

# 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:  
25

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR FIRST MI  
Mr. David L  
NICKNAME LAST SUFFIX  
Renshaw

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
P.O. Box 21 Greenville TX 75403-0021

☐ Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE PHONE NUMBER EXTENSION  
( 903 ) 454-6050

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR FIRST MI  
Mrs. Lesley V  
NICKNAME LAST SUFFIX  
Brown

7 CAMPAIGN  
TREASURER  
ADDRESS  
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
2900 Lee St Ste 102 Greenville TX 75401

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE PHONE NUMBER EXTENSION  
( 903 ) 454-6050

9 REPORT TYPE

☒ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (Officeholder Only)  
☐ July 15 ☐ 8th day before election ☐ Exceeded Modified Reporting Limit ☐ Final Report (Attach C/OH - FR)

10 PERIOD  
COVERED

Month Day Year Month Day Year  
07 / 01 / 2025 THROUGH 12 / 31 / 2025

11 ELECTION

ELECTION DATE ELECTION TYPE  
Month Day Year ☒ Primary ☐ Runoff ☐ Other Description  
03 / 03 / 2026 ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Hunt County Court at Law No 1

14 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

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

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME  
David Renshaw

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)	\$ 5,100.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,400.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$
	4.	TOTAL POLITICAL EXPENDITURES	\$ 12,377.11
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 4,022.89
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 10,000.00

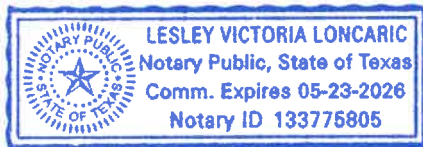
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*David Renshaw*

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by David Renshaw this the 14 day of January

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

*Lesley Loncaric*  
Signature of officer administering oath

Lesley Loncaric  
Printed name of officer administering oath

Notary Public  
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  
David Renshaw

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,400.00
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/>	SCHEDULE E: LOANS	\$ 10,000.00
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 12,377.11
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
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.

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1 <b>5</b>
<b>2</b> FILER NAME <b>David Renshaw</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>7/22/2025</b>	<b>5</b> Full name of contributor <b>Dianne Gilby</b> <input type="checkbox"/> out-of-state PAC (ID# _____) <b>6</b> Contributor address; City; State; Zip Code <b>2813 Lee St Greenville TX 75401</b>	<b>7</b> Amount of contribution (\$) <b>500.00</b>
<b>8</b> Principal occupation / Job title (See Instructions) <b>Business Owner</b>		<b>9</b> Employer (See Instructions)
<b>Date</b> <b>8/20/202</b>	<b>Full name of contributor</b> <b>Jennifer Esqueda</b> <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Contributor address; City; State; Zip Code</b> <b>5517 Meadowbrook Dr. Greenville TX 75402</b>	<b>Amount of contribution (\$)</b> <b>300.00</b>
<b>Principal occupation / Job title (See Instructions)</b> <b>Business Owner</b>		<b>Employer (See Instructions)</b>
<b>Date</b> <b>10/04/2025</b>	<b>Full name of contributor</b> <b>Marie Renshaw</b> <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Contributor address; City; State; Zip Code</b> <b>1800 Trailview Dr. Terrell TX 75160</b>	<b>Amount of contribution (\$)</b> <b>1,000.00</b>
<b>Principal occupation / Job title (See Instructions)</b> <b>Retired</b>		<b>Employer (See Instructions)</b>
<b>Date</b> <b>10/10/2025</b>	<b>Full name of contributor</b> <b>David Lewis</b> <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Contributor address; City; State; Zip Code</b> <b>P.O. Box 617 Terrell TX 75160</b>	<b>Amount of contribution (\$)</b> <b>200.00</b>
<b>Principal occupation / Job title (See Instructions)</b> <b>Attorney</b>		<b>Employer (See Instructions)</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> 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 <b>5</b>
2 FILER NAME <b>David Renshaw</b>		3 Filer ID (Ethics Commission Filer)
4 Date <b>10/22/2025</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <b>Lauren Hudgeons</b> 6 Contributor address; City; State; Zip Code <b>2508 Eastland Ave., Ste 102 Greenville TX 75402</b>	7 Amount of contribution (\$) <b>250.00</b>
8 Principal occupation / Job title (See Instructions) <b>Attorney</b>		9 Employer (See Instructions) <b>Hudgeons Law Firm, PLLC</b>
Date <b>10/28/2025</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <b>Allen Wallen</b> Contributor address; City; State; Zip Code <b>4501 FM 2947 Greenville TX 75402</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See Instructions) <b>Contractor</b>		Employer (See Instructions) <b>A W Construction</b>
Date <b>11/02/2025</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <b>Tim Stainback</b> Contributor address; City; State; Zip Code <b>611 Mink Dr. Greenville TX 75401</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See Instructions) <b>Business Owner</b>		Employer (See Instructions)
Date <b>11/04/2025</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <b>Kevin Weatherly</b> Contributor address; City; State; Zip Code <b>1108 Whitehall Lane Greenville TX 75402</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions) <b>Psychologist</b>		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> 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.

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages (Schedule A1) <b>5</b>
<b>2</b> FILER NAME <b>David Renshaw</b>		<b>3</b> Filer ID (Ethics Commission Filer)
<b>4</b> Date <b>11/04/2025</b>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Tina Montoya</b> <b>6</b> Contributor address; City; State; Zip Code <b>3021 Ridge Rd., Ste 16 Rockwall TX 75087</b>	<b>7</b> Amount of contribution (\$) <b>100.00</b>
<b>8</b> Principal occupation / Job title (See Instructions) <b>Lawyer</b>		<b>9</b> Employer (See Instructions)
<b>Date</b> <b>11/04/2025</b>	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Rodney Lawson</b> <b>Contributor address; City; State; Zip Code</b> <b>4952 E State Hwy 243 Kaufman TX 75142</b>	<b>Amount of contribution (\$)</b> <b>200.00</b>
<b>Principal occupation / Job title (See Instructions)</b> <b>Business Owner</b>		<b>Employer (See Instructions)</b>
<b>Date</b> <b>11/07/2025</b>	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Holly Gotcher</b> <b>Contributor address; City; State; Zip Code</b> <b>2610 Stonewall St. Greenville TX 75401</b>	<b>Amount of contribution (\$)</b> <b>500.00</b>
<b>Principal occupation / Job title (See Instructions)</b> <b>Attorney</b>		<b>Employer (See Instructions)</b> <b>Law Offices of Morgan &amp; Gotcher</b>
<b>Date</b> <b>11/14/2025</b>	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Chad Sipe</b> <b>Contributor address; City; State; Zip Code</b> <b>3211 E 2090 Rd. Hogo OK 74743</b>	<b>Amount of contribution (\$)</b> <b>100.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> <b>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</b>		

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1  
**5****2** FILER NAME

David Renshaw

**3** Filer ID (Ethics Commission Filers)**4** Date

11/20/2025

**5** Full name of contributor

Cary Harwell

☐ out-of-state PAC (ID# \_\_\_\_\_)**7** Amount of contribution (\$)

500.00

**6** Contributor address

P.O. Box 480

City;

Terrell

State;

TX

Zip Code

75160

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

Date

11/20/2025

Full name of contributor

Stephanie DeFord

☐ out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

50.00

Contributor address;

1581 County Crest Dr.

City;

Waxahachie TX 75165

State; Zip Code

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)

Date

12/11/2025

Full name of contributor

Erleigh Norville Wiley

☐ out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

250.00

Contributor address;

P.O. Box 68

City;

Kaufman TX 75142

State; Zip Code

Principal occupation / Job title (See Instructions)  
District AttorneyEmployer (See Instructions)  
Kaufman County District Attorney Office

Date

12/11/2025

Full name of contributor

Charlie Phillips

☐ out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

500.00

Contributor address;

2301 Virginia Pkwy.

City;

McKinney TX 75071

State; Zip Code

Principal occupation / Job title (See Instructions)  
Attorney

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: <b>5</b>
2 FILER NAME <b>David Renshaw</b>		3 Filer ID# (Ethics Commission Form)
4 Date <b>12/16/2025</b>	5 Full name of contributor <b>Michelle Payne</b> <input type="checkbox"/> out-of-state PAC (ID# _____) 6 Contributor address: City: State: Zip Code <b>3339 Neola Road Greenville TX 75402</b>	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See Instructions) <b>Business Owner</b>		9 Employer (See Instructions) <b>Play With a Purpose Pediatric Therapy</b>
Date <b>12/16/2025</b>	Full name of contributor <b>Chris Cronin</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address: City: State: Zip Code <b>414 Wyndemere Blvd. Heath TX 75032</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions) <b>Banker</b>		Employer (See Instructions) <b>The American National Bank of Texas</b>
Date <b>12/30/2025</b>	Full name of contributor <b>Laquita Marshall</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address: City: State: Zip Code <b>P.O. Box 37 Simms TX 75574</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See Instructions) <b>Real Estate Agent</b>		Employer (See Instructions) <b>Century 21</b>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address: City: State: Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> 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.

<b>The Instruction Guide explains how to complete this form.</b>				1 Total pages Schedule E <b>2</b>	
2 FILER NAME <b>David Renshaw</b>				3 Filer ID (Ethics Commission File#)	
4 TOTAL OF UNITEMIZED LOANS				\$	
5 Date of loan <b>11/11/2025</b>		7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) <b>David Renshaw</b>		9 Loan Amount (\$) <b>5,000.00</b>	
6 Is lender a financial institution? <b>Y</b> <input checked="" type="checkbox"/> <b>N</b>		8 Lender address; City; State; Zip Code <b>9808 Belmont Place Greenville TX 75402</b>		10 Interest rate	
				11 Maturity date	
12 Principal occupation / Job title (See Instructions) <b>Attorney</b>			13 Employer (See Instructions)		
14 Description of Collateral <input checked="" type="checkbox"/> none			15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)		
16 GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable		17 Name of guarantor  18 Guarantor address; City; State; Zip Code		19 Amount Guaranteed (\$)	
20 Principal Occupation (See Instructions)			21 Employer (See Instructions)		
Date of loan <b>11/25/2025</b>		Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) <b>David Renshaw</b>		Loan Amount (\$) <b>1,000.00</b>	
Is lender a financial institution? <b>Y</b> <input checked="" type="checkbox"/> <b>N</b>		Lender address; City; State; Zip Code <b>9808 Belmont Place Greenville TX 75402</b>		Interest rate	
				Maturity date	
Principal occupation / Job title (See Instructions) <b>Attorney</b>			Employer (See Instructions)		
Description of Collateral <input checked="" type="checkbox"/> none			<input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)		
GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable		Name of guarantor  Guarantor address; City; State; Zip Code		Amount Guaranteed (\$)	
Principal Occupation (See Instructions)			Employer (See Instructions)		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If lender 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.

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E 2
<b>2</b> FILER NAME David Renshaw		<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> TOTAL OF UNITEMIZED LOANS		\$
<b>5</b> Date of loan 12/26/2025	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (04) David Renshaw	<b>9</b> Loan Amount (\$) 3,500.00
<b>6</b> Is lender a financial Institution? Y <input checked="" type="checkbox"/> N	<b>8</b> Lender address: City: State: Zip Code 9808 Belmont Place Greenville TX 75402	<b>10</b> Interest rate
		<b>11</b> Maturity date
<b>12</b> Principal occupation / Job title (See Instructions) Attorney		<b>13</b> Employer (See Instructions)
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> none		<b>15</b> <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
<b>16</b> GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address City: State: Zip Code	
<b>20</b> Principal Occupation (See Instructions)		<b>21</b> Employer (See Instructions)
Date of loan 12/26/2025	Name of lender <input type="checkbox"/> out-of-state PAC (04) David Renshaw	Loan Amount (\$) 500.00
Is lender a financial Institution? Y <input checked="" type="checkbox"/> N	Lender address: City: State: Zip Code 9808 Belmont Place Greenville TX 75402	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> none		<input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
<b>GUARANTOR INFORMATION</b>  <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address: City: State: Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If lender is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
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

Secretary/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 15	2 FILER NAME David Renshaw	3 Filer ID (Ethics Commission Filers)
4 Date 07/02/2025	5 Payee name Troy Brakefield	
6 Amount (\$) 200.00	7 Payee address: 2608 Eastland St, Ste 105 <input type="checkbox"/> Check if individual's residence address	City: Greenville State: TX Zip Code: 75402
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Graphic Design
	(c) <input type="checkbox"/> Check if travel outside of Texas (Complete Schedule F) <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 Hunt County Court at Law No 1	
Date 007/08/2025	Payee name Delux Checks	
Amount (\$) 7.05	Payee address: 16505 W 113th Street <input type="checkbox"/> Check if individual's residence address	City: Lenexa State: KS Zip Code: 66219
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Checks
	<input type="checkbox"/> Check if travel outside of Texas (Complete Schedule F) <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 08/26/2025	Payee name United States Postmaster	
Amount (\$) 15.60	Payee address: 2600 Wesley St. <input type="checkbox"/> Check if individual's residence address	City: Greenville State: TX Zip Code: 75401-9994
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Other- Postage	Description Stamps
	<input type="checkbox"/> Check if travel outside of Texas (Complete Schedule F) <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

# 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/Contributor Modified  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage/Refreshment  
Gifts/Wards/Memorials Expense  
Legal Services

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

Subscription/Printing Expense  
Transportation/Equipment & Repair Expense  
Travel In-District  
Travel Out of District  
Other (attach a category not listed below)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1 15		2 FILER NAME David Renshaw		3 Filer ID (Ethics Commission Filers)	
4 Date 09/02/2025		5 Payee name Vista Print			
6 Amount (\$) 224.07		7 Payee address, City: Lexington State: MA Zip Code			
		<input type="checkbox"/> Check if individual's residence address			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Stickers/ Buttons		
	(c) <input type="checkbox"/> Check if travel outside of Texas (Complete Schedule F)		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Hunt County Court at Law No 1			
Date 09/02/2025		Payee name Lake Printing			
Amount (\$) 148.84		Payee address; City: Greenville State: TX Zip Code 75401			
		<input type="checkbox"/> Check if individual's residence address			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description Business Cards		
	<input type="checkbox"/> Check if travel outside of Texas (Complete Schedule F)		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Hunt County Court at Law No 1			
Date 09/18/2025		Payee name Lake Printing			
Amount (\$) 138.02		Payee address; City: Greenville State: TX Zip Code 75401			
		<input type="checkbox"/> Check if individual's residence address			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description Business Cards		
	<input type="checkbox"/> Check if travel outside of Texas (Complete Schedule F)		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Hunt County Court at Law No 1			

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Cost of Political

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Award/Memorabilia Expense  
Legal Services

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

Scholarship/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Cost (If District)  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1 15		2 FILER NAME David Renshaw		3 Filer ID (Ethics Commission Filers)	
4 Date 10/01/2025		5 Payee name East Texas Print Shop			
6 Amount (\$) 162.37		7 Payee address; 2218 Lee St		City; Greenville	State; TX Zip Code 75401
8 <b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description T-shirts	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule F <input type="checkbox"/> Check if Applicant, TX, officeholder, living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Hunt County Court at Law No 1			
Date 10/01/2025		Payee name Lake Printing			
Amount (\$) 324.64		Payee address; 2314 Lee Street		City; Greenville	State; TX Zip Code 75401
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Advertising Expense		Description Business Cards and Car Door Magnets	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule F <input type="checkbox"/> Check if Applicant, TX, officeholder, living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Hunt County Court at Law No 1			
Date 10/02/2025		Payee name Greenville Trophies			
Amount (\$) 97.42		Payee address; 2900 Eastland Ave.		City; Greenville	State; TX Zip Code 75402
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Advertising Expense		Description	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule F <input type="checkbox"/> Check if Applicant, TX, officeholder, living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Hunt County Court at Law No 1			

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Candidate's 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

Subscriptions/Printing Expense  
Transportation/Equipment & Related Expense  
Travel In District  
Travel Out Of District  
(Other: please specify category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1 <b>15</b>		<b>2</b> FILER NAME <b>David Renshaw</b>		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date <b>10/14/2025</b>		<b>5</b> Payee name <b>East Texas Print Shop</b>			
<b>6</b> Amount (\$) <b>162.38</b>		<b>7</b> Payee address, <b>221 Lee St.</b>		<b>City:</b> <b>Greenville</b>	<b>State:</b> <b>TX</b>
				<b>Zip Code</b> <b>75401</b>	
		<input type="checkbox"/> Check if individual's residence address			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  <b>Advertising Expense</b>		<b>(b)</b> Description  <b>T-shirts</b>		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule F		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
		<b>Candidate / Officeholder name</b> <b>Hunt County Court at Law No 1</b>		<b>Office sought</b>	<b>Office held</b>
<b>Date</b> <b>10/21/2025</b>		<b>Payee name</b> <b>Amazon</b>			
<b>Amount (\$)</b> <b>54.11</b>		<b>Payee address:</b> <b>P.O. Box 81226</b>		<b>City:</b> <b>Seattle</b>	<b>State:</b> <b>WA</b>
				<b>Zip Code</b> <b>98108-1226</b>	
		<input type="checkbox"/> Check if individual's residence address			
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule)  <b>Advertising Expense</b>		<b>Description</b>  <b>Acrylic Display Stands for Push cards &amp; Cards</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule F		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>					
		<b>Candidate / Officeholder name</b>		<b>Office sought</b>	<b>Office held</b>
<b>Date</b> <b>10/21/2025</b>		<b>Payee name</b> <b>Lake Printing</b>			
<b>Amount (\$)</b> <b>405.09</b>		<b>Payee address:</b> <b>2314 Lee St.</b>		<b>City:</b> <b>Greenville</b>	<b>State:</b> <b>TX</b>
				<b>Zip Code</b> <b>75401</b>	
		<input type="checkbox"/> Check if individual's residence address			
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule)  <b>Advertising Expense</b>		<b>Description</b>  <b>Business Cards &amp; Push Cards</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule F		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>					
		<b>Candidate / Officeholder name</b> <b>Hunt County Court at Law No 1</b>		<b>Office sought</b>	<b>Office held</b>

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Bookkeeping Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Direct Cash 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 category not listed above)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1 15	2 FILER NAME <b>David Renshaw</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>10/21/2025</b>	5 Payee name <b>Staples</b>
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6 Amount (\$) <b>32.48</b>	7 Payee address: <b>6834 Wesley St., Ste D</b>	City: <b>Greenville</b>	State: <b>TX</b>	Zip Code <b>75402</b>
<input type="checkbox"/> Check if individual's residence address				

8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <b>Banner</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule F. <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 <b>Hunt County Court at Law No 1</b>	Office sought	Office held
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Date <b>10/21/2025</b>	Payee name <b>Amazon</b>
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Amount (\$) <b>21.63</b>	Payee address: <b>P.O. Box 81226</b>	City: <b>Seattle</b>	State: <b>WA</b>	Zip Code <b>98108-1226</b>
<input type="checkbox"/> Check if individual's residence address				

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Event Expense</b>	Description <b>Ziplock Baggies for Halloween on the Square</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule F. <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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Date <b>10/22/2025</b>	Payee name <b>Anedot</b>
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Amount (\$) <b>10.30</b>	Payee address: <b>3723 Greenville Ave., Ste 41002</b>	City: <b>Dallas</b>	State: <b>TX</b>	Zip Code <b>75206-5311</b>
<input type="checkbox"/> Check if individual's residence address				

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Fees</b>	Description <b>Processing Fee for donation from Lauren Hudgeons</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule F. <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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# 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 for Political Committee  
Credit Card Payment

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

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

Substitution/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.

<b>1</b> Total pages: Schedule F1 15	<b>2</b> FILER NAME David Renshaw		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 10/23/2025	<b>5</b> Payee name Walmart			
<b>6</b> Amount (\$) 155.62	<b>7</b> Payee address; 7401 Interstate Hwy 30		City; Greenville	State; TX
			Zip Code 75402	
<input type="checkbox"/> Check if individual's residence address.				
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense		<b>(b)</b> Description Candy for Halloween on the Square	
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Applicable TX, officeholder living expense			
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate / Officeholder name				
Office sought				
Office held				
Date 10/23/2025	Payee name Lake Printing			
Amount (\$) 138.02	Payee address; 2314 Lee St.		City; Greenville	State; TX
			Zip Code 75401	
<input type="checkbox"/> Check if individual's residence address.				
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description Business Cards	
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Applicable TX, officeholder living expense			
<b>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</b>				
Candidate / Officeholder name				
Office sought				
Office held				
Hunt County Court at Law No 1				
Date 10/26/2025	Payee name Amazon			
Amount (\$) 20.55	Payee address; P.O. Box 81226		City; Seattle	State; WA
			Zip Code 98108-1226	
<input type="checkbox"/> Check if individual's residence address.				
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense		<b>(b)</b> Description Ziplock Bags for Halloween	
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Applicable TX, officeholder living expense			
<b>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</b>				
Candidate / Officeholder name				
Office sought				
Office held				

