

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) <div style="text-align: center;">N/A</div>	2 Total pages filed: <div style="text-align: center;">23</div>								
3 CANDIDATE / OFFICEHOLDER NAME	<div style="display: flex; justify-content: space-between;"> <div>MS / MRS / MR <u>Ms.</u></div> <div>FIRST <u>Melissa</u></div> <div>MI <u>J.</u></div> </div> <hr/> <div style="display: flex; justify-content: space-between;"> <div>NICKNAME</div> <div>LAST <u>Bellan</u></div> <div>SUFFIX</div> </div>	OFFICE USE ONLY <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>Date Received <u>2026 JAN 15 AM 10</u></p> <p>Date Hand-delivered or Date Postmarked <u>2026 JAN 15 PM 3:50</u></p> <p>Receipt # _____ Amount \$ _____</p> <p>Date Processed _____</p> <p>Date Imaged _____</p> </div>									
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	<div style="display: flex; justify-content: space-between;"> <div>ADDRESS / PO BOX; <u>9540 Garland Rd</u> <u>Ste 381</u> <u>Box # 303</u></div> <div>APT / SUITE #;</div> <div>CITY; <u>Dallas</u></div> <div>STATE; <u>TX</u></div> <div>ZIP CODE <u>75218</u></div> </div>										
5 CANDIDATE / OFFICEHOLDER PHONE	<div style="display: flex; justify-content: space-between;"> <div>AREA CODE <u>(469)</u></div> <div>PHONE NUMBER <u>601-8870</u></div> <div>EXTENSION</div> </div>										
6 CAMPAIGN TREASURER NAME	<div style="display: flex; justify-content: space-between;"> <div>MS / MRS / MR <u>Ms.</u></div> <div>FIRST <u>Melissa</u></div> <div>MI <u>J.</u></div> </div> <hr/> <div style="display: flex; justify-content: space-between;"> <div>NICKNAME</div> <div>LAST <u>Bellan</u></div> <div>SUFFIX</div> </div>										
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	<div style="display: flex; justify-content: space-between;"> <div>STREET ADDRESS (NO PO BOX PLEASE); <u>9450 Garland Rd.</u> <u>Ste 381 Box 303</u></div> <div>APT / SUITE #;</div> <div>CITY; <u>Dallas</u></div> <div>STATE; <u>TX</u></div> <div>ZIP CODE <u>75218</u></div> </div>	<div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>15th Day after campaign treasurer appointment (Officeholder Only)</p> <p>Final Report (All JC/OH - FR)</p> </div>									
8 CAMPAIGN TREASURER PHONE	<div style="display: flex; justify-content: space-between;"> <div>AREA CODE <u>(469)</u></div> <div>PHONE NUMBER <u>601-8870</u></div> <div>EXTENSION</div> </div>										
9 REPORT TYPE	<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> July 15 </div> <div> <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election </div> <div> <input type="checkbox"/> Runoff <input type="checkbox"/> Exceeded Modified Reporting Limit </div> </div>										
10 PERIOD COVERED	<div style="display: flex; justify-content: space-between;"> <div> Month <u>7</u> / Day <u>1</u> / Year <u>2025</u> </div> <div>THROUGH</div> <div> Month <u>12</u> / Day <u>31</u> / Year <u>2025</u> </div> </div>										
11 ELECTION	<div style="display: flex; justify-content: space-between;"> <div> ELECTION DATE Month <u>3</u> / Day <u>3</u> / Year <u>26</u> </div> <div> ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Runoff <input type="checkbox"/> Special <input type="checkbox"/> Other Description _____ </div> </div>										
12 OFFICE	OFFICE HELD (if any) <u>Judge CCL No 2</u>	13 OFFICE SOUGHT (if known) <u>Judge CCL No 2</u>									
14 NOTICE FROM POLITICAL COMMITTEE(S)	<p>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.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 20%; padding: 5px;">COMMITTEE TYPE</td> <td style="padding: 5px;">COMMITTEE NAME</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> GENERAL</td> <td style="padding: 5px;">COMMITTEE ADDRESS</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> SPECIFIC</td> <td style="padding: 5px;">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td style="padding: 5px;"></td> <td style="padding: 5px;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>			COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS
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

JUDICIAL CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT
FORM JC/OH
COVER SHEET PG 2

15 JC/OH NAME Melissa J. Bellan
16 Filer ID (Ethics Commission Filers) 212

17 CONTRIBUTION TOTALS	1. PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY	\$	0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	53,456.00
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$	824.78
EXPENDITURE TOTALS	4. TOTAL POLITICAL EXPENDITURES	\$	20,355.25
	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$	165,778.67
CONTRIBUTION BALANCE	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0
OUTSTANDING LOAN TOTALS			

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/Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL
Sworn to and subscribed before me by _____ this the _____ day of _____, _____, to certify which, witness my hand and seal of office.
20 _____

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

(2) Unsworn Declaration

My name is Melissa J. Bellan, and my date of birth is 10/21/77
My address is 9540 Garland Rd Ste 381 Box 303, Dallas, TX, 75218 (zip code) (state) (city) (country)
Executed in Dallas County, State of Texas, on the 15 day of January, 2020 (month) (year)
Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - JC/OH

FORM JC/OH
COVER SHEET PG 3

19 FILER NAME

Melissa J. Bellan

20 Filer ID (Ethics Commission Filers)

N/A

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.

SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS

\$ 53,450.00

2.

SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

\$

3.

SCHEDULE B: PLEDGED CONTRIBUTIONS

\$

4.

SCHEDULE E: LOANS

\$

5.

SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

\$ 19,530.47

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 (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: <i>10</i>
2 FILER NAME: <i>Melissa J. Bellan</i>		3 Filer ID (Ethics Commission Filers) <i>N/A</i>
4 Date <i>7/12/25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <i>Carol Crabtree Dunovan</i>	7 Amount of contribution (\$) <i>500.00</i>
6 Contributor address; City; State; Zip Code <i>6335 E. Mockingbird Ln Dallas TX 75214</i> <i>Ste. 147 Box 800</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Self</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>7/14/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <i>Barn + Blue</i>	Amount of contribution (\$) <i>5000.00</i>
Contributor address; City; State; Zip Code <i>25 Highland Park Vlg Dallas TX 75205</i> <i>Ste 100-772</i>		
Contributor's principal occupation <i>Law Firm</i>		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 <i>7/12/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <i>Lynns & Simmons, LLP</i>	Amount of contribution (\$) <i>5000.00</i>
Contributor address; City; State; Zip Code <i>2101 Cedar Springs Dallas TX 75201</i> <i>Ste 1900</i>		
Contributor's principal occupation <i>Law Firm</i>		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: 10
2 FILER NAME Melissa J. Bellan		3 Filer ID (Ethics Commission Filers)
4 Date 7/12/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: The Law Offices of Domingo A. Garcia, PC. 6 Contributor address; City; State; Zip Code 1111 W. Mockingbird Ln Dallas TX 75217 Ste 1200	7 Amount of contribution (\$) 2500.00
8 Contributor's principal occupation Law Firm		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 7/12/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Lynn Pinker Hurst + Schweigman, LLP Contributor address; City; State; Zip Code 2100 Ross Ave Dallas TX 75201 Ste. 2700	Amount of contribution (\$) 2500.00
Contributor's principal occupation Law Firm		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 7/12/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Sommerman, McCafferty, Quesada & Geisler, LLP Contributor address; City; State; Zip Code 3811 Turtle Creek Blvd. Dallas, TX 75219 Ste 1400	Amount of contribution (\$) 5000.00
Contributor's principal occupation Law Firm		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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <i>10</i>
2 FILER NAME <i>Melissa J. Bellan</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>7/12/25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <i>Hamilton Wingo, LLP</i>	7 Amount of contribution (\$) <i>5000.00</i>
6 Contributor address; City; State; Zip Code <i>325 N. St. Paul Dallas TX 75201</i> <i>St. 3600</i>		
8 Contributor's principal occupation <i>Law Firm</i>		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>7/12/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <i>Arnold & Itkin, LLP</i>	Amount of contribution (\$) <i>5000.00</i>
Contributor address; City; State; Zip Code <i>6009 Memorial Drive Houston TX 77007</i>		
Contributor's principal occupation <i>Law Firm</i>		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 <i>7/12/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <i>Witherite Law Group</i>	Amount of contribution (\$) <i>5000.00</i>
Contributor address; City; State; Zip Code <i>10440 N. Central Dallas TX 75231</i> <i>Exy Ste. 400</i>		
Contributor's principal occupation <i>Law Firm</i>		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)		

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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: <i>10</i>
2 FILER NAME <i>Melissa J. Bellan</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>7/2/25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <i>Michael Lym</i>	7 Amount of contribution (\$) <i>5000.00</i>
6 Contributor address; City; State; Zip Code <i>2101 Cedar Springs Suite 1960 Dallas TX 75201</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Lym + Simmons, LLP</i>		11 Law firm of contributor's spouse (if any) <i>N/A</i>
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>7/11/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <i>Linda Turley</i>	Amount of contribution (\$) <i>500.00</i>
Contributor address; City; State; Zip Code <i>5942 Richmond Ave. Dallas, TX 75206</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Turley Law Firm</i>		Law firm of contributor's spouse (if any) <i>N/A</i>
If contributor is a child, law firm of parent(s) (if any)		

Date <i>7/16/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <i>Amanda Reichel</i>	Amount of contribution (\$) <i>100.00</i>
Contributor address; City; State; Zip Code <i>93431 Waterview Road Dallas TX 75219</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Tillotson, Johnson + Patton</i>		Law firm of contributor's spouse (if any) <i>N/A</i>
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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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 10
2 FILER NAME Melissa J. Bellan		3 Filer ID (Ethics Commission Filers)
4 Date 8/15/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Andrew Korn	7 Amount of contribution (\$) 5000.00
6 Contributor address; City; State; Zip Code 4221 Arndale Ave. Dallas, TX 75219		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Andrew R. Korn, PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 9/9/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Dawn Estes Contributor address; City; State; Zip Code 3811 Turtle Creek Blvd Dallas TX 75219	Amount of contribution (\$) 500.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Estes Thorne Ewing & Payne PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 9/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Terrie Bryan Contributor address; City; State; Zip Code 4516 Lovers Lane Dallas TX 75225 #259	Amount of contribution (\$) 100.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Terrie (Jeneane) Bryan		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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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 10
2 FILER NAME Melissa J. Bellan		3 Filer ID (Ethics Commission Filers)
4 Date 10/28/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: David Clouston	7 Amount of contribution (\$) 2500.00
6 Contributor address; City; State; Zip Code 6339 Azalca Lane Dallas TX 75230		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Sessions		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/28/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Patrick Watson	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 1608 Glade Forest Drive Dallas, TX 75218		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Best, Watson & Gilbert		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/28/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Kelly Liebke	Amount of contribution (\$) 1000.00
Contributor address; City; State; Zip Code 10440 North Central Expwy Dallas, TX 75231		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self		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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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 10
2 FILER NAME Melissa J. Bella		3 Filer ID (Ethics Commission Filers)
4 Date 10/28/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Shannon Hays	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 1015 Clove Glen Court Allen TX 75002		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Nadler Law PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/28/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Amy Hefner	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 4503 Byron Cir. Irving TX 75138		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm McCraw Law Group		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/28/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Ori Raphael	Amount of contribution (\$) 2500.00
Contributor address; City; State; Zip Code 13101 Preston Rd. Ste 601 Dallas TX 75240		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm MR Law		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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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 10
2 FILER NAME Melissa J. Bellan		3 Filer ID (Ethics Commission Filers)
4 Date 10/29/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: David Kent	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 6 Twin Bridge Ct. Dallas TX 75243		
8 Contributor's principal occupation Atty		9 Contributor's job title Atty
10 Contributor's employer/law firm Fegre Drinker		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/29/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Robbie Partida- Kipness	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 4435 Mill Run Rd. Dallas TX 75244		
Contributor's principal occupation Atty Visiting Judge		Contributor's job title Atty Visiting judge
Contributor's employer/law firm State of Texas		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/29/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Kimberly Simms	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 15443 Knoll Trail, Ste 100 Dallas TX 75248		
Contributor's principal occupation Atty		Contributor's job title Atty
Contributor's employer/law firm Palter Law		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 <i>Melissa J Bellan</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>10/29/25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Cory Carlson</i>	7 Amount of contribution (\$) <i>100.00</i>
6 Contributor address; City; State; Zip Code <i>3890 W. Northwest Hwy Dallas TX 75220</i>		
8 Contributor's principal occupation <i>Atty</i>		9 Contributor's job title <i>Atty</i>
10 Contributor's employer/law firm <i>Grossman Law Offices</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>10/2/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Alison Clement</i>	Amount of contribution (\$) <i>100.00</i>
Contributor address; City; State; Zip Code <i>2626 Cole Ave Ste 300 Dallas TX 75204</i>		
Contributor's principal occupation <i>Atty</i>		Contributor's job title <i>Atty</i>
Contributor's employer/law firm <i>Battiste Clement PLLC</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>11/28/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Michele Wong Krause</i>	Amount of contribution (\$) <i>150.00</i>
Contributor address; City; State; Zip Code <i>7735 Multrany Dr Dallas TX 75248</i>		
Contributor's principal occupation <i>Atty</i>		Contributor's job title <i>Atty</i>
Contributor's employer/law firm <i>The Wong Krause Law Firm</i>		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: 10
2 FILER NAME Melissa J. Bellan		3 Filer ID (Ethics Commission Filers)
4 Date 10/29/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Paul Beigelman	7 Amount of contribution (\$) 50.00
6 Contributor address; City; State; Zip Code 18034 Ventura Blvd. Encino CA 91316		
8 Contributor's principal occupation unemployed		9 Contributor's job title unemployed
10 Contributor's employer/law firm unemployed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/29/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Charlie Hudebeck	Amount of contribution (\$) 1000.00
Contributor address; City; State; Zip Code 675 E Royal Ln Irving TX 75039		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/29/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Edward Sampson	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 10006 N. Central Expwy Dallas TX 75231		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law offices of Edward Sampson		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.

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: 10	2 FILER NAME Melissa J. Bellan	3 Filer ID (Ethics Commission Filers)
4 Date 7/31/25	5 Payee name Haywire - UPT	
6 Amount (\$) 158.19	7 Payee address; 1920 McKinney Ave Ste. 100	City; State; Zip Code Dallas TX 75201
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Bev Exp	(b) Description staff luncheon
	(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	Office sought Office held

Date 8/11/25	Payee name Target		
Amount (\$) 545.14	Payee address; online	City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office overhead	Description Supplies	
	<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 8/19/25	Payee name Barnes + Noble		
Amount (\$) 212.53	Payee address; 190 Cedar Sage Dr. Unit B001	City; State; Zip Code Garland TX 75040	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description Books	
	<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
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: 10	2 FILER NAME Melissa C. Bellan	3 Filer ID (Ethics Commission Filers)
4 Date 8/20/25	5 Payee name Bouqs.com	
6 Amount (\$) 106.09	7 Payee address; City; State; Zip Code online	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials	(b) Description Flowers for staff birthday
	(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 Office sought Office held		
Date 8/21/25	Payee name Amazon.com	
Amount (\$) 249.51	Payee address; City; State; Zip Code online	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office overhead	Description Jury room supplies
	<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 8/29/25	Payee name Amazon.com	
Amount (\$) 320.42	Payee address; City; State; Zip Code online	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office overhead	Description Toner / Office supplies
	<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: 10	2 FILER NAME Melissa J. Bellan	3 Filer ID (Ethics Commission Filers)
4 Date 8/25/25	5 Payee name Barnes + Noble	
6 Amount (\$) 228.25	7 Payee address; 190 Cedar Sage Dr. Unit B801	City; State; Zip Code Garland TX 75040
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) other	(b) Description books
	(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 Office sought Office held		
Date 8/25/25	Payee name Barnes + Noble cm	
Amount (\$) 193.95	Payee address; online	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) other	Description Books / ref materials
	<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 8/28/25	Payee name State Bar of Texas	
Amount (\$) 703.00	Payee address; online	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description State Bar dues
	<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

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: 10	2 FILER NAME Melissa J. Bellan	3 Filer ID (Ethics Commission Filers)
4 Date 8/29/25	5 Payee name Itillstone Restaurant	
6 Amount (\$) 302.48	7 Payee address; City; State; Zip Code 8300 Preston Rd. Dallas, TX 75225	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food / Bev	(b) Description Lunch w/ VJs
	(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	Office sought Office held
Date 9/2/25	Payee name Medium Rare	
Amount (\$) 113.54	Payee address; City; State; Zip Code 5631 Alto Ave Dallas TX 75206	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food / Bev	Description Dinner mtg
	<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 9/4/25	Payee name Howard Wang's China Grill	
Amount (\$) 107.96	Payee address; City; State; Zip Code 921 W. Commerce St Dallas TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food / Bev	Description Staff Lunch
	<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

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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: <div style="text-align: center;">10</div>	2 FILER NAME <div style="text-align: center;">Melissa J. Bellan</div>		3 Filer ID (Ethics Commission Filers)
4 Date <div style="text-align: center;">9/3/25</div>	5 Payee name <div style="text-align: center;">Democracy Toolbox</div>		
6 Amount (\$) <div style="text-align: center;">3500.00</div>	7 Payee address; City; State; Zip Code <div style="text-align: center;">P.O. Box 6250 McKinney TX 75071</div>		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <div style="text-align: center;">Consulting Expense</div>		(b) Description <div style="text-align: center;">Consulting fees</div>
	(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 <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>			
<div style="display: flex;"> <div style="width:20%;">Date <div style="text-align: center;">9/8/25</div></div> <div style="width:80%;">Payee name <div style="text-align: center;">Juniper Books.com</div></div> </div>			
<div style="display: flex;"> <div style="width:20%;">Amount (\$) <div style="text-align: center;">323.85</div></div> <div style="width:80%;">Payee address; City; State; Zip Code <div style="text-align: center;">Online</div></div> </div>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="text-align: center;">Gifts/Awards</div>		Description <div style="text-align: center;">Holiday gifts for staff</div>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<div style="display: flex;"> <div style="width:20%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</div> <div style="width:80%;"> <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> </div> </div>			
<div style="display: flex;"> <div style="width:20%;">Date <div style="text-align: center;">9/22/25</div></div> <div style="width:80%;">Payee name <div style="text-align: center;">JL Turner Legal Association</div></div> </div>			
<div style="display: flex;"> <div style="width:20%;">Amount (\$) <div style="text-align: center;">500.00</div></div> <div style="width:80%;">Payee address; City; State; Zip Code <div style="text-align: center;">online</div></div> </div>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="text-align: center;">Gift/Awards</div>		Description <div style="text-align: center;">Scholarship fund</div>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<div style="display: flex;"> <div style="width:20%;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</div> <div style="width:80%;"> <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> </div> </div>			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 10	2 FILER NAME Melissa J. Bellan	3 Filer ID (Ethics Commission Filers)
4 Date 9/22/25	5 Payee name SL Turner Legal Assoc	
6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code online	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts / Awards	(b) Description Scholarship fund
	(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 Office sought Office held		
Date 10/14/25	Payee name Amazon. com	
Amount (\$) 350.32	Payee address; City; State; Zip Code online	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) office overhead	Description supplies
	<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 10/14/25	Payee name Amazon. com	
Amount (\$) 298.78	Payee address; City; State; Zip Code online	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) office overhead	Description Supplies
	<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

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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: 10	2 FILER NAME Melissa J. Bellan	3 Filer ID (Ethics Commission Filers)
4 Date 10/20/25	5 Payee name American Inn of Courts	
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code online	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Membership fee
	(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 Office sought Office held		

Date 10/21/25	Payee name Democracy Toolbox		
Amount (\$) 3375.00	Payee address; City; State; Zip Code P.O. Box 6250 - McKinney TX 75071		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Consulting	
	<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 10/24/25	Payee name Reilly Echols Printing		
Amount (\$) 351.57	Payee address; City; State; Zip Code 1710 S. Harwood St. Dallas TX 75315		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Lit printing	
	<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

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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: 11	2 FILER NAME Melissa J. Bellan	3 Filer ID (Ethics Commission Filers)
4 Date 11/3/25	5 Payee name CVS	
6 Amount (\$) 246.08	7 Payee address; City; State; Zip Code 8555 Ferguson Rd. Dallas TX 75228	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts / Awards	(b) Description Clerk/Card event gift cards
	(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 Office sought Office held		
Date 11/3/25	Payee name Barnes + Noble	
Amount (\$) 147.41	Payee address; City; State; Zip Code 190 Cedar Sage Unit B801 Garland TX 75040	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) other	Description Books / jury room supplies
	<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 11/18/25	Payee name Democracy Toolbox	
Amount (\$) 3150.00	Payee address; City; State; Zip Code P.O. Box 6250 McKinney TX 75071	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Consulting fee
	<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		

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: 10	2 FILER NAME Melissa J. Bellan	3 Filer ID (Ethics Commission Filers)
4 Date 12/3/25	5 Payee name Dallas County Democratic Party	
6 Amount (\$) 2500.00	7 Payee address; City; State; Zip Code 1414 N. Washington Ave Dallas TX 75204	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	
	(b) Description Election filing fee	
	(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 Office sought Office held		
Date 12/5/25	Payee name Hillstone Restaurant	
Amount (\$) 109.48	Payee address; City; State; Zip Code 8300 Preston Rd Dallas TX 75225	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Bev	
	Description Holiday Lunch	
	<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 12/9/25	Payee name Democracy Toolbox	
Amount (\$) 270.00	Payee address; City; State; Zip Code P.O. Box 6250 McKinney TX 75071	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	
	Description Tamalefest + Pastor BBQ	
	<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: 10	2 FILER NAME Melissa J. Bellan	3 Filer ID (Ethics Commission Filers)
4 Date 12/22/25	5 Payee name Culinary Dropout	
6 Amount (\$) 109.85	7 Payee address; City; State; Zip Code 150 Turtle Creek Blvd #101 Dallas TX 75207	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/ Bev	
	(b) Description Lunch	
	(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 Office sought Office held		
Date 12/24/25	Payee name Hillstone	
Amount (\$) 287.07	Payee address; City; State; Zip Code 8300 Preston Rd Dallas TX 75225	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/ Bev	
	Description Judge's Lunch	
	<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	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
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 <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