

# 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: **9**

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR

FIRST

MI

Mr

Rodney

L

NICKNAME

LAST

SUFFIX

Rod

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX

APT / SUITE #

CITY

STATE

ZIP CODE

Kountze, TX

77625

Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

( )

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

FIRST

MI

Mr

Michael

C

NICKNAME

LAST

SUFFIX

Mike

Boone

7 CAMPAIGN  
TREASURER  
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE)

APT / SUITE #

CITY

STATE

ZIP CODE

Kountze

TX

77625

(Residence or Business)

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

( )

9 REPORT TYPE

☐ January 15

☐ 30th day before election

☐ Runoff

☐ 15th day after campaign  
treasurer appointment  
(Officeholder Only)

☒ July 15

☐ 8th day before election

☐ Exceeded Modified  
Reporting Limit

☐ Final Report (Attach C/OH - FR)

10 PERIOD  
COVERED

Month

Day

Year

Month

Day

Year

2

24

26

THROUGH

7

15

26

11 ELECTION

ELECTION DATE

Month

Day

Year

11

3

26

ELECTION TYPE

☐ Primary

☐ Runoff

☐ Other  
Description

☒ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

Justice of the Peace Pct. 3

13 OFFICE SOUGHT (if known)

Justice of the Peace Pct. 3

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

TREPAC/Texas Realtors Political Action Committee

☒ GENERAL

COMMITTEE ADDRESS

PO Box 2246, Austin, Tx 78768-2246

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

Leslie Cantu

COMMITTEE CAMPAIGN TREASURER ADDRESS

PO Box 2246, Austin, Tx 78768-2246

Additional Pages

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

|                                         |                                                                                                                                       |                                               |
|-----------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|
| <b>15 C/OH NAME</b><br>Rodney L. Ousley |                                                                                                                                       | <b>16 Filer ID</b> (Ethics Commission Filers) |
| <b>17 CONTRIBUTION TOTALS</b>           | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ 0.00                                       |
|                                         | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)                                                  | \$ 2,500.00                                   |
| <b>EXPENDITURE TOTALS</b>               | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE                                                                                             | \$ 0.00                                       |
|                                         | 4. TOTAL POLITICAL EXPENDITURES                                                                                                       | \$ 3,322.10                                   |
| <b>CONTRIBUTION BALANCE</b>             | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD                                                    | \$ 100.00                                     |
| <b>OUTSTANDING LOAN TOTALS</b>          | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD                                         | \$ 0.00                                       |

**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.

*Rodney L. Ousley*  
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Rodney L. Ousley this the 15th day of July, 2020, to certify which, witness my hand and seal of office.  
Brandi Stutts Brandi Stutts Notary  
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_

My address is \_\_\_\_\_  
 (street) (city) (state) (zip code) (country)

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

Signature of Candidate/Officeholder (Declarant)

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3****19 FILER NAME****Rodney L. Ousley****20 Filer ID (Ethics Commission Filers)****21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE****SUBTOTAL  
AMOUNT**

|     |                                                                                    |             |
|-----|------------------------------------------------------------------------------------|-------------|
| 1.  | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                      | \$ 2,500.00 |
| 2.  | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                        | \$ 0.00     |
| 3.  | SCHEDULE B: PLEDGED CONTRIBUTIONS                                                  | \$ 0.00     |
| 4.  | SCHEDULE E: LOANS                                                                  | \$ 0.00     |
| 5.  | SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS              | \$ 2,839.70 |
| 6.  | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                           | \$ 0.00     |
| 7.  | SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS             | \$ 0.00     |
| 8.  | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                      | \$ 0.00     |
| 9.  | SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS                        | \$ 482.40   |
| 10. | SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH        | \$ 0.00     |
| 11. | SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS           | \$ 0.00     |
| 12. | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ 0.00     |

**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>1</b>           |
| 2 FILER NAME<br><b>Rodney L. Ousley</b>                                                                                                                               |                                                                                                                                                                                                           | 3 Filer ID (Ethics Commission Filers)         |
| 4 Date<br><b>05/26/2026</b>                                                                                                                                           | 5 Full name of contributor out-of-state PAC (ID# _____)<br><b>TREPAC/Texas Association of Realtors P.A.C</b><br>6 Contributor address: City: State: Zip Code<br><b>PO Box 2246, Austin, Tx 78768-2246</b> | 7 Amount of contribution (\$) <b>2,500.00</b> |
| 8 Principal occupation / Job title (See Instructions)<br><b>N/A</b>                                                                                                   |                                                                                                                                                                                                           | 9 Employer (See Instructions)<br><b>N/A</b>   |
| Date                                                                                                                                                                  | Full name of contributor out-of-state PAC (ID# _____)<br>Contributor address: City: State: Zip Code                                                                                                       | Amount of contribution (\$)                   |
| Principal occupation / Job title (See Instructions)                                                                                                                   |                                                                                                                                                                                                           | Employer (See Instructions)                   |
| Date                                                                                                                                                                  | Full name of contributor out-of-state PAC (ID# _____)<br>Contributor address: City: State: Zip Code                                                                                                       | Amount of contribution (\$)                   |
| Principal occupation / Job title (See Instructions)                                                                                                                   |                                                                                                                                                                                                           | Employer (See Instructions)                   |
| Date                                                                                                                                                                  | Full name of contributor out-of-state PAC (ID# _____)<br>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><br>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements. |                                                                                                                                                                                                           |                                               |

