

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 1

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

1 Filer ID (Ethics Commission Filers)

2 Total pages filed: **22**

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR **Ms** FIRST **Tifanee** MI

NICKNAME LAST SUFFIX  
**Baker**

OFFICE USE ONLY

Date Received

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
**3300 Oak Lawn Ave Dallas TX 75219**

Change of Address

FILED  
2026 FEB 22 AM 10:19  
JOHIL F. WARREN  
COUNTY CLERK  
DALLAS COUNTY  
BY: [Signature]

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION  
**( 972 ) 343-8288**

Date Hand-delivered or Date Postmarked

6 CAMPAIGN TREASURER NAME

MS / MRS / MR **Mr** FIRST **Jacob** MI

NICKNAME LAST SUFFIX  
**Ginsberg**

Receipt # Amount \$

Date Processed

Date Imaged

7 CAMPAIGN TREASURER ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
**4502 W Lovers Ln Dallas TX 75209**

(Residence or Business)

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION  
**( 214 ) 369-9871**

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  
**01 / 23 / 2026 THROUGH 02 / 21 / 2026**

11 ELECTION

ELECTION DATE: Month Day Year **03 / 03 / 2026**  
ELECTION TYPE:  Primary  Runoff  Other Description  
 General  Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

**Judge, County Criminal Court 1**

14 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR RECEIVED BY THE CANDIDATE OR OFFICEHOLDER. 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

Additional Pages

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 2

15 JC/OH NAME	16 Filer ID (Ethics Commission Filers)
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17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 11,350.35
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 22,471.68
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 6,163.46
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

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.

*Julia Vasquez*  
Signature of Candidate/Officeholder

**Please complete either option below:**

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Tifanee Baker this the 23rd day of February, 2024 to certify which, witness my hand and seal of office.

Julia Vasquez Julia Vasquez Notary Public  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

(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\_\_\_\_\_.

# SUBTOTALS - JC/OH

FORM JC/OH

COVER SHEET PG 3

19 FILER NAME

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,727.10
2.	<input checked="" type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 4,623.25
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 22,471.68
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

# (JUDICIAL)

# SCHEDULE A(J)1

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 A(J)1: <b>14</b>
2 FILER NAME  <b>Tifanee Baker</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>01/24/2026</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Tom Barron</b>	7 Amount of contribution (\$) <b>\$263.51</b>
6 Contributor address; City; State; Zip Code <b>3227 McKinney Avenue #22C Dallas TX 75204</b>		
8 Contributor's principal occupation <b>Attorney</b>		9 Contributor's job title <b>Attorney</b>
10 Contributor's employer/law firm <b>Self-employed</b>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <b>01/25/2026</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Beth Smith</b>	Amount of contribution (\$) <b>\$26.82</b>
Contributor address; City; State; Zip Code <b>119 E Brooks St Howell MI 48843</b>		
Contributor's principal occupation <b>Dressmaker/Designer</b>		Contributor's job title <b>Designer</b>
Contributor's employer/law firm <b>Beth Smith Couture</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <b>01/25/2026</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Caroline Rogers</b>	Amount of contribution (\$) <b>\$105.72</b>
Contributor address; City; State; Zip Code <b>518 East Cedar Rock St Pickens SC 29671</b>		
Contributor's principal occupation <b>Manager</b>		Contributor's job title <b>Manager</b>
Contributor's employer/law firm <b>ConnectureDRX</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <b>Tifanee Baker</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>01/25/2026</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Nichole Williams</b>	7 Amount of contribution (\$) <b>\$53.12</b>
6 Contributor address; City; State; Zip Code <b>13 Erin Drive Brooklyn CT 6234</b>		
8 Contributor's principal occupation <b>Nursing Professor</b>		9 Contributor's job title <b>Professor</b>
10 Contributor's employer/law firm <b>University of Connecticut</b>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <b>01/25/2026</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Leslie Waters</b>	Amount of contribution (\$) <b>\$105.72</b>
Contributor address; City; State; Zip Code <b>2 Claire Drive Auburn MA 1501</b>		
Contributor's principal occupation <b>unemployed</b>		Contributor's job title <b>N/A</b>
Contributor's employer/law firm <b>N/A</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <b>01/25/2026</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Jennifer Trotta</b>	Amount of contribution (\$) <b>\$10.00</b>
Contributor address; City; State; Zip Code <b>3101 Lowell Road Gastonia NC 28054</b>		
Contributor's principal occupation <b>Security</b>		Contributor's job title <b>Security Officer</b>
Contributor's employer/law firm <b>Charter Communications</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

