Principal occupation / Job title (See Instructions) <i>Attorney</i></p>		<p>Employer (See Instructions) <i>The Kenjuro Law Firm PLLC</i></p>	
<p>Date 1-1-26</p>	<p>Full name of contributor <i>Dlyne Fergeson</i></p>	<p><input type="checkbox"/> out-of-state PAC (ID#: _____)</p>	<p>Amount of contribution (\$) <i>\$250.00</i></p>
<p>Contributor address; <i>6692 Riverstone</i></p>		<p>City: <i>Bryan</i> State: <i>TX</i> Zip Code <i>77808</i></p>	
<p>Principal occupation / Job title (See Instructions) <i>Retired</i></p>		<p>Employer (See Instructions) <i>Retired</i></p>	

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: 4
2 FILER NAME <i>Bred Tegeler</i>			3 Filer ID (Ethics Commission Filers)
4 Date <i>1-7-26</i>	5 Full name of contributor <i>Kenneth Mueller</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) <i>100 -</i>
	6 Contributor address; <i>126 FM 2679</i>	City: <i>Brenham</i> State: <i>TX</i> Zip Code <i>77831</i>	
8 Principal occupation / Job title (See Instructions) <i>Retired</i>		9 Employer (See Instructions) <i>Retired</i>	
Date <i>1-14-26</i>	Full name of contributor <i>Robert Mikuske</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>\$250 -</i>
	Contributor address; <i>1401 Victoria St</i>	City: <i>Brenham</i> State: <i>TX</i> Zip Code <i>77831</i>	
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions) <i>Retired</i>	
Date <i>1-14-26</i>	Full name of contributor <i>Jay Alexander</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>\$100 -</i>
	Contributor address; City: <i>Brenham</i> State: <i>TX</i> Zip Code <i>77831</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1-14-26</i>	Full name of contributor <i>Randy Wells</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>\$25 -</i>
	Contributor address; City: <i>Brenham</i> State: <i>TX</i> Zip Code <i>77831</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: <i>4</i>
2 FILER NAME <i>Bret Tegeler</i>			3 Filer ID (Ethics Commission Filers)
4 Date <i>1-16-26</i>	5 Full name of contributor <i>Beth Stark</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) <i>\$200</i>
	6 Contributor address; <i>Po Box 370</i>	City; <i>Chappell Hill</i> State; <i>TX</i> Zip Code <i>77426</i>	
8 Principal occupation / Job title (See Instructions) <i>Retired</i>		9 Employer (See Instructions) <i>Retired</i>	
Date <i>1-16-26</i>	Full name of contributor <i>Kerol Fletcher</i>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$) <i>\$500</i>
	Contributor address; <i>4211 Los Verdes</i>	City; <i>Posedene</i> State; <i>TX</i> Zip Code <i>77504</i>	
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions) <i>Retired</i>	
Date	Full name of contributor	<input type="checkbox"/> 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	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address;	City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

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 <i>Bred Tegeler</i>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$
5 Date 1-1-26	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ambre Construction & Property Mgmt, LLC.....)	8 Amount of Contribution \$ 1,800-/-
	7 Contributor address; City; State; Zip Code PO Box 1510 Brenham TX 77834	9 In-kind contribution description Rental space for office
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code		Amount of Contribution \$ In-kind contribution description <input type="checkbox"/> 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.		

LOANS

SCHEDULE E

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 1
2 FILER NAME <i>Bred Tegeler</i>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$45,000
5 Date of loan 10-31-25	7 Name of lender <i>Bred Tegeler</i>	8 out-of-state PAC (ID#:)
6 Is lender a financial institution? Y (N)	9 Lender address; 135 W Alamo	City; Brenham State; TX Zip Code 77833
10 Interest rate 0%		11 Maturity date 12-31-30
12 Principal occupation / Job title (See Instructions) <i>Attorney</i>		13 Employer (See Instructions) <i>Tegeler Chevrolet</i>
14 Description of Collateral		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
<input checked="" type="checkbox"/> none		
16 GUARANTOR INFORMATION		17 Name of guarantor
<input checked="" type="checkbox"/> not applicable		18 Guarantor address; City; State; Zip Code
19 Amount Guaranteed (\$)		
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan	Name of lender	Loan Amount (\$)
Is lender a financial institution? Y N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
<input type="checkbox"/> none		
GUARANTOR INFORMATION		Name of guarantor
<input type="checkbox"/> not applicable		Guarantor address; City; State; Zip Code
Amount Guaranteed (\$)		
Principal Occupation (See Instructions)		Employer (See Instructions)

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 <i>Bred Tegeler</i>	3 Filer ID (Ethics Commission Filers)	
4 Date <i>1-14-26</i>	5 Payee name <i>Ava Eckhardt</i>		
6 Amount (\$) <i>81⁰⁰</i>	7 Payee address; <i>310 N Colorado St</i>	City; <i>Burton</i>	
		State; <i>TX</i>	
		Zip Code <i>77835</i>	
<input checked="" type="checkbox"/> Check if individual's residence address.			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Food/Beverage Expense</i>	(b) Description <i>Food for office open house</i>	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date <i>1-21-26</i>	Payee name <i>Blizzerd Senior Activity Center</i>		
Amount (\$) <i>100⁰⁰</i>	Payee address; <i>1301 E Tom Green</i>	City; <i>Burton</i>	State; <i>TX</i>
		Zip Code <i>77835</i>	
<input type="checkbox"/> Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Gift Expense</i>	Description <i>Prizes for Bingo game</i>	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address;	City;	State;
		Zip Code	
<input type="checkbox"/> Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	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: 9	2 FILER NAME Brad Tegeler		3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$ 4,459.89
5 CREDIT CARD ISSUER	Name of financial institution BOA Atmos		
6 PAYMENT	(a) Amount Charged \$ 129.88	(b) Date Expenditure Charged 01/02/26	(c) Date(s) Credit Card Issuer Paid 01/02/26
7 PAYEE	(a) Payee name Amazon Marketplace	(b) Payee address; 410 Terry Ave North Seattle, WA 98109 <input type="checkbox"/> Check if individual's residence address.	City, State, Zip Code
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Solar lights for signs	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/>	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Brad Tegeler		Office Sought County Judge
PAYMENT	(a) Amount Charged \$ 24.24	(b) Date Expenditure Charged 01/02/26	(c) Date(s) Credit Card Issuer Paid 01/02/26
PAYEE	(a) Payee name KFM grocery	(b) Payee address; 31000 Hwy 36 South Brenham, TX 77833 <input type="checkbox"/> Check if individual's residence address.	City, State, Zip Code
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel in district	(b) Description Putting out signs	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/>	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Brad Tegeler		Office Sought County Judge
PAYMENT	(a) Amount Charged \$ 18.27	(b) Date Expenditure Charged 01/03/26	(c) Date(s) Credit Card Issuer Paid 01/03/26
PAYEE	(a) Payee name Amazon Marketplace	(b) Payee address; 410 Terry Ave North Seattle, WA 98109 <input type="checkbox"/> Check if individual's residence address.	City, State, Zip Code
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment	(b) Description Vehicle headlight cleaner	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/>	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought
			Office Held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	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:	9	2 FILER NAME	Brad Tegeler	3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$ 4,459.89	
5 CREDIT CARD ISSUER	Name of financial institution BOA ATMOS			
6 PAYMENT	(a) Amount Charged \$ 1,500.00	(b) Date Expenditure Charged 01/04/26	(c) Date(s) Credit Card Issuer Paid 01/04/26	
7 PAYEE	(a) Payee name WC Chamber of Commerce	(b) Payee address; 314 S. Austin	City, State, Zip Code Brenham TX 77833	<input type="checkbox"/> Check if individual's residence address.
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donations made By Candidate Table et Chamber Bangor		(b) Description	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> If direct expenditure to benefit C/OH	Candidate / Officeholder name Brad Tegeler		Office Sought County Judge	Office Held
PAYMENT	(a) Amount Charged \$ 193.90	(b) Date Expenditure Charged 01/04/26	(c) Date(s) Credit Card Issuer Paid 01/04/26	
PAYEE	(a) Payee name Office Depot	(b) Payee address; 715 Texas Ave College Station TX 77840	City, State, Zip Code	<input type="checkbox"/> Check if individual's residence address.
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other		(b) Description Office Supplies	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> If direct expenditure to benefit C/OH	Candidate / Officeholder name Brad Tegeler		Office Sought County Judge	Office Held
PAYMENT	(a) Amount Charged \$ 122.32	(b) Date Expenditure Charged 01/05/26	(c) Date(s) Credit Card Issuer Paid 01/05/26	