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Award/Memorabilia Expense  
Legal Services

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

Sign/Station/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 15		2 FILER NAME David Renshaw		3 Filer ID (Ethics Commission Filers)	
4 Date 10/30/2025		5 Payee name Lake Printing			
6 Amount (\$) 138.02		7 Payee address: 2314 Lee St.		City: Greenville	State: TX
				Zip Code 75401	
		<input type="checkbox"/> Check if individual's residence address			
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Business Cards/ Push Cards		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T				
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit COH					
Candidate / Officeholder name Hunt County Court at Law No 1					
Office sought Office held					
Date 11/07/2025		Payee name Anedot			
Amount (\$) 16.90		Payee address: 3723 Greenville Ave., Ste 41002		City: Dallas	State: TX
				Zip Code 75206-5311	
		<input type="checkbox"/> Check if individual's residence address			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description Processing Fee for 3 donations		
	<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 COH					
Candidate / Officeholder name					
Office sought					
Office held					
Date 11/08/2025		Payee name Republican Party of Hunt County, Texas			
Amount (\$) 1,500.00		Payee address: 2606 Lee St.		City: Greenville	State: TX
				Zip Code 75401	
		<input type="checkbox"/> Check if individual's residence address			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Polling Expense		Description Filing Fee		
	<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 COH					
Candidate / Officeholder name					
Office sought					
Office held					
Hunt County Court at Law No 1					

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
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.

<b>1</b> Total pages Schedule F1 15	<b>2</b> FILER NAME David Renshaw	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/11/2025	<b>5</b> Payee name Greenville Herald Banner	
<b>6</b> Amount (\$) 360.00	<b>7</b> Payee address: City: State: Zip Code 2305 King St. Greenville TX 75403 <input type="checkbox"/> Check if individual's residence address	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description Advertising
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule F <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Office sought: Office held: Hunt County Court at Law No 1		
Date 11/12/2025	Payee name TeesToGo	
Amount (\$) 2,517.36	Payee address: City: State: Zip Code 2805 Mitchell St., Ste 702 Greenville TX 75402 <input type="checkbox"/> Check if individual's residence address	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Signs - down payment
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule F <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: Hunt County Court at Law No 1		
Date 11/12/2025	Payee name Amazon	
Amount (\$) 93.05	Payee address: City: State: Zip Code P.O. Box 81226 Seattle WA 98108-1226 <input type="checkbox"/> Check if individual's residence address	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Sign Supplies- zip ties, ect.
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule F <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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# 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 Expenses  
Contributions/Donations Made By:  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expenses  
Fees  
Fund-Bridging Expenses  
Gift Awards/Memorials Expenses  
Legal Services

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

Subscription/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (List all categories not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1  
15

2 FILER NAME  
David Renshaw

3 Filer ID (Ethics Commission Filers)

4 Date  
11/14/2025

5 Payee name  
Anedot

6 Amount (\$)  
4.30

7 Payee address; City; State; Zip Code  
3723 Greenville Ave., Ste 41002 Dallas TX 75206-5311  
☐ Check if individual's residence address

8  
PURPOSE  
OF  
EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)  
Fees

(b) Description  
Processing Fee for Chad Sipe

(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  
11/14/2025

Payee name  
Anedot

Amount (\$)  
22.60

Payee address; City; State; Zip Code  
3723 Greenville Ave., Ste 41002 Dallas TX 75206-5311  
☐ Check if individual's residence address

PURPOSE  
OF  
EXPENDITURE

Category (See Categories listed at the top of this schedule)  
Fees

Description  
Processing Fee for 2 donations

☐ 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  
11/20/2025

Payee name  
Hunt County Voter Administration

Amount (\$)  
9.20

Payee address; City; State; Zip Code  
2217 A Washington Greenville TX 75401  
☐ Check if individual's residence address

PURPOSE  
OF  
EXPENDITURE

Category (See Categories listed at the top of this schedule)  
Printing Expense

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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# 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  
Transportation/Officeholder/Political Committee  
Grant/Gate Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Award/Memorial Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rent/Utilities  
Polling Expense  
Printing Expense  
Smoke/Waves/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1  
15

2 FILER NAME  
David Renshaw

3 Filer ID (Ethics Commission Filer)

4 Date  
11/21/2025

5 Payee name  
TeesToGo

6 Amount (\$)  
2,861.58

7 Payee address;  
2805 Mitchell St, Ste 702

City;  
Greenville

State;  
TX

Zip Code  
75402

☐ Check if individual's residence address

8 PURPOSE OF EXPENDITURE

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

(b) Description  
Signs- balance of first order

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

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name  
Hunt County Court at Law No 1

Office sought  
Office held

Date  
11/25/2025

Payee name  
Hunt County Theft Reports

Amount (\$)  
800.00

Payee address;  
1009 Chesnut Lane

City;  
Cooper

State;  
TX

Zip Code  
75423

☐ Check if individual's residence address

PURPOSE OF EXPENDITURE

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

Description  
Advertising

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

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name  
Hunt County Court at Law No 1

Office sought  
Office held

Date  
12/11/2025

Payee name  
Chris Miles - Hunt County Theft Reports

Amount (\$)  
93.00

Payee address;  
1009 Chesnut Lane

City;  
Greenville

State;  
TX

Zip Code  
75432

☐ Check if individual's residence address

PURPOSE OF EXPENDITURE

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

Description  
Advertising

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

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name  
Office sought  
Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
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 15		2 FILER NAME David Renshaw		3 Filer ID (Ethics Commission Filers)	
4 Date 12/19/2025		5 Payee name Texas Secretary of State			
6 Amount (\$) 5.14		7 Payee address: P.O. Box 13697		City: Austin	State: TX
				Zip Code 78711-3697	
		<input type="checkbox"/> Check if individual's residence address			
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Information Report Request		
	(c) <input type="checkbox"/> Check if travel outside of Texas (Complete Schedule F) <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 12/21/2025		Payee name Home Depot			
Amount (\$) 43.21		Payee address; 7101 Center Point Lane		City: Greenville	State: TX
				Zip Code 75402	
		<input type="checkbox"/> Check if individual's residence address			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Sign Rack Supplies		
	<input type="checkbox"/> Check if travel outside of Texas (Complete Schedule F) <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 12/21/2025		Payee name Home Depot			
Amount (\$) 65.39		Payee address; 7101 Center Point Lane		City: Greenville	State: TX
				Zip Code 75402	
		<input type="checkbox"/> Check if individual's residence address			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Sign Rack Supplies		
	<input type="checkbox"/> Check if travel outside of Texas (Complete Schedule F) <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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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1 <b>15</b>		2. FILER NAME <b>David Renshaw</b>		3. Filer ID (Ethics Commission Filer)	
4. Date <b>12/23/2025</b>		5. Payee name <b>Tractor Supply</b>			
6. Amount (\$) <b>464.40</b>		7. Payee address: <b>8210 Wesley St.</b>		City: <b>Greenville</b>	State: <b>TX</b>
		<input type="checkbox"/> Check if individual's residence address		Zip Code <b>75402</b>	
8. PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>		(b) Description <b>T-Post for signs (100)</b>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule F.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	9. Complete ONLY if direct expenditure to benefit C/OH				
Candidate / Officeholder name		Office sought		Office held	
Date <b>12/23/2025</b>		Payee name <b>Home Depot</b>			
Amount (\$) <b>25.42</b>		Payee address: <b>7101 Center Point Lane</b>		City: <b>Greenville</b>	State: <b>TX</b>
		<input type="checkbox"/> Check if individual's residence address		Zip Code <b>75402</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>		Description <b>Sign Rack Supplies</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule F.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	10. Complete ONLY if direct expenditure to benefit C/OH				
Candidate / Officeholder name		Office sought		Office held	
Date <b>12/23/2025</b>		Payee name <b>Amazon</b>			
Amount (\$) <b>19.47</b>		Payee address: <b>P.O. Box 81226</b>		City: <b>Seattle</b>	State: <b>WA</b>
		<input type="checkbox"/> Check if individual's residence address		Zip Code <b>98108-1226</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>		Description <b>12" Plastic Zip Ties</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule F.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	11. Complete ONLY if direct expenditure to benefit C/OH				
Candidate / Officeholder name		Office sought		Office held	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Campaigning Expense  
Contributions/Donations Made By  
Candidate's Officeholder/Political Committee  
Cash Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorabilia 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 (define category and item above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1 <b>15</b>	2 FILER NAME <b>David Renshaw</b>	3 Filer ID (Ethics Commission Files)		
4 Date <b>12/23/2025</b>	5 Payee name <b>Amazon</b>			
6 Amount (\$) <b>19.44</b>	7 Payee address; <b>P.O. Box 81226</b>	City; <b>Seattle</b>	State; <b>WA</b>	Zip Code <b>98108-1226</b>
<input type="checkbox"/> Check if individual's residence address				
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>		(b) Description <b>18" Plastic Zip Ties</b>	
	(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 <b>12/25/2025</b>	Payee name <b>Chris Miles - Hunt County Theft Reports</b>			
Amount (\$) <b>625.00</b>	Payee address; <b>1009 Chesnut Lane</b>	City; <b>Cooper</b>	State; <b>TX</b>	Zip Code <b>75432</b>
<input type="checkbox"/> Check if individual's residence address				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>		Description <b>Advertising</b>	
	<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 <b>Hunt County Court at Law No 1</b>				
Office sought				
Office held				
Date <b>12/26/2025</b>	Payee name <b>Walmart</b>			
Amount (\$) <b>25.09</b>	Payee address; <b>7401 Interstate Hwy 30</b>	City; <b>Greenville</b>	State; <b>TX</b>	Zip Code <b>75402</b>
<input type="checkbox"/> Check if individual's residence address				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>		Description <b>Sign Rack Supplies</b>	
	<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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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Conventions/Conferences Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gifts/Awards/Memorable Expense  
Legal Services

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

Signage/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 15	2 FILER NAME David Renshaw	3 Filer ID (Ethics Commission Filers)
4 Date 12/29/2025	5 Payee name Chris Miles - Hunt County Theft Reports	
6 Amount (\$) 275.00	7 Payee address: 1009 Chesnut Lane <input type="checkbox"/> Check if individual's residence address	City: Cooper State: TX Zip Code: 75432
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Advertising
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule F <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit COH	Candidate / Officeholder name Hunt County Court at Law No 1	Office sought Office held
Date 12/29/2025	Payee name Amazon	
Amount (\$) 19.44	Payee address: P.O. Box 81226 <input type="checkbox"/> Check if individual's residence address	City: Seattle State: WA Zip Code: 98108-1226
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description 18" Plastic Zip Ties
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule F <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit COH	Candidate / Officeholder name	Office sought Office held
Date 12/31/2025	Payee name Walmart	
Amount (\$) 13.77	Payee address: 7401 Interstate Hwy 30 <input type="checkbox"/> Check if individual's residence address	City: Greenville State: TX Zip Code: 75402
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Sign Holder Supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule F <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit COH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Grants/Charitable Payment

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

Loan Repayment/Reimbursement  
Office Overhead/Rent/Utilities 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.

<b>1</b> Total pages Schedule F1 15	<b>2</b> FILER NAME David Renshaw	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/31/2025	<b>5</b> Payee name Devon Storage	
<b>6</b> Amount (\$) 28.10	<b>7</b> Payee address: City: State: Zip Code 6017 Interstate 30 Greenville TX 75402 <input type="checkbox"/> Check if individual's residence address	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Sign Storage Boxes
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 12/31/2025	Payee name Home Depot	
Amount (\$) 14.04	Payee address: City: State: Zip Code 7101 Center Point Lane Greenville TX 75402 <input type="checkbox"/> Check if individual's residence address	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	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		
Date	Payee name	
Amount (\$)	Payee address: City: State: Zip Code <input type="checkbox"/> Check if individual's residence address	
<b>PURPOSE OF EXPENDITURE</b>	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		

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