**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 (JUDICIAL)

## SCHEDULE A(J)1

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2 FILER NAME Tifanee Baker		3 Filer ID (Ethics Commission Filers)
4 Date 01/25/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Toni Thomas	7 Amount of contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 6203 Knollwest Dr Houston TX 77072		
8 Contributor's principal occupation Quality Assurance		9 Contributor's job title Auditor
10 Contributor's employer/law firm Memorial Hermann		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date 01/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Stephanie Clark	Amount of contribution (\$) \$26.82
Contributor address; City; State; Zip Code 300 Cedar Ridge McKinney TX 75069		
Contributor's principal occupation Retail		Contributor's job title Sales Associate
Contributor's employer/law firm Acosta		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 01/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Adrienne Trent	Amount of contribution (\$) \$26.82
Contributor address; City; State; Zip Code 3010 Fawn Crossing Crt Charlotte NC 28215		
Contributor's principal occupation Manager		Contributor's job title Sr. IT Manager
Contributor's employer/law firm Coca Cola Consolidated		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

**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  
(JUDICIAL)**

**SCHEDULE A(J)1**

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2 FILER NAME <b>Tifanee Baker</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>01/25/2026</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Barb Lorenzen</b>	7 Amount of contribution (\$) <b>\$11.04</b>
6 Contributor address; City; State; Zip Code <b>5575 Diane Way Marysville CA 95901</b>		
8 Contributor's principal occupation <b>Instructor</b>		9 Contributor's job title <b>Instructor</b>
10 Contributor's employer/law firm <b>Campus Inc</b>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <b>01/25/2026</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Van Hoffman</b>	Amount of contribution (\$) <b>\$25.00</b>
Contributor address; City; State; Zip Code <b>1017 W Creek Dr Hurst TX 76053</b>		
Contributor's principal occupation <b>Registered Nurse</b>		Contributor's job title <b>Nurse</b>
Contributor's employer/law firm <b>Med City</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <b>01/25/2026</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Nikki Ramsey</b>	Amount of contribution (\$) <b>\$26.82</b>
Contributor address; City; State; Zip Code <b>25406 Thistlewaite Lane Spring TX 77373</b>		
Contributor's principal occupation <b>Customer Service</b>		Contributor's job title <b>Senior CSR</b>
Contributor's employer/law firm <b>Alight Solutions</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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1 Total pages Schedule A(J)1:

2 FILER NAME

Tifanee Baker

3 Filer ID (Ethics Commission Filers)

4 Date  
01/25/2026

5 Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_  
Meghan Humphrey

7 Amount of contribution (\$) \$26.82

6 Contributor address; City; State; Zip Code  
12 Ogden Avenue Collingswood NJ 8108

8 Contributor's principal occupation  
unemployed

9 Contributor's job title  
N/A

10 Contributor's employer/law firm  
N/A

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date  
01/25/2026

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_  
Nydia Diaz

Amount of contribution (\$) \$26.82

Contributor address; City; State; Zip Code  
226 Red Bud Pass Wylie TX 75098

Contributor's principal occupation  
Registered Nurse

Contributor's job title  
Nurse

Contributor's employer/law firm  
Texas Health Resources

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date  
01/25/2026

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_  
Michele Cleary

Amount of contribution (\$) \$53.12

Contributor address; City; State; Zip Code  
25 Village Lane Canton CT 6019

Contributor's principal occupation  
Manager

Contributor's job title  
Application Training Manager

Contributor's employer/law firm  
COCC

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

**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 (JUDICIAL)

## SCHEDULE A(J)1

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1 Total pages Schedule A(J)1:

2 FILER NAME

Tifanee Baker

3 Filer ID (Ethics Commission Filers)

4 Date  
02/01/2026

5 Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_  
Philip Gibson

7 Amount of contribution (\$) **\$53.12**

6 Contributor address; City; State; Zip Code  
8438 Golden Stone Ln Fort Mill SC 29707

8 Contributor's principal occupation  
Financial Planner

9 Contributor's job title  
Financial Planner

10 Contributor's employer/law firm  
Elation Wealth LLC

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date  
02/01/2026

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_  
Jessica Collins

Amount of contribution (\$) **\$105.72**

Contributor address; City; State; Zip Code  
1021 West Bear Creek Rd Glenn Heights TX 75154

Contributor's principal occupation  
Attorney

Contributor's job title  
Attorney

Contributor's employer/law firm  
United Firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date  
02/02/2026

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_  
Tommy & Ruth Brown

Amount of contribution (\$) **\$250.00**

Contributor address; City; State; Zip Code  
9550 Shepherd Rd Dallas TX 75243

Contributor's principal occupation  
Pastor

Contributor's job title  
Pastor

Contributor's employer/law firm  
New Mount Zion Baptist Church

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

**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 (JUDICIAL)

## SCHEDULE A(J)1

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1 Total pages Schedule A(J)1:

2 FILER NAME

Tifanee Baker

3 Filer ID (Ethics Commission Filers)

4 Date  
02/05/2026

5 Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_  
Makenzie Zarate

7 Amount of contribution (\$) \$53.12

6 Contributor address; City; State; Zip Code  
6510 Lange Circle Dallas TX 75214

8 Contributor's principal occupation  
Attorney

9 Contributor's job title  
Attorney

10 Contributor's employer/law firm  
Griffith & Associates

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date  
02/05/2026

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_  
Sharyl Zeno

Amount of contribution (\$) \$53.12

Contributor address; City; State; Zip Code  
8340 Meadow Rd Ste. 231 Dallas TX 75231

Contributor's principal occupation  
Court Reporter

Contributor's job title  
Official Court Reporter

Contributor's employer/law firm  
Dallas County

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date  
02/05/2026

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_  
Ilise Lipton

Amount of contribution (\$) \$37.34

Contributor address; City; State; Zip Code  
6945 Walling Lane Dallas TX 75231

Contributor's principal occupation  
Librarian

Contributor's job title  
Librarian

Contributor's employer/law firm  
Dallas Public Library

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

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# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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1 Total pages Schedule A(J)1:

2 FILER NAME

Tifanee Baker

3 Filer ID (Ethics Commission Filers)

4 Date  
02/05/2026

5 Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_  
Cornelia Cifelli

7 Amount of contribution (\$) **\$32.08**

6 Contributor address; City; State; Zip Code

29554 Monona Terrace Court Spring TX 77386

8 Contributor's principal occupation  
Marketing

9 Contributor's job title  
Regional Marketing Director

10 Contributor's employer/law firm  
BlueForge Alliance

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date  
02/06/2026

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_  
Lakendria Edison

Amount of contribution (\$) **\$100.00**

Contributor address; City; State; Zip Code

16402 Battlecreek Drive Houston TX 77095

Contributor's principal occupation  
Real Estate

Contributor's job title  
Realtor

Contributor's employer/law firm  
Klarity Koncierge LLC

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date  
02/06/2026

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_  
Gregg Gallian

Amount of contribution (\$) **\$263.51**

Contributor address; City; State; Zip Code

3500 Maple Ave. Ste 1150 Dallas TX 75219

Contributor's principal occupation  
Attorney

Contributor's job title  
Attorney

Contributor's employer/law firm  
Gallian Firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

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# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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1 Total pages Schedule A(J)1:

2 FILER NAME

Tifanee Baker

3 Filer ID (Ethics Commission Filers)

4 Date  
02/06/2026

5 Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_  
Terry Lockhart

7 Amount of contribution (\$) **\$79.42**

6 Contributor address; City; State; Zip Code  
6400 Farm to Market Rd 423 Frisco TX 75036

8 Contributor's principal occupation  
IT Engineer

9 Contributor's job title  
Senior IT Engineer

10 Contributor's employer/law firm  
The Beck Group

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date  
02/07/2026

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_  
Merdis Buckley

Amount of contribution (\$) **\$105.72**

Contributor address; City; State; Zip Code  
1790 Mercer Pkwy Apt 6305 Farmers Branch TX 75234

Contributor's principal occupation  
Retired

Contributor's job title  
N/A

Contributor's employer/law firm  
N/A

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date  
02/07/2026

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_  
Calvin Johnson

Amount of contribution (\$) **\$105.72**

Contributor address; City; State; Zip Code  
2305 Worthington St 108 Dallas TX 75204

Contributor's principal occupation  
Lawyer

Contributor's job title  
Lawyer

Contributor's employer/law firm  
Self-employed

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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2 FILER NAME <b>Tifanee Baker</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>02/08/2026</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Deandra Grant</b>	7 Amount of contribution (\$) <b>\$789.50</b>
6 Contributor address; City; State; Zip Code <b>2804 Lacompte Drive Dallas TX 75227</b>		
8 Contributor's principal occupation <b>Attorney</b>		9 Contributor's job title <b>Attorney</b>
10 Contributor's employer/law firm <b>Deandra Grant Law</b>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <b>02/08/2026</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Anthony Richardson</b>	Amount of contribution (\$) <b>\$53.12</b>
Contributor address; City; State; Zip Code <b>14175 Dallas Pkwy 1528 Dallas TX 75254</b>		
Contributor's principal occupation <b>Human Resources</b>		Contributor's job title <b>Global Talent Leader</b>
Contributor's employer/law firm <b>Logile</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <b>02/09/2026</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Johnny Lanzillo</b>	Amount of contribution (\$) <b>\$53.12</b>
Contributor address; City; State; Zip Code <b>529 Salem Drive Richardson TX 75080</b>		
Contributor's principal occupation <b>Attorney</b>		Contributor's job title <b>Attorney</b>
Contributor's employer/law firm <b>The Crowder Law Firm, P.C.</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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1 Total pages Schedule A(J)1:

2 FILER NAME  
Tifanee Baker

3 Filer ID (Ethics Commission Filers)

4 Date  
02/09/2026

5 Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_  
Louise Weber

7 Amount of contribution (\$) **\$105.72**

6 Contributor address; City; State; Zip Code  
6169 Woodcrest Lane Dallas TX 75214

8 Contributor's principal occupation  
Retired

9 Contributor's job title  
N/A

10 Contributor's employer/law firm  
N/A

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date  
02/10/2026

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_  
Carmen Mitchell

Amount of contribution (\$) **\$1052.49**

Contributor address; City; State; Zip Code  
3865 West Bay Circle Dallas TX 75214

Contributor's principal occupation  
Attorney

Contributor's job title  
Attorney

Contributor's employer/law firm  
Law Office of Carmen S. Mitchell

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date  
02/11/2026

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_  
Mike Howard

Amount of contribution (\$) **\$526.50**

Contributor address; City; State; Zip Code  
3010 LBJ Fwy Ste 1200 Dallas TX 75234

Contributor's principal occupation  
Attorney

Contributor's job title  
Attorney

Contributor's employer/law firm  
Law Office of Mike Howard

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

**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 (JUDICIAL)

## SCHEDULE A(J)1

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 A(J)1:

2 FILER NAME

Tifanee Baker

3 Filer ID (Ethics Commission Filers)

4 Date  
02/11/2026

5 Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_  
Audrey Blair

7 Amount of contribution (\$) **\$263.51**

6 Contributor address; City; State; Zip Code  
9830 Estacado Dr. Dallas TX 75228

8 Contributor's principal occupation  
Attorney

9 Contributor's job title  
Attorney

10 Contributor's employer/law firm  
Self-employed

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date  
02/11/2026

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_  
Bill Pedersen

Amount of contribution (\$) **\$526.50**

Contributor address; City; State; Zip Code  
9830 Estacado Dr. Dallas TX 75228

Contributor's principal occupation  
Attorney

Contributor's job title  
Attorney

Contributor's employer/law firm  
Carter Arnett, PLLC

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date  
02/12/2026

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_  
Toby Shook

Amount of contribution (\$) **\$526.50**

Contributor address; City; State; Zip Code  
9414 Hermosa Dr Dallas TX 75218

Contributor's principal occupation  
Attorney

Contributor's job title  
Attorney

Contributor's employer/law firm  
Toby Shook

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

**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 (JUDICIAL)

## SCHEDULE A(J)1

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 A(J)1:
2 FILER NAME <b>Tifanee Baker</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>02/15/2026</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Melanie Tillery</b>	7 Amount of contribution (\$) <b>\$500.00</b>
6 Contributor address; City; State; Zip Code <b>4513 Scenic Cir Garland TX 75043</b>		
8 Contributor's principal occupation <b>Attorney</b>		9 Contributor's job title <b>Attorney</b>
10 Contributor's employer/law firm <b>Self-employed</b>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

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

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

**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 (JUDICIAL)

## SCHEDULE A(J)1

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 A(J)1:
2 FILER NAME <b>Tifanee Baker</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>02/14/2026</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Shenea Banks</b>	7 Amount of contribution (\$) <b>\$100.00</b>
6 Contributor address; City; State; Zip Code <b>2416 Sweeping Meadows Ln Cedar Hill TX 75104</b>		
8 Contributor's principal occupation <b>Attorney</b>		9 Contributor's job title <b>Attorney</b>
10 Contributor's employer/law firm <b>Rausch Sturm</b>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <b>02/14/2026</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Jennifer Bennett Campaign</b>	Amount of contribution (\$) <b>\$100.00</b>
Contributor address; City; State; Zip Code <b>133 N Riverfront Blvd Dallas TX 75207</b>		
Contributor's principal occupation <b>Judge</b>		Contributor's job title <b>Judge</b>
Contributor's employer/law firm <b>State of Texas</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <b>02/14/2026</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <b>Ora Smith</b>	Amount of contribution (\$) <b>\$53.12</b>
Contributor address; City; State; Zip Code <b>220 Emory Lane Port Arthur TX 77643</b>		
Contributor's principal occupation <b>Unemployed</b>		Contributor's job title <b>N/A</b>
Contributor's employer/law firm <b>N/A</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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

# 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: <b>1</b>	
2 FILER NAME <b>Tifanee Baker</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <b>02/11/2026</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Geoffrey Schorr</b>	8 Amount of Contribution \$ <b>\$4,623.25</b>	9 In-kind contribution description <b>Campaign Fundraiser Event Expenses</b>
7 Contributor address; City; State; Zip Code <b>328 W Interstate 30 Garland TX 75043</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL) <b>Attorney</b>		13 Contributor's job title (FOR JUDICIAL) (See Instructions) <b>Attorney</b>	
14 Contributor's employer/law firm (FOR JUDICIAL) <b>Schorr Law Firm</b>		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.

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>4</b>	<b>2</b> FILER NAME <b>Tifanee Baker</b>	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date <b>01/23/2026</b>	<b>5</b> Payee name <b>Edwards and Patterson Signs</b>
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<b>6</b> Amount (\$) <b>\$814.04</b>	<b>7</b> Payee address; <b>203 S Belt Line Rd.</b>	City; <b>Irving</b>	State; <b>TX</b>	Zip Code <b>75060</b>
<input type="checkbox"/> Check if individual's residence address.				

<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Printing Expense</b>	<b>(b)</b> Description <b>Yard Signs</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>01/28/2026</b>	Payee name <b>Democracy Toolbox</b>
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Amount (\$) <b>\$2,000.00</b>	Payee address; <b>PO Box 6250</b>	City; <b>McKinney</b>	State; <b>TX</b>	Zip Code <b>75071</b>
<input type="checkbox"/> Check if individual's residence address.				

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Texting Program</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>01/30/2026</b>	Payee name <b>Reilly Echols Printing, Inc.</b>
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Amount (\$) <b>\$5,903.00</b>	Payee address; <b>1710 S Harwood St</b>	City; <b>Dallas</b>	State; <b>TX</b>	Zip Code <b>75215</b>
<input type="checkbox"/> Check if individual's residence address.				

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Printing Expense</b>	Description <b>Mail Printing</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**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                        | 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:	<b>2</b> FILER NAME Tifanee Baker		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 02/05/2026	<b>5</b> Payee name Finishing and Mailing Center			
<b>6</b> Amount (\$) \$9,527.34	<b>7</b> Payee address; 2151 W Commerce St		City; Dallas	State; TX
	<input type="checkbox"/> Check if individual's residence address.		Zip Code 75212	
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Other		<b>(b)</b> Description Mail Postage/Handling	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought	Office held
Date 02/09/2026	Payee name Dallas NAACP			
Amount (\$) \$125.00	Payee address; P.O. Box 765307		City; Dallas	State; TX
	<input type="checkbox"/> Check if individual's residence address.		Zip Code 75376	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Half Page Ad	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought	Office held
Date 02/09/2026	Payee name Democracy Toolbox			
Amount (\$) \$2,000.00	Payee address; P.O. Box 6250		City; McKinney	State; TX
	<input type="checkbox"/> Check if individual's residence address.		Zip Code 75071	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Radio Ads	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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 F1:	2 FILER NAME <b>Tifanee Baker</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>02/12/2026</b>	5 Payee name <b>BHP ETC</b>			
6 Amount (\$) <b>\$211.09</b>	7 Payee address; <b>1026 N. Zang Blvd</b>	City; <b>Dallas</b>	State; <b>TX</b>	Zip Code <b>75208</b>
<input type="checkbox"/> Check if individual's residence address.				

8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Printing Expense</b>	(b) Description <b>Pushcards</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>02/12/2026</b>	Payee name <b>Democracy Toolbox</b>			
Amount (\$) <b>\$1,000.00</b>	Payee address; <b>P.O. Box 6250</b>	City; <b>McKinney</b>	State; <b>TX</b>	Zip Code <b>75071</b>
<input type="checkbox"/> Check if individual's residence address.				

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Radio Ads</b>
	<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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Date <b>02/15/2026</b>	Payee name <b>Donorbox</b>			
Amount (\$) <b>\$188.15</b>	Payee address; <b>1520 Belle View Blvd #4106</b>	City; <b>Alexandria</b>	State; <b>VA</b>	Zip Code <b>22307</b>
<input type="checkbox"/> Check if individual's residence address.				

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Fees</b>	Description <b>Donation Processing Fees</b>
	<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 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.

1 Total pages Schedule F1:	2 FILER NAME <b>Tifanee Baker</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>02/15/2026</b>	5 Payee name <b>PayPal</b>
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6 Amount (\$) <b>\$203.06</b>	7 Payee address; <b>P.O. Box 45950</b>	City; <b>Omaha</b>	State; <b>NE</b>	Zip Code <b>68145</b>
<input type="checkbox"/> Check if individual's residence address.				

8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Fees</b>	(b) Description <b>Donation Processing Fees</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>02/17/2026</b>	Payee name <b>Democracy Toolbox</b>
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Amount (\$) <b>\$500.00</b>	Payee address; <b>P.O. Box 6250</b>	City; <b>McKinney</b>	State; <b>TX</b>	Zip Code <b>75071</b>
<input type="checkbox"/> Check if individual's residence address.				

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Polling Expense</b>	Description <b>Poll Greeting</b>
	<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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Date	Payee name
------	------------

Amount (\$)	Payee address;	City;	State;	Zip Code
<input type="checkbox"/> Check if individual's residence address.				

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete 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**