PAYEE	(a) Payee name Mailchimp	(b) Payee address; 405 N Angier Av	City, State, Zip Code Atlanta GA 30307	<input type="checkbox"/> Check if individual's residence address.
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Email for event in Chappell Hill	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> If direct expenditure to benefit C/OH	Candidate / Officeholder name Brad Tegeler		Office Sought County Judge	Office Held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	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:	9	2 FILER NAME Brad Tegeler	3 FILER ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$4,459.89
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5 CREDIT CARD ISSUER	Name of financial institution BOA ATMOS		
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6 PAYMENT	(a) Amount Charged \$160.21	(b) Date Expenditure Charged 01/06/26	(c) Date(s) Credit Card Issuer Paid 01/06/26
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7 PAYEE	(a) Payee name Brandit Graphics	(b) Payee address: 2507 Becker DR	City, State, Zip Code Brenham TX 77833
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8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Magenta Vehicle Sign
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Brad Tegeler		Office Sought County Judge	Office Held
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PAYMENT	(a) Amount Charged \$25.57	(b) Date Expenditure Charged 01/07/26	(c) Date(s) Credit Card Issuer Paid 01/07/26
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PAYEE	(a) Payee name Dollar Tree	(b) Payee address: 2823 Hwy 36 S	City, State, Zip Code Brenham TX 77833
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PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Bingo game prizes @ Senior Center
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Brad Tegeler		Office Sought County Judge	Office Held
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PAYMENT	(a) Amount Charged \$174.00	(b) Date Expenditure Charged 01/09/26	(c) Date(s) Credit Card Issuer Paid 01/09/26
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PAYEE	(a) Payee name Cattlemans Supply INC.	(b) Payee address: 1850 TX-105	City, State, Zip Code Brenham TX 77833
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PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description T-Posts for sign
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Brad Tegeler		Office Sought County Judge	Office Held
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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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	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: 9	2 FILER NAME Brad Tegeler		3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$ 4459 89
5 CREDIT CARD ISSUER	Name of financial institution BOA Atmos		
6 PAYMENT	(a) Amount Charged \$ 17.18	(b) Date Expenditure Charged 01/10/26	(c) Date(s) Credit Card Issuer Paid 01/10/26
7 PAYEE	(a) Payee name Shipley Do-Nuts	(b) Payee address; 200 Martin Luther King Blvd, Brenham, TX 77833 <small>Check if individual's residence address.</small>	City, State, Zip Code
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Donuts for block walking	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/>	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Brad Tegeler		Office Sought County Judge
PAYMENT	(a) Amount Charged \$ 52.24	(b) Date Expenditure Charged 01/12/26	(c) Date(s) Credit Card Issuer Paid 01/12/26
PAYEE	(a) Payee name Amazon Marketplace	(b) Payee address; 410 Terry Ave N, Seattle, WA 98109 <small>Check if individual's residence address.</small>	City, State, Zip Code
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Plates & table cloths for open house	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/>	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Brad Tegeler		Office Sought County Judge
PAYMENT	(a) Amount Charged \$ 38.97	(b) Date Expenditure Charged 01/12/26	(c) Date(s) Credit Card Issuer Paid 01/12/26
PAYEE	(a) Payee name Brandit Graphix	(b) Payee address; 2507 Becker Dr, Brenham, TX 77833 <small>Check if individual's residence address.</small>	City, State, Zip Code
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Cards - signs - stickers	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/>	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Brad Tegeler		Office Sought County Judge

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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	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:	9	2 FILER NAME	Brad Tegeler	3 FILER ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 4,459.89
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5 CREDIT CARD ISSUER	Name of financial institution BOA ATMOS		
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6 PAYMENT	(a) Amount Charged \$ 950.00	(b) Date Expenditure Charged 01/12/26	(c) Date(s) Credit Card Issuer Paid 01/12/26
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7 PAYEE	(a) Payee name Bibrell and Associates	(b) Payee address 4203 Gladeshadow Ct. Katy	City, State, Zip Code TX 77494
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Matters
<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Brad Tegeler	Office Sought County Judge	Office Held
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PAYMENT	(a) Amount Charged \$ 60.00	(b) Date Expenditure Charged 01/12/26	(c) Date(s) Credit Card Issuer Paid 01/12/26
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PAYEE	(a) Payee name Verizon Wireless	(b) Payee address 1095 Austin Ameristar	City, State, Zip Code New York City, NY 10001
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead	(b) Description Wifi for office
<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Brad Tegeler	Office Sought County Judge	Office Held
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PAYMENT	(a) Amount Charged \$ 7.96	(b) Date Expenditure Charged 01/13/26	(c) Date(s) Credit Card Issuer Paid 01/13/26
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PAYEE	(a) Payee name HEB #414	(b) Payee address 2508 S Hwy St	City, State, Zip Code Brenham TX 77833
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead	(b) Description Notebook + dry erase markers
<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Brad Tegeler	Office Sought County Judge	Office Held
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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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	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:	9	2 FILER NAME <i>Brad Tegeler</i>	3 FILER ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 4,459.89
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5 CREDIT CARD ISSUER	Name of financial institution <i>BOA Atmos</i>		
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6 PAYMENT	(a) Amount Charged <i>\$ 14.00</i>	(b) Date Expenditure Charged <i>01/13/26</i>	(c) Date(s) Credit Card Issuer Paid <i>01/13/26</i>
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7 PAYEE	(a) Payee name <i>Walgreens #10944</i>	(b) Payee address; <i>24115 Day St.</i>	City, State, Zip Code <i>Brenham TX 77833</i>
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8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) <i>Office Overhead</i>	(b) Description <i>Office Supplies - Pins, Pens</i>
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	(c) <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> If direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Brad Tegeler</i>	Office Sought <i>County Judge</i>	Office Held
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PAYMENT	(a) Amount Charged <i>\$ 111.46</i>	(b) Date Expenditure Charged <i>01/13/26</i>	(c) Date(s) Credit Card Issuer Paid <i>01/13/26</i>
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PAYEE	(a) Payee name <i>Walmart Supercenter #321</i>	(b) Payee address; <i>203 US Loop 1 Hwy 290 E</i>	City, State, Zip Code <i>Brenham TX 77833</i>
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PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) <i>Office Overhead</i>	(b) Description <i>Paper & Printer Ink</i>
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	(c) <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> If direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Brad Tegeler</i>	Office Sought <i>County Judge</i>	Office Held
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PAYMENT	(a) Amount Charged <i>\$ 116.95</i>	(b) Date Expenditure Charged <i>01/19/26</i>	(c) Date(s) Credit Card Issuer Paid <i>01/19/26</i>
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PAYEE	(a) Payee name <i>Gather N Grace</i>	(b) Payee address; <i>2701 Cypress Cir.</i>	City, State, Zip Code <i>Brenham TX 77837</i>
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PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) <i>Donations made by candidate</i>	(b) Description <i>Ticket to event</i>
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	(c) <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> If direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Brad Tegeler</i>	Office Sought <i>County Judge</i>	Office Held
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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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	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 9 SCHEDULE F4:	2 FILER NAME <i>Brad Tegeler</i>	3 FILER ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 4,459.89
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5 CREDIT CARD ISSUER	Name of financial institution <i>BOA Atmos</i>		
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6 PAYMENT	(a) Amount Charged <i>\$ 351.90</i>	(b) Date Expenditure Charged <i>01/19/26</i>	(c) Date(s) Credit Card Issuer Paid <i>6/1/19/26</i>
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7 PAYEE	(a) Payee name <i>Laramie messaging</i>	(b) Payee address: <i>3731 pecan ct. manvel</i>	City, State, Zip Code <i>TX 77578</i>
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8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) <i>Advertising expense</i>	(b) Description <i>Text messaging</i>
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(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 <i>Brad Tegeler</i>	Office Sought <i>County Judge</i>	Office Held
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PAYMENT	(a) Amount Charged <i>\$ 138.16</i>	(b) Date Expenditure Charged <i>01/19/26</i>	(c) Date(s) Credit Card Issuer Paid <i>01/19/26</i>
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PAYEE	(a) Payee name <i>Walmart Supercenter #321</i>	(b) Payee address: <i>203 US Loop, Hwy 290 E</i>	City, State, Zip Code <i>Brenham TX 77833</i>
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PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) <i>Office overhead</i>	(b) Description <i>Printer ink, paper office supplies</i>
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(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 <i>Brad Tegeler</i>	Office Sought <i>County Judge</i>	Office Held
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PAYMENT	(a) Amount Charged <i>\$ 100.00</i>	(b) Date Expenditure Charged <i>01/21/26</i>	(c) Date(s) Credit Card Issuer Paid <i>01/21/26</i>
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PAYEE	(a) Payee name <i>Washington County Wild</i>	(b) Payee address: <i>1305 E Blue Bell</i>	City, State, Zip Code <i>Brenham TX 77833</i>
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PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) <i>Donations made by Candidate</i>	(b) Description <i>Tickets to event</i>
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(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 <i>Brad Tegeler</i>	Office Sought <i>County Judge</i>	Office Held
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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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	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 <i>Brad Tegeler</i>	3 FILER ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 4459.89
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5 CREDIT CARD ISSUER	Name of financial institution <i>BUS Atmos</i>		
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6 PAYMENT	(a) Amount Charged <i>\$ 56.30</i>	(b) Date Expenditure Charged <i>01/21/26</i>	(c) Date(s) Credit Card Issuer Paid <i>01/21/26</i>
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7 PAYEE	(a) Payee name <i>Mannuels Mexican Restaurant</i>	(b) Payee address; City, State, Zip Code <i>409 W Main St Brenham TX 77833</i>
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8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) <i>Food/Beverage</i>	(b) Description <i>Meeting with County residents</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Brad Tegeler</i>	
	Office Sought <i>County Judge</i>	Office Held

PAYMENT	(a) Amount Charged <i>\$</i>	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
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PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code
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PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	
	Office Sought	Office Held

PAYMENT	(a) Amount Charged <i>\$</i>	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
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PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code
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PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> 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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	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:	9	2 FILER NAME <i>Brad Tegeler</i>	3 FILER ID (Ethics Commission filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 4459.89
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5 CREDIT CARD ISSUER	Name of financial institution <i>Chase - World of Hyatt</i>		
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6 PAYMENT	(a) Amount Charged <i>\$ 96.32</i>	(b) Date Expenditure Charged <i>1-18-26</i>	(c) Date(s) Credit Card Issuer Paid <i>1-18-26</i>
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7 PAYEE	(a) Payee name <i>VistaPrint</i>	(b) Payee address; <i>95 Hayden</i>	City, State, Zip Code <i>Lexington MA 02421</i>
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8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) <i>Printing Expense</i>	(b) Description <i>Business Cards</i>
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	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
--	---	---

9 Complete <u>ONLY</u> If direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Brad Tegeler</i>		Office Sought <i>Courtney Judy</i>	Office Held
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PAYMENT	(a) Amount Charged <i>\$</i>	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
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PAYEE	(a) Payee name	(b) Payee address;	City, State, Zip Code
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PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description
--	--	-----------------

	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
--	---	---

Complete <u>ONLY</u> If direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
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PAYMENT	(a) Amount Charged <i>\$</i>	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
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PAYEE	(a) Payee name	(b) Payee address;	City, State, Zip Code
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PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description
--	--	-----------------

	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
--	---	---

Complete <u>ONLY</u> If direct expenditure to benefit C/OH	Candidate / Officeholder name		Office Sought	Office Held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



AFFIDAVIT FOR CANDIDATE OR OFFICEHOLDER: ELECTRONIC FILING EXEMPTION

An exemption affidavit must be submitted with each paper report.

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

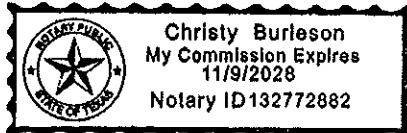
Filer name <i>Bradley Tegeler</i>	Filer ID #
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OFFICE USE ONLY	
Date Received <i>2/2/2026 JG</i>	
Date Hand-delivered or Date Postmarked <i>2/2/2026</i>	
Receipt #	Amount \$
Date Processed <i>2/2/2026</i>	
Date Imaged <i>2/2/2026</i>	

1. I swear or affirm that I have not accepted more than \$34,890 in political contributions or made more than \$34,890 in political expenditures in a calendar year.
2. I further swear or affirm that I do not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
3. I further swear or affirm that no person acting as my agent or consultant, and no person with whom I contract, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
4. I further swear or affirm that I understand that I am required to file my campaign finance reports electronically if I, my agent or consultant, or a person with whom I contract exceeds \$34,890 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
5. I am filing this affidavit with the Finance Report report due on 2/2/2026. I understand that this affidavit is required to be filed with each campaign finance report for which I am claiming an exemption from electronic filing.

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Signature of Filer

Sworn to and subscribed before me by Brad Tegeler this the 2 day of February.

20 2026, to certify which, witness my hand and seal of office.

Christy Burleson

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 _____, _____, _____, _____, _____, _____, _____.

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

Signature of Filer (Declarant)

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