

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

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

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY			
	NICKNAME	LAST	SUFFIX				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	Date Received JAN 15 '26 PM 5:00 BY JOHN F. SKRIN COUNTY CLERK DALLAS COUNTY DEPUTY 2026 JAN 15 AM 8:31 FILED	
<input type="checkbox"/> Change of Address	3024 Cedar Springs Rd #253 Dallas, TX 75219						
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked			
	(214)	422-4350					
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Receipt #	Amount		
	NICKNAME	LAST	SUFFIX	Date Processed			
	Mr. Chris						
		Wesley		Date Imaged			
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;			CITY;	STATE;	ZIP CODE	
	3152 Sauchang Dr. Cedar Hill, TX 75104						
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(214)	927-8414					
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)						
10 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
	12	/	25		12	/	31 / 22
11 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	
	3	/	2 / 25	<input type="checkbox"/> General	<input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)			
				Dallas County Crim. Dist. 14th			
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.						
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS					
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRESS					

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 9/10
2 FILER NAME Amber Given		3 Filer ID (Ethics Commission Filers)
4 Date 12/17/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorrand Hill	7 Amount of contribution (\$) \$500
6 Contributor address; City; State; Zip Code PO Box 925 DeSoto TX 75123		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) self
Date 12/22/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valerie Baskin	Amount of contribution (\$) \$1,500
Contributor address; City; State; Zip Code 251 W. Lancaster Ave Unit 1222 Fort Worth TX 76101		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self
Date 12/19/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kristen Bogan	Amount of contribution (\$) \$50
Contributor address; City; State; Zip Code 1970 Windsor Creek Dr SW Conyers, GA 30094		
Principal occupation / Job title (See Instructions) Adjuster		Employer (See Instructions) unknown
Date 12/20/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kontra Brooks	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1529 Aberdeen Dr. Lancaster TX 75134		
Principal occupation / Job title (See Instructions) unknown		Employer (See Instructions) unknown
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <i>10/10</i>
2 FILER NAME <i>Amber Given</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>12/31/25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kambridge Jones</i>	7 Amount of contribution (\$) <i>\$250</i>
6 Contributor address; City; State; Zip Code <i>200 S. Ryan Dr #7105 Red Oak, TX 75154</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>12/31/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Katrina Caldwell</i>	Amount of contribution (\$) <i>\$50</i>
Contributor address; City; State; Zip Code <i>4220 Sloane St. Apt. 3023 Carrollton, TX 75007</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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JAN 15 6 45:00

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5/10
2 FILER NAME Amber Green		3 Filer ID (Ethics Commission Filers)
4 Date 12/15/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Theodore Whitaker II	7 Amount of contribution (\$) \$25
6 Contributor address; City; State; Zip Code 3728 Lismore St Flossmoor, IL 60422		
8 Principal occupation / Job title (See Instructions) unknown		9 Employer (See Instructions) unknown
Date 12/11/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dupe Kadri	Amount of contribution (\$) \$100
Contributor address; City; State; Zip Code 3151 Fledgling Cir. