

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: 10	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Howard	MI J.	
	NICKNAME	LAST Freed	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 14932 Winnwood Road Dallas TX 75254		RECEIVED APR 02 2026 Town of Addison City Secretary's Office V. Garcia, City Secretary	
	5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (214)		PHONE NUMBER 697-8773
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Valerie		MI
	NICKNAME	LAST Van Pelt		SUFFIX
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 7110 Brookshire Drive Dallas TX 75230		Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged	
	8 CAMPAIGN TREASURER PHONE	AREA CODE (214)		PHONE NUMBER 708-2115
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)			
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)			
10 PERIOD COVERED	Month Day Year 1 / 1 / 26		Month Day Year 3 / 31 / 26	
11 ELECTION	ELECTION DATE Month Day Year 5 / 2 / 26		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
	12 OFFICE	OFFICE HELD (if any) Addison City Council Member	13 OFFICE SOUGHT (if known) Addison City Council Member	
14 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	COMMITTEE NAME		
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS		
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		

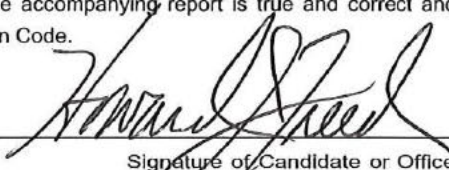
GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Howard J. Freed		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 450.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 4,444.31
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 5,000.00

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



 Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ 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

OR

(2) Unsworn Declaration

My name is Howard J. Freed, and my date of birth is .

My address is 14932 Winnwood Road, Dallas, TX, 75254, Dallas.
(street) (city) (state) (zip code) (country)

Executed in Dallas County, State of Texas, on the 2nd day of April, 2026.
(month) (year)



 Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Howard J. Freed		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 0.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 450.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00
4. SCHEDULE E: LOANS		\$ 5,000.00
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 0.00
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		\$ 2,524.94
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$ 1,919.37
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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 1	
2 FILER NAME Howard J. Freed		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 3/25/26	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dave & Valerie Collins	8 Amount of Contribution \$ 450.00	9 In-kind contribution description Social Pour Meet & Greet
7 Contributor address; City; State; Zip Code [REDACTED] Addison TX 75001		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Retired (Dave) / Realtor (Valerie)		11 Employer (FOR NON-JUDICIAL)(See Instructions) None (Dave) / Ebby Halliday (Valerie)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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

LOANS

SCHEDULE E

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 1
2 FILER NAME Howard J. Freed		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 01/22/2026	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard J. Freed	9 Loan Amount (\$) 5,000.00
6 Is lender a financial Institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8 Lender address; City; State; Zip Code 14932 Winnwood Rd Dallas, TX 75254	10 Interest rate 0.00
		11 Maturity date 12/31/2027
12 Principal occupation / Job title (See Instructions) Retired Business Owner / City Council Member		13 Employer (See Instructions) Town of Addison
14 Description of Collateral none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION not applicable	17 Name of guarantor N/A	19 Amount Guaranteed (\$) 0.00
	18 Guarantor address; City; State; Zip Code N/A	
20 Principal Occupation (See Instructions) N/A		21 Employer (See Instructions) N/A
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial Institution? <input type="checkbox"/> Y <input type="checkbox"/> N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral none		Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender is out-of-state PAC, please see Instruction guide for additional reporting requirements.

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2	2 FILER NAME Howard J. Freed	3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 0.00	
5 CREDIT CARD ISSUER	Name of financial institution Capital One		
6 PAYMENT	(a) Amount Charged \$ 607.19	(b) Date Expenditure Charged 03/30/2026	(c) Date(s) Credit Card Issuer Paid 04/01/2026
7 PAYEE	(a) Payee name The Hamburger Man	(b) Payee address; 3930 Cedar Springs Rd <input type="checkbox"/> Check if individual's residence address.	City, State, Zip Code Dallas TX 75219
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense / Food & Beverage		(b) Description Oaks North Meet & Greet
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Howard J. Freed	Office Sought Addison City Council Member	Office Held Addison City Council Member
PAYMENT	(a) Amount Charged \$ 607.19	(b) Date Expenditure Charged 03/30/2026	(c) Date(s) Credit Card Issuer Paid 04/01/2026
PAYEE	(a) Payee name The Hamburger Man	(b) Payee address; 3930 Cedar Springs Rd <input type="checkbox"/> Check if individual's residence address.	City, State, Zip Code Dallas TX 75219
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense / Food & Beverage		(b) Description Oaks North Meet & Greet
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Trish Stuart	Office Sought Addison City Council Member	Office Held None
PAYMENT	(a) Amount Charged \$ 655.28	(b) Date Expenditure Charged 03/31/2026	(c) Date(s) Credit Card Issuer Paid 04/01/26
PAYEE	(a) Payee name The Hamburger Man	(b) Payee address; 3930 Cedar Springs Rd. <input type="checkbox"/> Check if individual's residence address.	City, State, Zip Code Dallas TX 75219
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense / Food & Beverage		(b) Description Hampton Court Meet & Greet
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Howard J. Freed	Office Sought Addison City Council Member	Office Held Addison City Council Member

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4: 2	2 FILER NAME Howard J. Freed	3 FILER ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 0.00
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5 CREDIT CARD ISSUER	Name of financial institution Capital One
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6 PAYMENT	(a) Amount Charged \$ 655.28	(b) Date Expenditure Charged 03/31/2026	(c) Date(s) Credit Card Issuer Paid 04/01/2026
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7 PAYEE	(a) Payee name The Hamburger Man	(b) Payee address; 3930 Cedar Springs Rd <input type="checkbox"/> Check if individual's residence address.	City, Dallas	State, TX	Zip Code 75219
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8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense / Food & Beverage	(b) Description Hampton Court Meet & Greet
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Trish Stuart	Office Sought Addison City Council Member	Office Held None
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PAYMENT	(a) Amount Charged \$	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
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PAYEE	(a) Payee name	(b) Payee address; <input type="checkbox"/> Check if individual's residence address.	City, 	State, 	Zip Code
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PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office Sought	Office Held
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PAYMENT	(a) Amount Charged \$	(b) Date Expenditure Charged	(c) Date(s) Credit Card Issuer Paid
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PAYEE	(a) Payee name	(b) Payee address; 19 <input type="checkbox"/> Check if individual's residence address.	City, 	State, 	Zip Code
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PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

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

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.

1 Total pages Schedule G: 3	2 FILER NAME Howard J. Freed	3 Filer ID (Ethics Commission Filers)
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4 Date 02/23/2026	5 Payee name Lowe's Home Improvement
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6 Amount (\$) 50.66 <small>Reimbursement from political contributions intended</small>	7 Payee address; 19210 Preston Road <small>Check if individual's residence address.</small>	City; Dallas	State; TX	Zip Code 75252
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Lumber and Hardware for Sign Frames
	(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 Blake Clemens	Office sought Dallas County Commissioner	Office held None
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Date 03/17/2026	Payee name First Graphic Services, Inc.
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Amount (\$) 1,496.02 <small>Reimbursement from political contributions intended</small>	Payee address; 229 Garvon Street <small>Check if individual's residence address.</small>	City; Garland	State; TX	Zip Code 75040
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Yard Signs
	<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 Howard J. Freed	Office sought Addison City Council Member	Office held Addison City Council Member
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Date 03/30/2026	Payee name Tom Thumb
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Amount (\$) 9.71 <small>Reimbursement from political contributions intended</small>	Payee address; 14999 Preston Road <small>Check if individual's residence address.</small>	City; Dallas	State; TX	Zip Code 75254
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food & Beverage	Description Ice for Oaks North Meet & Greet
	<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 Howard J. Freed	Office sought Addison City Council Member	Office held Addison City Council Member
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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.

1 Total pages Schedule G: 3	2 FILER NAME Howard J. Freed	3 Filer ID (Ethics Commission Filers)
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4 Date 03/30/2026	5 Payee name Tom Thumb
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6 Amount (\$) 9.71 <small>Reimbursement from political contributions intended</small>	7 Payee address; 14999 Preston Road <small>Check if individual's residence address.</small>	City; Dallas	State; TX	Zip Code 75254
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food & Beverage	(b) Description Ice for Oaks North Meet & Greet (50%)
	(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 Trish Stuart	Office sought Addison City Council Member	Office held None
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Date 03/30/2026	Payee name Lowe's Home Improvement
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Amount (\$) 21.43 <small>Reimbursement from political contributions intended</small>	Payee address; 19210 Preston Road <small>Check if individual's residence address.</small>	City; Dallas	State; TX	Zip Code 75252
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Lumber for Sign Frames
	<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 Howard J. Freed	Office sought Addison City Council Member	Office held Addison City Council Member
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Date 03/30/2026	Payee name Costco Wholesale - Dallas #1266
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Amount (\$) 132.24 <small>Reimbursement from political contributions intended</small>	Payee address; 8055 Churchill Way <small>Check if individual's residence address.</small>	City; Dallas	State; TX	Zip Code 75251
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense - Food & Beverage	Description Oaks North & Hampton Ct. - Meet & Greet
	<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 Howard J. Freed	Office sought Addison City Council Member	Office held Addison City Council Member
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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.

1 Total pages Schedule G: 3	2 FILER NAME Howard J. Freed	3 Filer ID (Ethics Commission Filers)
4 Date 03/30/2026	5 Payee name Costco Wholesale - Dallas #1266	
6 Amount (\$) 132.24 <small>Reimbursement from political contributions intended</small>	7 Payee address; 8055 Churchill Way <small>Check if individual's residence address.</small>	City; State; Zip Code Dallas TX 75251
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense - Food & Beverage	(b) Description Oaks North & Hampton Ct - Meet & Greets
	(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 Howard J. Freed	Office sought Addison City Council Member
		Office held Addison City Council Member

Date 03/17/2026	Payee name Lowe's Home Improvement		
Amount (\$) 67.36 <small>Reimbursement from political contributions intended</small>	Payee address; 19210 Preston Road <small>Check if individual's residence address.</small>	City; Dallas	State; Zip Code TX 75252
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Lumber & Hardware for Sign Frames	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Howard J. Freed	Office sought Addison City Council Member	Office held Addison City Council Member

Date	Payee name		
Amount (\$) <small>Reimbursement from political contributions intended</small>	Payee address; <small>Check if individual's residence address.</small>	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED