CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers) 00091178	**2** Total pages filed: 18		**OFFICE USE ONLY**
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST: Jeffery	MI
	NICKNAME	LAST: Bowen	SUFFIX
4 ORIGINAL REPORT TYPE	☐ January 15 ☐ July 15 ☐ 30th day before election ☒ 8th day before election	☐ Runoff ☐ Exceeded modified reporting limit ☐ 15th day after campaign treasurer appointment (officeholder only) ☐ Final Report (Attach C/OH-FR)	☐ Other (specify)
5 ORIGINAL PERIOD COVERED	Month Day Year: 10/01/2026	THROUGH	Month Day Year: 10/24/2026

Date Received: ELECTRONICALLY FILED 11/02/2026

Date Hand-delivered or Date Postmarked:

Receipt #: Amount:

Date Processed:

Date Imaged:

6 EXPLANATION OF CORRECTION

An amount was placed in the "UNITEMIZED TRANSACTIONS". This amount should have been $0.0 versus the previous amount. The amount entered was previously reported in previous reports.

7 AFFIDAVIT

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

Check the box next to any and all applicable statements:

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

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

Jeffery Bowen

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of_____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

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

1 Filer ID (Ethics Commission Filers): 00091178

2 Total pages filed: 18

OFFICE USE ONLY

Date Received: ELECTRONICALLY FILED 11/02/2026

Date Hand-delivered or Date Postmarked:

Receipt #:

Amount:

Date Processed:

Date Imaged:

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR:

FIRST: Jeffery

MI:

NICKNAME:

LAST: Bowen

SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE

8404 Caspian Drive

Austin, TX 78749

5 CAMPAIGN TREASURER NAME

MS / MRS / MR:

FIRST: Jeffery L.

MI:

NICKNAME:

LAST: Bowen

SUFFIX:

6 CAMPAIGN TREASURER ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

8404 Caspian Drive

Austin , TX 78749

7 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(512) 280-8640

8 REPORT TYPE

- ☐ January 15
- ☐ July 15
- ☐ 30th day before election
- ☒ 8th day before election
- ☐ Runoff
- ☐ Exceeded modified reporting limit
- ☐ 15th day after campaign treasurer appointment (officeholder only)
- ☐ Final Report (Attach C/OH-FR)

9 PERIOD COVERED

Month Day Year: 10/01/2026 THROUGH Month Day Year: 10/24/2026

10 ELECTION

ELECTION DATE

Month Day Year: 11/03/2026

ELECTION TYPE

- ☐ Primary
- ☒ General
- ☐ Runoff
- ☐ Special
- ☐ Other

11 OFFICE

OFFICE HELD (if any): None Place Austin District 8 Travis

12 OFFICE SOUGHT (if known): Council Member, District 8

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

13 C / OH NAME	Bowen, Jeffery	**14** Filer ID (Ethics Commission Filers)	00091178

15 NOTICE FROM POLITICAL COMMITTEE(S)

☐ 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

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	**$** 0.00
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	**$** 8,870.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	**$** 0.00
	4.	**TOTAL POLITICAL EXPENDITURES**	**$** 13,599.47
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	**$** 13,875.53
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	**$** 30,000.00

17 AFFADAVIT

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.

Jeffery Bowen

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of_____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering | Printed name of officer administering | Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

18 FILER NAME	**19** Filer ID (Ethics Commission Filers)
Bowen, Jeffery	00091178

20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	[X]	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	**$** 8,870.00
2.	[ ]	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	**$**
3.	[ ]	SCHEDULE B: PLEDGED CONTRIBUTIONS	**$**
4.	[ ]	SCHEDULE E: LOANS	**$**
5.	[X]	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	**$** 13,169.75
6.	[ ]	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	**$**
7.	[ ]	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	**$**
8.	[X]	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	**$** 429.72
9.	[ ]	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	**$**
10.	[ ]	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	**$**
11.	[ ]	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	**$**
12.	[ ]	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	**$**

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 1/11 Rpt: 5/18

2 FILER NAME: Bowen, Jeffery

3 Filer ID (Ethics Commission Filers): 00091178

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:)	**7** Amount of Contribution ($)
10/03/2026	ALBRIGHT, DUFFY	$100.00
	6 Contributor address; City; State; Zip Code: 8513 BARASINGA TRAIL, AUSTIN, TX 78749	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
RETIRED	NONE

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/07/2026	ALTANERO, TIMOTHY	$100.00
	Contributor address; City; State; Zip Code: 4701 RED STONE CT, AUSTIN, TX 78739	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
PROFESSOR	N/A

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/13/2026	BERRY, RITA	$10.00
	Contributor address; City; State; Zip Code: 5414 WOLF RUN, AUSTIN, TX 78749	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
RETIRED	NONE

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/02/2026	BRATCHER, MARY	$50.00
	Contributor address; City; State; Zip Code: 6103 OLIVER LOVING TRAIL, AUSTIN, TX 78749	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
RETIRED	NONE

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/09/2026	BRIENZI, FRANK	$500.00
	Contributor address; City; State; Zip Code: 3813 AGAPE LANE, AUSTIN, TX 78735	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
SOFTWARE / EXEC	SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 2/11 Rpt: 6/18

2 FILER NAME: Bowen, Jeffery

3 Filer ID (Ethics Commission Filers): 00091178

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
10/09/2026	BRIENZI, KIMBERLY	$500.00
	6 Contributor address; City; State; Zip Code: 3813 AGAPE LANE, AUSTIN, TX 78735	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
HOME MAKER	NONE

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/02/2026	CLARK, GAYLE	$300.00
	Contributor address; City; State; Zip Code: 6004 ELEOS CIRCLE, AUSTIN, TX 78735	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
RETIRED	NONE

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/01/2026	DAVISCOURT, PAMELA	$100.00
	Contributor address; City; State; Zip Code: 5833 TERRAVISTA DRIVE, AUSTIN, TX 78735	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
RETIRED	NONE

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/02/2026	DORMAN, TERRI	$50.00
	Contributor address; City; State; Zip Code: 12304 LOSTWOOD CIRCLE, AUSTIN, TX 78748	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
RETIRED	NONE

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/19/2026	DOUGLASS, CARY	$50.00
	Contributor address; City; State; Zip Code: 6109 GINITA LANE, AUSTIN, TX 78739	

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 3/11 Rpt: 7/18

2 FILER NAME: Bowen, Jeffery

3 Filer ID (Ethics Commission Filers): 00091178

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____) / **6** Contributor address; City; State; Zip Code	**7** Amount of Contribution ($)
10/05/2026	DUNCAN, BRYANT J 6000 SHEPHERD MNT #1018 AUSTIN, TX 78730	$500.00

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
10/18/2026	EVANS, STAN 5106 SPLIT CEDAR COVE AUSTIN, TX 78735	$50.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
RETIRED	NONE

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
10/10/2026	FAUST, SARAH 2324 WESTROCK DRIVE AUSTIN, TX 78704	$150.00

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
10/03/2026	FLEDLER, LYDIA 6415 CLAIRMOUNT DRIVE AUSTIN, TX 78749	$500.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
RETIRED	NONE

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
10/15/2026	FRIEDMAN, JEFF 3500 JEFFERSON STE110 AUSTIN, TX 78731	$100.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
BUSINESS OWNER	SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 4/11 Rpt: 8/18

2 FILER NAME: Bowen, Jeffery

3 Filer ID (Ethics Commission Filers): 00091178

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:)	**7** Amount of Contribution ($)
10/15/2026	GALLUM, SUSAN	$30.00
	6 Contributor address; City; State; Zip Code: 5500 VAN WINKLE LANE, AUSTIN, TX 78739	

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

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/07/2026	GORE, DEBRA	$300.00
	Contributor address; City; State; Zip Code: 4825 EAGLE FEATHER DR, AUSTIN, TX 78735	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
RETIRED / TEACHER	NONE

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/07/2026	GORE, REX	$300.00
	Contributor address; City; State; Zip Code: 4825 EAGLE FEATHER DR, AUSTIN, TX 78735	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
BUSINESS MANAGER	SELF

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/15/2026	GORMAN, STEVEN	$100.00
	Contributor address; City; State; Zip Code: 4609 LYONS ROAD, AUSTIN, TX 78702	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
RETIRED	NONE

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/19/2026	HARRIS , L.C.	$100.00
	Contributor address; City; State; Zip Code: 1718 AGGIE LANE, AUSTIN, TX 78757	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
RETIRED	NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 5/11 Rpt: 9/18

2 FILER NAME: Bowen, Jeffery

3 Filer ID (Ethics Commission Filers): 00091178

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:)	**7** Amount of Contribution ($)
10/18/2026	HEETDERKS-COX, JANE	$50.00
	6 Contributor address; City; State; Zip Code: 7520 BRECOURT MANOR WAY, AUSTIN, TX 78739	

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

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/05/2026	HONG, YING	$350.00
	Contributor address; City; State; Zip Code: 7602 CALLBRAM LANE, AUSTIN, TX 78736	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
RETIRED	NONE

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/02/2026	INGELS, KIRK	$500.00
	Contributor address; City; State; Zip Code: 1308 BRIANS MEADOWS CV, AUSTIN, TX 78746	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
INSURANCE AGENT	SELF

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/01/2026	KINKADE, MIKKI	$50.00
	Contributor address; City; State; Zip Code: 5124 CRYSTAL WATER DRIVE, AUSTIN, TX 78735	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
HOME MAKER	NONE

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/22/2026	KOZUH, KAREL	$250.00
	Contributor address; City; State; Zip Code: 4303 KNOB OAK LANE, AUSTIN, TX 78735	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
PRINCIPAL	Violet Crown Management

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 6/11 Rpt: 10/18

2 FILER NAME: Bowen, Jeffery

3 Filer ID (Ethics Commission Filers): 00091178

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:)	**7** Amount of Contribution ($)
10/07/2026	LEE, STEVEN	$100.00
	6 Contributor address; City; State; Zip Code: 5609 TERRAVISTA DRIVE, AUSTIN, TX 78735	

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

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/01/2026	LUCA, FRANCOISE	$250.00
	Contributor address; City; State; Zip Code: 1512 GARNAAS, AUSTIN, TX 78758	

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

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/06/2026	LYONS, LISA	$50.00
	Contributor address; City; State; Zip Code: 10804 REDMON COVE, AUSTIN, TX 78739	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
CONTRACT MANAGER	SELF

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/12/2026	MAY, MARK	$100.00
	Contributor address; City; State; Zip Code: 2007 BLUEBONNET, AUSTIN, TX 78704	

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

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/06/2026	MCALISTER, RHONDA	$100.00
	Contributor address; City; State; Zip Code: 7600 CALLBRAM LANE, AUSTIN, TX 78736	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
HOMEMAKER	NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 7/11 Rpt: 11/18

2 FILER NAME: Bowen, Jeffery

3 Filer ID (Ethics Commission Filers): 00091178

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:)	**7** Amount of Contribution ($)
10/17/2026	MCBRIDE, ROBERT	$400.00
	6 Contributor address; City; State; Zip Code: 5720 LOMITA VERDE CIRCLE, AUSTIN, TX 78749	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
RETIRED	NONE

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/20/2026	MCDERMOTT, MATTHEW	$250.00
	Contributor address; City; State; Zip Code: 4805 CAYONWOOD DRIVE, AUSTIN, TX 78735	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
PRODUCTION MANAGER	SELF

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/23/2026	MCPERSON, MATTHEW	$100.00
	Contributor address; City; State; Zip Code: 12304 BUVANA DR, AUSTIN, TX 78739	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
SALES MANAGER	SELF

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/08/2026	MILLONZI, OLLIE	$50.00
	Contributor address; City; State; Zip Code: 4202 PALACIOS CV, AUSTIN, TX 78749	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
RETIRED	NONE

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/19/2026	MITCHELL, KIRK	$500.00
	Contributor address; City; State; Zip Code: 2802 ROCK WAY, AUSTIN, TX 78746	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
SECURITIES INVESTMENT	SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 8/11 Rpt: 12/18

2 FILER NAME: Bowen, Jeffery

3 Filer ID (Ethics Commission Filers): 00091178

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
10/01/2026	MORE, JANETTE	$100.00
	6 Contributor address; City; State; Zip Code: 6308 SHADOW MOUNTAIN DR AUSTIN, TX 78731	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
RETIRED	NONE

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/10/2026	NEFF, JASON	$20.00
	Contributor address; City; State; Zip Code: 7419 WHISTLESTOP DRIVE AUSTIN, TX 78749	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/05/2026	PARSONS, BRAD	$10.00
	Contributor address; City; State; Zip Code: 3506 GREYSTONE DRIVE AUSTIN, TX 78731	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
RETIRED	NONE

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/12/2026	PENA, JULIE	$100.00
	Contributor address; City; State; Zip Code: 12300 LOSTWOOD CIRCLE AUSTIN, TX 78748	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
INSURANCE BROKER	SELF

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/20/2026	PERLISKI, BLANCHE	$20.00
	Contributor address; City; State; Zip Code: 7216 LOOKOUT BLUFF AUSTIN, TX 78735	

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 9/11 Rpt: 13/18

2 FILER NAME: Bowen, Jeffery

3 Filer ID (Ethics Commission Filers): 00091178

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
10/01/2026	ROBERTSON, CARLA	$100.00
	6 Contributor address; City; State; Zip Code: 10417 BRIMFIELD DRIVE, AUSTIN, TX 78726	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/19/2026	RUSSELL, ERIC	$100.00
	Contributor address; City; State; Zip Code: 1509 BARN SWALLOW DRIVE, AUSTIN, TX 78746	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
RETIRED	NONE

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/06/2026	SAALE, LEE	$100.00
	Contributor address; City; State; Zip Code: 5901 TAYLORCREST DRIVE, AUSTIN, TX 78749	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
PROJECT COORDINATOR	SELF

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/07/2026	SHIELD, PATRICK	$25.00
	Contributor address; City; State; Zip Code: 7109 GENTLE OAKS DR, AUSTIN, TX 78749	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
RETIRED	NONE

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
10/20/2026	SVATEK, JASON	$100.00
	Contributor address; City; State; Zip Code: 8021 COBBLESTONE, AUSTIN, TX 78735	

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 10/11 Rpt: 14/18

2 FILER NAME: Bowen, Jeffery

3 Filer ID (Ethics Commission Filers): 00091178

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:)	**7** Amount of Contribution ($)
10/17/2026	TANZER, JOSH	$100.00
	6 Contributor address; City; State; Zip Code: 3722 SWEET OLIVE, SAN ANTONIO, TX 78261	

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

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/17/2026	TANZER, KELLY	$100.00
	Contributor address; City; State; Zip Code: 3722 SWEET OLIVE, SAN ANTONIO, TX 78261	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
PARA LEGAL	CHILREN'S HOSPITAL

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/08/2026	TERRESON, DAVID	$200.00
	Contributor address; City; State; Zip Code: 3812 AGAPE LANE, AUSTIN, TX 78735	

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

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/08/2026	TERRESON, PAM	$200.00
	Contributor address; City; State; Zip Code: 3812 AGAPE LANE, AUSTIN, TX 78735	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
HOME MAKER	NONE

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/18/2026	TYLER, CATHERINE	$100.00
	Contributor address; City; State; Zip Code: 8900 CASTLE ARCH COURT, AUSTIN, TX 78749	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
RETIRED	NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 11/11 Rpt: 15/18

2 FILER NAME: Bowen, Jeffery

3 Filer ID (Ethics Commission Filers): 00091178

4 Date	**5** Full name of contributor / out-of-state PAC (ID#:)	**7** Amount of Contribution ($)
10/01/2026	WALTHER, JEFF	$50.00
	6 Contributor address; City; State; Zip Code: 8107 HILLRISE DRIVE, AUSTIN, TX 78759	

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

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/13/2026	WELLMAN, MICHAEL	$30.00
	Contributor address; City; State; Zip Code: 4923 TRAIL WEST DRIVE, AUSTIN, TX 78735	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
RETIRED	NONE

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/20/2026	WELLMAN, MICHAEL	$25.00
	Contributor address; City; State; Zip Code: 4923 TRAIL WEST DRIVE, AUSTIN, TX 78735	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
RETIRED	NONE

Date	Full name of contributor / out-of-state PAC (ID#:)	Amount of Contribution ($)
10/01/2026	WILCOX, CYNTHIA	$400.00
	Contributor address; City; State; Zip Code: 4925 TRAIL WEST DRIVE, Austin, TX 78735	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	NONE

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/2 Rpt: 16/18	Bowen, Jeffery	00091178

4 Date	5 Payee name
10/23/2026	AUSTIN PRINTING & MAILING

6 Amount ($)	7 Payee address; City; State; Zip Code
$200.00	6906 GUADALUPE ST #307 AUSTIN , TX 78752

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

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

Date	Payee name
10/02/2026	AUSTIN PRINTING & MAILING

Amount ($)	Payee address; City; State; Zip Code
$200.00	6906 GUADALUPE ST #307 AUSTIN , TX 78752

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

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

Date	Payee name
10/02/2026	CIVIC

Amount ($)	Payee address; City; State; Zip Code
$10,000.00	4211 Brandywine St NW Washington, DC 20016-4527

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Advertising Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Text & Data Services

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/2 Rpt: 17/18	Bowen, Jeffery	00091178

4 Date	5 Payee name
10/13/2026	IHEART MEDIA

6 Amount ($)	7 Payee address; City; State; Zip Code
$2,499.99	5001 PLAZA ON THE LAKE STE 105 AUSTIN , TX 78746

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Advertising Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense RADIO ADS ON POD CAST

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

Date	Payee name
10/24/2026	SQUARE

Amount ($)	Payee address; City; State; Zip Code
$269.76	1955 Broadway Oakland, CA 94612

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Solicitation/Fundraising Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense CREDIT CARD FEES PAID AT TIME OF CONTRIBUTION

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

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/1 Rpt: 18/18	**2** FILER NAME Bowen, Jeffery		**3** Filer ID (Ethics Commission Filers) 00091178
4 CREDIT CARD ISSUER	Name of financial institution	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**
6 PAYMENT	(a) Amount Charged $121.09	(b) Date of Charge 10/07/2026	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name AMAZON		(b) Payee address; City, State, Zip Code TX
8 PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description YARD SIGN STAKES 125 METAL STAKES
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT	(a) Amount Charged $308.63	(b) Date of Charge 10/01/2026	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Texas Campaign for the		(b) Payee address; City, State, Zip Code 8627 North MoPac Expressway Suite 250 Austin, TX 78759
PURPOSE OF EXPENDITURE [X] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Texas Campaign for the Environment event
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		[ ] Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held