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

|                                                                     |                                                                                                                                                  |                                                |
|---------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br><b>1</b>                       | <b>2</b> FILER NAME<br><b>Rodney L. Ousley</b>                                                                                                   | <b>3</b> Filer ID (Ethics Commission Filers)   |
| <b>4</b> Date<br><b>07/13/2026</b>                                  | <b>5</b> Payee name<br><b>Rodney L. Ousley</b>                                                                                                   |                                                |
| <b>6</b> Amount (\$)<br><b>2,839.70</b>                             | <b>7</b> Payee address, City, State, Zip Code<br>P.O. Box 835 Kountze, Texas 77625<br><small>Check if individual's residence address.</small>    |                                                |
| <b>8</b><br><br><b>PURPOSE<br/>OF<br/>EXPENDITURE</b>               | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br><b>Loan Repayment/Reimbursement</b>                                   | <b>(b) Description</b><br><b>Reimbursement</b> |
|                                                                     | <b>(c)</b> <small>Check if travel outside of Texas. Complete Schedule T</small> <small>Check if Austin, TX, officeholder living expense</small>  |                                                |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name: <b>Rodney L. Ousley</b><br>Office sought: <b>Justice of the Peace</b><br>Office held: <b>Justice of the Peace</b> |                                                |
| Date                                                                | Payee name                                                                                                                                       |                                                |
| Amount (\$)                                                         | Payee address, City, State, Zip Code<br><small>Check if individual's residence address.</small>                                                  |                                                |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                               | <b>Category</b> (See Categories listed at the top of this schedule)                                                                              | <b>Description</b>                             |
|                                                                     | <small>Check if travel outside of Texas. Complete Schedule T</small> <small>Check if Austin, TX, officeholder living expense</small>             |                                                |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate / Officeholder name<br>Office sought<br>Office held                                                                                    |                                                |
| Date                                                                | Payee name                                                                                                                                       |                                                |
| Amount (\$)                                                         | Payee address, City, State, Zip Code<br><small>Check if individual's residence address.</small>                                                  |                                                |
| <b>PURPOSE<br/>OF<br/>EXPENDITURE</b>                               | <b>Category</b> (See Categories listed at the top of this schedule)                                                                              | <b>Description</b>                             |
|                                                                     | <small>Check if travel outside of Texas. Complete Schedule T</small> <small>Check if Austin, TX, officeholder living expense</small>             |                                                |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate / Officeholder name<br>Office sought<br>Office held                                                                                    |                                                |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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 G:<br><b>1 of 4</b>                                                                               |                                                                                                          | <b>2</b> FILER NAME<br><b>Rodney L. Ousley</b>                                                                   |                                                                 | <b>3</b> Filer ID (Ethics Commission Filers)        |                             |
| <b>4</b> Date<br><b>02/23/2026</b>                                                                                              |                                                                                                          | <b>5</b> Payee name<br><b>Walmart</b>                                                                            |                                                                 |                                                     |                             |
| <b>6</b> Amount (\$)<br><b>27.94</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended |                                                                                                          | <b>7</b> Payee address;<br><b>100 North LHS Drive</b><br><small>Check if individual's residence address.</small> |                                                                 | City, State, Zip Code<br><b>Lumberton, Tx 77657</b> |                             |
| <b>8</b><br><b>PURPOSE OF EXPENDITURE</b>                                                                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule):<br><b>Food/Beverage Expense</b> |                                                                                                                  | <b>(b)</b> Description<br><b>Food For Campaign Workers</b>      |                                                     |                             |
|                                                                                                                                 | <b>(c)</b> <small>Check if travel outside of Texas. Complete Schedule T.</small>                         |                                                                                                                  | <small>Check if Austin, TX, officeholder living expense</small> |                                                     |                             |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                                             |                                                                                                          | Candidate / Officeholder name<br><b>Rodney L. Ousley</b>                                                         |                                                                 | Office sought                                       | Office held<br><b>JP #3</b> |
| Date<br><b>02/24/2026</b>                                                                                                       |                                                                                                          | Payee name<br><b>Popeyes Kitchen</b>                                                                             |                                                                 |                                                     |                             |
| Amount (\$)<br><b>21.65</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          |                                                                                                          | Payee address;<br><b>108 S LHS Drive</b><br><small>Check if individual's residence address.</small>              |                                                                 | City, State, Zip Code<br><b>Lumberton Tx 77657</b>  |                             |
| <b>PURPOSE OF EXPENDITURE</b>                                                                                                   | Category (See Categories listed at the top of this schedule):<br><b>Food/Beverage Expense</b>            |                                                                                                                  | Description<br><b>Food for Campaign Workers</b>                 |                                                     |                             |
|                                                                                                                                 | <small>Check if travel outside of Texas. Complete Schedule T.</small>                                    |                                                                                                                  | <small>Check if Austin, TX, officeholder living expense</small> |                                                     |                             |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                                                      |                                                                                                          | Candidate / Officeholder name<br><b>Rodney L. Ousley</b>                                                         |                                                                 | Office sought                                       | Office held<br><b>JP #3</b> |
| Date<br><b>02/24/2026</b>                                                                                                       |                                                                                                          | Payee name<br><b>Subway</b>                                                                                      |                                                                 |                                                     |                             |
| Amount (\$)<br><b>13.73</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          |                                                                                                          | Payee address;<br><b>325 N Main</b><br><small>Check if individual's residence address.</small>                   |                                                                 | City, State, Zip Code<br><b>Lumberton, Tx 77657</b> |                             |
| <b>PURPOSE OF EXPENDITURE</b>                                                                                                   | Category (See Categories listed at the top of this schedule):<br><b>Food/Beverage Expense</b>            |                                                                                                                  | Description<br><b>Food for Campaign Workers</b>                 |                                                     |                             |
|                                                                                                                                 | <small>Check if travel outside of Texas. Complete Schedule T.</small>                                    |                                                                                                                  | <small>Check if Austin, TX, officeholder living expense</small> |                                                     |                             |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                                                      |                                                                                                          | Candidate / Officeholder name<br><b>Rodney L. Ousley</b>                                                         |                                                                 | Office sought                                       | Office held<br><b>JP#3</b>  |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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 G:<br><b>2 of 4</b>                                                                               |                                                                                                          | <b>2</b> FILER NAME<br><b>Rodney L. Ousley</b>                                                                                                     |                                                                 | <b>3</b> Filer ID (Ethics Commission Filers) |                             |
| <b>4</b> Date<br><b>02/26/2026</b>                                                                                              |                                                                                                          | <b>5</b> Payee name<br><b>Subway</b>                                                                                                               |                                                                 |                                              |                             |
| <b>6</b> Amount (\$)<br><b>35.78</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended |                                                                                                          | <b>7</b> Payee address; City; State; Zip Code<br><b>645 S Pine St Kountze, Tx 77625</b><br><small>Check if individual's residence address.</small> |                                                                 |                                              |                             |
| <b>8</b><br><b>PURPOSE OF EXPENDITURE</b>                                                                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule):<br><b>Food/Beverage Expense</b> |                                                                                                                                                    | <b>(b)</b> Description<br><b>Food For Campaign Workers</b>      |                                              |                             |
|                                                                                                                                 | <b>(c)</b> <small>Check if travel outside of Texas. Complete Schedule T.</small>                         |                                                                                                                                                    | <small>Check if Austin, TX, officeholder living expense</small> |                                              |                             |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                                             |                                                                                                          | Candidate / Officeholder name<br><b>Rodney L. Ousley</b>                                                                                           |                                                                 | Office sought                                | Office held<br><b>JP #3</b> |
| Date<br><b>02/27/2026</b>                                                                                                       |                                                                                                          | Payee name<br><b>McDonalds #12027</b>                                                                                                              |                                                                 |                                              |                             |
| Amount (\$)<br><b>15.74</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          |                                                                                                          | Payee address; City; State; Zip Code<br><b>103 N Main Lumberton Tx 77657</b><br><small>Check if individual's residence address.</small>            |                                                                 |                                              |                             |
| <b>PURPOSE OF EXPENDITURE</b>                                                                                                   | Category (See Categories listed at the top of this schedule):<br><b>Food/Beverage Expense</b>            |                                                                                                                                                    | Description<br><b>Food for Campaign Workers</b>                 |                                              |                             |
|                                                                                                                                 | <small>Check if travel outside of Texas. Complete Schedule T.</small>                                    |                                                                                                                                                    | <small>Check if Austin, TX, officeholder living expense</small> |                                              |                             |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                                                      |                                                                                                          | Candidate / Officeholder name<br><b>Rodney L. Ousley</b>                                                                                           |                                                                 | Office sought                                | Office held<br><b>JP #3</b> |
| Date<br><b>02/27/2026</b>                                                                                                       |                                                                                                          | Payee name<br><b>Brookshire Brothers #36</b>                                                                                                       |                                                                 |                                              |                             |
| Amount (\$)<br><b>28.80</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          |                                                                                                          | Payee address; City; State; Zip Code<br><b>90 West Monroe Kountze, Tx 77625</b><br><small>Check if individual's residence address.</small>         |                                                                 |                                              |                             |
| <b>PURPOSE OF EXPENDITURE</b>                                                                                                   | Category (See Categories listed at the top of this schedule):<br><b>Food/Beverage Expense</b>            |                                                                                                                                                    | Description<br><b>Food for Campaign Workers</b>                 |                                              |                             |
|                                                                                                                                 | <small>Check if travel outside of Texas. Complete Schedule T.</small>                                    |                                                                                                                                                    | <small>Check if Austin, TX, officeholder living expense</small> |                                              |                             |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                                                      |                                                                                                          | Candidate / Officeholder name<br><b>Rodney L. Ousley</b>                                                                                           |                                                                 | Office sought                                | Office held<br><b>JP#3</b>  |
| <b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>                                                                      |                                                                                                          |                                                                                                                                                    |                                                                 |                                              |                             |

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

|                                                                                                                                 |                                                                                                                                                   |                                                            |
|---------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>1</b> Total pages Schedule G:<br><b>3 of 4</b>                                                                               | <b>2</b> FILER NAME<br><b>Rodney L. Ousley</b>                                                                                                    | <b>3</b> Filer ID (Ethics Commission Filers)               |
| <b>4</b> Date<br><b>02/28/2026</b>                                                                                              | <b>5</b> Payee name<br><b>Sams Club</b>                                                                                                           |                                                            |
| <b>6</b> Amount (\$)<br><b>87.94</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address; City: State: Zip Code<br><b>1615 I-10 S Beaumont, Tx 77701</b><br><small>Check if individual's residence address.</small> |                                                            |
| <b>8</b> PURPOSE OF EXPENDITURE                                                                                                 | <b>(a)</b> Category (See Categories listed at the top of this schedule):<br><b>Food/Beverage Expense</b>                                          | <b>(b)</b> Description<br><b>Food For Campaign Workers</b> |
|                                                                                                                                 | <b>(c)</b> <small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense.</small> |                                                            |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                                             | Candidate / Officeholder name Office sought Office held<br><b>Rodney L. Ousley JP #3</b>                                                          |                                                            |
| Date<br><b>03/02/2026</b>                                                                                                       | Payee name<br><b>Mama Jacks Restaurant</b>                                                                                                        |                                                            |
| Amount (\$)<br><b>118.21</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended         | Payee address; City: State: Zip Code<br><b>215 S Pine St Kountze Tx 77625</b><br><small>Check if individual's residence address.</small>          |                                                            |
| PURPOSE OF EXPENDITURE                                                                                                          | Category (See Categories listed at the top of this schedule):<br><b>Food/Beverage Expense</b>                                                     | Description<br><b>Food for Campaign Workers</b>            |
|                                                                                                                                 | <small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense.</small>            |                                                            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                                                      | Candidate / Officeholder name Office sought Office held<br><b>Rodney L. Ousley JP #3</b>                                                          |                                                            |
| Date<br><b>03/02/2026</b>                                                                                                       | Payee name<br><b>Whataburger 847</b>                                                                                                              |                                                            |
| Amount (\$)<br><b>24.94</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended          | Payee address; City: State: Zip Code<br><b>401 N Main St Lumberton, Tx 77657</b><br><small>Check if individual's residence address.</small>       |                                                            |
| PURPOSE OF EXPENDITURE                                                                                                          | Category (See Categories listed at the top of this schedule):<br><b>Food/Beverage Expense</b>                                                     | Description<br><b>Food for Campaign Workers</b>            |
|                                                                                                                                 | <small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense.</small>            |                                                            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                                                      | Candidate / Officeholder name Office sought Office held<br><b>Rodney L. Ousley JP#3</b>                                                           |                                                            |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

|                                                                                                                                 |                                                                                                                                                        |                                                            |
|---------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>1</b> Total pages Schedule G:<br><b>4 of 4</b>                                                                               | <b>2</b> FILER NAME<br><b>Rodney L. Ousley</b>                                                                                                         | <b>3</b> Filer ID (Ethics Commission Filers)               |
| <b>4</b> Date<br><b>03/03/2026</b>                                                                                              | <b>5</b> Payee name<br><b>Little Ceasars Pizza</b>                                                                                                     |                                                            |
| <b>6</b> Amount (\$)<br><b>51.45</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee address; City: State: Zip Code<br><b>837 N. Main St. Lumberton, Tx 77657</b><br><small>Check if individual's residence address.</small> |                                                            |
| <b>8</b> PURPOSE OF EXPENDITURE                                                                                                 | <b>(a)</b> Category (See Categories listed at the top of this schedule):<br><b>Food/Beverage Expense</b>                                               | <b>(b)</b> Description<br><b>Food For Campaign Workers</b> |
|                                                                                                                                 | <b>(c)</b> <small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>       |                                                            |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                                             | Candidate / Officeholder name Office sought Office held<br><b>Rodney L. Ousley JP #3</b>                                                               |                                                            |

  

|                                                                                                                        |                                                                                                                                           |  |                                                 |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------|
| Date<br><b>03/03/2026</b>                                                                                              | Payee name<br><b>Sonic #4247</b>                                                                                                          |  |                                                 |
| Amount (\$)<br><b>42.24</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City: State: Zip Code<br><b>1300 S Pine St Kountze Tx 77625</b><br><small>Check if individual's residence address.</small> |  |                                                 |
| PURPOSE OF EXPENDITURE                                                                                                 | Category (See Categories listed at the top of this schedule):<br><b>Food/Beverage Expense</b>                                             |  | Description<br><b>Food for Campaign Workers</b> |
|                                                                                                                        | <small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>     |  |                                                 |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                                             | Candidate / Officeholder name Office sought Office held<br><b>Rodney L. Ousley JP #3</b>                                                  |  |                                                 |

  

|                                                                                                                        |                                                                                                                                                   |  |                                                 |
|------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------|
| Date<br><b>03/03/2026</b>                                                                                              | Payee name<br><b>Fuel Maxx #89</b>                                                                                                                |  |                                                 |
| Amount (\$)<br><b>13.98</b><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City: State: Zip Code<br><b>13920 Hwy 69 N. Village Mills, Tx 77663</b><br><small>Check if individual's residence address.</small> |  |                                                 |
| PURPOSE OF EXPENDITURE                                                                                                 | Category (See Categories listed at the top of this schedule):<br><b>Food/Beverage Expense</b>                                                     |  | Description<br><b>Food for Campaign Workers</b> |
|                                                                                                                        | <small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>             |  |                                                 |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                                             | Candidate / Officeholder name Office sought Office held<br><b>Rodney L. Ousley JP#3</b>                                                           |  |                                                 |

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