2-49
Prescribed by Secretary of State
Section 141.031, Chapters 143 and 144, Texas Election Code; Section 11.055, Texas Education Code
07/2025

APPLICATION FOR A PLACE ON THE BALLOT FOR A GENERAL ELECTION FOR A CITY, SCHOOL DISTRICT OR OTHER POLITICAL SUBDIVISION

ALL INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED AS OPTIONAL[1] Failure to provide required information may result in rejection of application.

APPLICATION FOR A PLACE ON THE KISD Board of Trustees **GENERAL ELECTION BALLOT**

TO: City Secretary/Secretary of Board **(name of election)**

I request that my name be placed on the above-named official ballot as a candidate for the office indicated below.

OFFICE SOUGHT (Include any place number or other distinguishing number, if any.): Place 5

INDICATE TERM: ☑ FULL ☐ UNEXPIRED

FULL NAME (First, Middle, Last): Christopher Ray Coker

PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT*: Chris Coker

PERMANENT RESIDENCE ADDRESS (Do not include a P.O. Box or Rural Route. If you do not have a residence address, describe location of residence.): 1323 Brier Ridge Dr.

CITY	STATE	ZIP
Keller	TX	76248

PUBLIC MAILING ADDRESS (Optional) (Address for which you receive campaign related correspondence, if available.)

CITY	STATE	ZIP

PUBLIC EMAIL ADDRESS (Optional) (Address for which you receive campaign related emails, if available.)

OCCUPATION (Do not leave blank): Self

DATE OF BIRTH: [redacted]

VOTER REGISTRATION VUID NUMBER[2] (Optional)

TELEPHONE CONTACT INFORMATION (Optional)

Home: Office: Cell:

FELONY CONVICTION STATUS (You MUST check one)

☑ **I have not been finally convicted of a felony.**

☐ **I have been finally convicted of a felony, but I have been pardoned or otherwise released from the resulting disabilities of that felony conviction and I have provided proof of this fact with the submission of this application.[3]**

LENGTH OF CONTINUOUS RESIDENCE AS OF DATE THIS APPLICATION WAS SWORN

IN THE STATE OF TEXAS	IN TERRITORY/DISTRICT/PRECINCT FROM WHICH THE OFFICE SOUGHT IS ELECTED
41 year(s) 5 month(s)	7 year(s) ____ month(s)

This Box Must ONLY be Completed by Candidates for School District Board of Trustees

Check the Box Below:

☑ I am aware that I am not eligible to serve as a trustee of an independent school district if I am required to register as a sex offender under Chapter 62, Code of Criminal Procedure.

*If using a nickname as part of your name to appear on the ballot, you are also signing and swearing to the following statements: I further swear that my nickname does not constitute a slogan or contain a title, nor does it indicate a political, economic, social, or religious view or affiliation. I have been commonly known by this nickname for at least three years prior to this election. Please review sections 52.031, 52.032 and 52.033 of the Texas Election Code regarding the rules for how names may be listed on the official ballot.

Before me, the undersigned authority, on this day personally appeared (name of candidate)_____, who being by me here and now duly sworn, upon oath says:

"I, (name of candidate) Chris Coker, of Tarrant County, Texas, Being a candidate for the office of KISD Place 5, swear that I will support and defend the Constitution and laws of the United States and of the State of Texas. I am a citizen of the United States eligible to hold such office under the constitution and laws of this state. I have not been determined by a final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote. I am aware of the nepotism law, Chapter 573, Government Code. I am aware that I must disclose any prior felony conviction, and if so convicted, must provide proof that I have been pardoned or otherwise released from the resulting disabilities of any such final felony conviction. I am aware that knowingly providing false information on the application regarding my possible felony conviction status constitutes a Class B misdemeanor. I further swear that the foregoing statements included in my application are in all things true and correct.

X _____
SIGNATURE OF CANDIDATE

Sworn to and subscribed before me this the 13 (day) day of August (month), 2026 (year), by Christopher Ray Coker (name of candidate).

_____
Signature of Officer Authorized to Administer Oath[4]

Joseph Ploszewski
Printed Name of Officer Authorized to Administer Oath

Notary Public
Title of Officer Authorized to Administer Oath

Notarial or Official Seal

JOSEPH PLOSZEWSKI
Notary ID #129064965
My Commission Expires
July 24, 2028

TO BE COMPLETED BY FILING OFFICER: THIS APPLICATION IS ACCOMPANIED BY THE REQUIRED FILING FEE (If Applicable) PAID BY:

☐ CASH ☐ CHECK ☐ MONEY ORDER ☐ CASHIERS CHECK OR ☐ PETITION IN LIEU OF A FILING FEE

This document and $ N/A filing fee or a nominating petition of 1 pages received. ☑ **Voter Registration Status Verified**

8/13/2026 Date Received
8/13/2026 Date Accepted **(See Section 1.007)**
Catherine Whited
Signature of Filing Officer or Designee

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA
PG 1

See CTA Instruction Guide for detailed instructions.

1 Total pages filed:

2 CANDIDATE NAME

MS / MRS / MR: Mr.
FIRST: Christopher
MI: Ray
NICKNAME:
LAST: Coker
SUFFIX:

3 CANDIDATE MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE: 1323 Brier Ridge Dr., Keller, TX 76248

4 CANDIDATE PHONE

AREA CODE ( ) PHONE NUMBER EXTENSION

5 OFFICE HELD (if any)

6 OFFICE SOUGHT (if known)

7 CAMPAIGN TREASURER NAME

MS/MRS/MR: Mrs.
FIRST: Holly
MI: R
NICKNAME:
LAST: Coker
SUFFIX:

8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)

STREET ADDRESS; APT / SUITE #; CITY; STATE; ZIP CODE: 1323 Brier Ridge Dr. Keller TX 76248

9 CAMPAIGN TREASURER PHONE

AREA CODE ( ) PHONE NUMBER EXTENSION

10 CANDIDATE SIGNATURE

I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.

I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.

I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.

Signature of Candidate

8-13-26
Date Signed

OFFICE USE ONLY

Filer ID #
Date Received
Date Hand-delivered or Postmarked
Receipt # | Amount $
Date Processed
Date Imaged

GO TO PAGE 2

CODE OF FAIR CAMPAIGN PRACTICES

FORM CFCP
COVER SHEET

Pursuant to chapter 258 of the Election Code, every candidate and political committee is encouraged to subscribe to the Code of Fair Campaign Practices. The Code may be filed with the proper filing authority upon submission of a campaign treasurer appointment form. Candidates or political committees that already have a current campaign treasurer appointment on file as of September 1, 1997, may subscribe to the code at any time.

Subscription to the Code of Fair Campaign Practices is voluntary.

OFFICE USE ONLY

Date Received

Date Hand-delivered or Postmarked

Date Processed

Date Imaged

1 ACCOUNT NUMBER
(Ethics Commission Filers)

2 TYPE OF FILER

CANDIDATE ☑ — *If filing as a candidate, complete boxes 3 - 6, then read and sign page 2.*

POLITICAL COMMITTEE ☐ — *If filing for a political committee, complete boxes 7 and 8, then read and sign page 2.*

3 NAME OF CANDIDATE
(PLEASE TYPE OR PRINT)

TITLE (Dr., Mr., Ms., etc.)	FIRST	MI
Mr.	Christopher	R.

NICKNAME	LAST	SUFFIX (SR., JR., III, etc.)
	Coker	

4 TELEPHONE NUMBER OF CANDIDATE
(PLEASE TYPE OR PRINT)

AREA CODE	PHONE NUMBER	EXTENSION
( )		

5 ADDRESS OF CANDIDATE
(PLEASE TYPE OR PRINT)

STREET / PO BOX:	APT / SUITE #:	CITY:	STATE:	ZIP CODE
1323 Brier Ridge Dr.		Keller	TX	76248

6 OFFICE SOUGHT BY CANDIDATE
(PLEASE TYPE OR PRINT)

KISD Board of Trustees Place 5

7 NAME OF COMMITTEE
(PLEASE TYPE OR PRINT)

8 NAME OF CAMPAIGN TREASURER
(PLEASE TYPE OR PRINT)

TITLE (Dr., Mr., Ms., etc.)	FIRST	MI
Mrs.	Holly	R

NICKNAME	LAST	SUFFIX (SR., JR., III, etc.)
	Coker	

GO TO PAGE 2

CODE OF FAIR CAMPAIGN PRACTICES

There are basic principles of decency, honesty, and fair play that every candidate and political committee in this state has a moral obligation to observe and uphold, in order that, after vigorously contested but fairly conducted campaigns, our citizens may exercise their constitutional rights to a free and untrammeled choice and the will of the people may be fully and clearly expressed on the issues.

THEREFORE:

(1) I will conduct the campaign openly and publicly and limit attacks on my opponent to legitimate challenges to my opponent's record and stated positions on issues.

(2) I will not use or permit the use of character defamation, whispering campaigns, libel, slander, or scurrilous attacks on any candidate or the candidate's personal or family life.

(3) I will not use or permit any appeal to negative prejudice based on race, sex, religion, or national origin.

(4) I will not use campaign material of any sort that misrepresents, distorts, or otherwise falsifies the facts, nor will I use malicious or unfounded accusations that aim at creating or exploiting doubts, without justification, as to the personal integrity or patriotism of my opponent.

(5) I will not undertake or condone any dishonest or unethical practice that tends to corrupt or undermine our system of free elections or that hampers or prevents the full and free expression of the will of the voters, including any activity aimed at intimidating voters or discouraging them from voting.

(6) I will defend and uphold the right of every qualified voter to full and equal participation in the electoral process, and will not engage in any activity aimed at intimidating voters or discouraging them from voting.

(7) I will immediately and publicly repudiate methods and tactics that may come from others that I have pledged not to use or condone. I shall take firm action against any subordinate who violates any provision of this code or the laws governing elections.

I, the undersigned, candidate for election to public office in the State of Texas or campaign treasurer of a political committee, hereby voluntarily endorse, subscribe to, and solemnly pledge myself to conduct the campaign in accordance with the above principles and practices.

Signature

8-13-26

Date

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:

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: Mr. | FIRST: Chris | MI: R

NICKNAME | LAST: Coker | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX: 1323 Briar Ridge Dr. | APT / SUITE #: | CITY: Keller | STATE: TX | ZIP CODE: 76248

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (817) | PHONE NUMBER: 313-1885 | EXTENSION:

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: Mrs. | FIRST: Holly | MI: R

NICKNAME | LAST: Coker | SUFFIX

7 CAMPAIGN TREASURER ADDRESS

(Residence or Business)

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

8 CAMPAIGN TREASURER PHONE

AREA CODE: (940) | PHONE NUMBER: 390-5293 | 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: 8 / Day: 17 / Year: 26 THROUGH Month: 9 / Day: 24 / Year: 26

11 ELECTION

ELECTION DATE: Month: 11 / Day: 3 / Year: 26

ELECTION TYPE: ☐ Primary ☐ Runoff ☐ Other Description ☑ General ☐ Special

12 OFFICE

OFFICE HELD (if any): KISD Board of Trustees Place 5

13 OFFICE SOUGHT (if known): Same

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.

☐ Additional Pages

COMMITTEE TYPE: ☐ GENERAL ☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

GO TO PAGE 2

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:

2 FILER NAME: Chris Coker

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS: $

5 Date of loan: 9-15-26

7 Name of lender: Self ☐ out-of-state PAC (ID#: _____)

9 Loan Amount ($): 10,000

6 Is lender a financial Institution? Y (N)

8 Lender address; City; State; Zip Code: Mine

10 Interest rate: 0%

11 Maturity date: N/A

12 Principal occupation / Job title (See Instructions): Self

13 Employer (See Instructions): Self

14 Description of Collateral ☑ none

15 ☑ Check if personal funds were deposited into political account (See Instructions)

16 GUARANTOR INFORMATION ☑ not applicable

17 Name of guarantor: N/A

18 Guarantor address; City; State; Zip Code

19 Amount Guaranteed ($)

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender ☐ out-of-state PAC (ID#: _____)

Loan Amount ($)

Is lender a financial Institution? Y N

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral ☐ none

☐ Check if personal funds were deposited into political account (See Instructions)

GUARANTOR INFORMATION ☐ not applicable

Name of guarantor

Guarantor address; City; State; Zip Code

Amount Guaranteed ($)

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.

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 | FIRST: Chris | MI

NICKNAME | LAST: Coker | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE: 1323 Briar Ridge Dr, Keller, TX 76248

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (817) | PHONE NUMBER: 313-1885 | EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS / MR | FIRST: Chris | MI

NICKNAME | LAST: Coker | SUFFIX

7 CAMPAIGN TREASURER ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE: 1323 Briar Ridge Dr, Keller, TX 76248

8 CAMPAIGN TREASURER PHONE

AREA CODE: (817) | PHONE NUMBER: 313-1885 | EXTENSION

OFFICE USE ONLY

Date Received: 10/27/26

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed: 10/27/26

Date Imaged: 10/27/26

9 REPORT TYPE

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

10 PERIOD COVERED

Month	Day	Year		Month	Day	Year
09	25	2026	THROUGH	10	24	2026

11 ELECTION

ELECTION DATE: Month 11 / Day 03 / Year 2026

ELECTION TYPE: X General | Primary | Runoff | Special | Other Description

12 OFFICE

OFFICE HELD (if any): Keller ISD Trustee

13 OFFICE SOUGHT (if known): Keller ISD Trustee, Place 5

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: GENERAL / SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME	16 Filer ID (Ethics Commission Filers)
Chris Coker	

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)	$ 8,030.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$ 0.00
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 26,101.81
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 20,000.00

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 PUBLIC STATE OF TEXAS
CATHERINE WHITED
My Notary ID # 6447598
Expires June 17, 2030

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Chris Coker this the 27th day of October, 20 26, to certify which, witness my hand and seal of office.

Catherine Whited — Catherine Whited — notary

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

OR

(2) Unsworn Declaration

My name is Chris Coker, and my date of birth is 03/29/1985.

My address is 1323 Briar Ridge Dr (street), Keller (city), TX (state), 76248 (zip code), USA (country).

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

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME	20 Filer ID (Ethics Commission Filers)
Chris Coker	

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 8,030.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS	$
4.	X	SCHEDULE E: LOANS	$ 15,000.00
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 26,101.81
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	$
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$
9.		SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	$
10.		SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	$
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 4

2 FILER NAME
Chris Coker

3 Filer ID (Ethics Commission Filers)

4 Date	5 Full name of contributor / out-of-state PAC (ID#:) / 6 Contributor address: City; State; Zip Code	7 Amount of contribution ($)
10/16/2026	Tom Cobb Colleyville, TX	4,250.00
	8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)
10/16/2026	Aaron McKinney Keller, TX	250.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)
10/16/2026	Kenya Alu Fort Worth, TX	25.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)
10/16/2026	Keith Pearson Keller, TX	1,000.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 4

2 FILER NAME
Chris Coker

3 Filer ID (Ethics Commission Filers)

4 Date	5 Full name of contributor / out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
10/15/2026	Jerry Morris Keller, TX	100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)
10/15/2026	Kathleen May Keller, TX	25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)
10/14/2026	Nikki Paris Keller, TX	100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)
10/14/2026	Brian King Watauga, TX	50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 4

2 FILER NAME
Chris Coker

3 Filer ID (Ethics Commission Filers)

4 Date	5 Full name of contributor / out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
10/14/2026	Kenny Powell Ponte Vedra, FL	1,000.00
	8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Date	Full name of contributor / out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)
10/09/2026	Joshua Smith Keller, TX	500.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date	Full name of contributor / out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)
10/04/2026	Kimberly Miller Keller, TX	50.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date	Full name of contributor / out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)
10/03/2026	Kyle McCaw Keller, TX	500.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 4

2 FILER NAME
Chris Coker

3 Filer ID (Ethics Commission Filers)

4 Date	**5** Full name of contributor (out-of-state PAC (ID#:_____)) / **6** Contributor address; City; State; Zip Code	**7** Amount of contribution ($)	**8** Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
09/30/2026	Tracy Grant Keller, TX	30.00		
10/09/2026	Lin Metcalf Keller, TX	100.00		
10/10/2026	Doug Hinds Keller, TX	50.00		

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 Chris Coker	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS	$

5 Date of loan 10/10/2026	7 Name of lender ☐ out-of-state PAC (ID#:_____) Chris Coker	9 Loan Amount ($) 15,000.00
6 Is lender a financial Institution? Y X N	8 Lender address; City; State; Zip Code 1323 Briar Ridge Dr, Keller, TX 76248	10 Interest rate 0% (confirm) 11 Maturity date None stated

12 Principal occupation / Job title (See Instructions)	13 Employer (See Instructions)
14 Description of Collateral X none	15 X Check if personal funds were deposited into political account (See Instructions)

16 GUARANTOR INFORMATION X not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed ($)
20 Principal Occupation (See Instructions)	21 Employer (See Instructions)	

Date of loan	Name of lender ☐ out-of-state PAC (ID#:_____)	Loan Amount ($)
Is lender a financial Institution? Y N	Lender address; City; State; Zip Code	Interest rate Maturity date
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Description of Collateral none	Check if personal funds were deposited into political account (See Instructions)	

GUARANTOR INFORMATION not applicable	Name of guarantor Guarantor address; City; State; Zip Code	Amount Guaranteed ($)
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.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
2	Chris Coker	

4 Date	5 Payee name
10/06/2026	JG Media DBA Com Descript

6 Amount ($)	7 Payee address;	City;	State;	Zip Code
1,655.00				

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Printing Expense	Campaign printing

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

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

Date	Payee name
10/13/2026	Chick-fil-A

Amount ($)	Payee address;	City;	State;	Zip Code
246.81				

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food/Beverage Expense	Campaign food

Check if travel outside of Texas. Complete Schedule T. | Check if Austin, TX. officeholder living expense

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

Date	Payee name
10/20/2026	MS Marketing

Amount ($)	Payee address;	City;	State;	Zip Code
200.00				

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Printing Expense	Campaign printing

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
2	Chris Coker	

4 Date	5 Payee name
10/20/2026	MS Marketing

6 Amount ($)	7 Payee address:	City:	State:	Zip Code
15,000.00				

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)	(b) Description
Advertising Expense	Campaign mailers

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

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

Date	Payee name
10/20/2026	Edgerton Strategies

Amount ($)	Payee address:	City:	State:	Zip Code
9,000.00				

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)	Description
Advertising Expense	Campaign text messages

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

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

Date	Payee name

Amount ($)	Payee address:	City:	State:	Zip Code

PURPOSE OF EXPENDITURE

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

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

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED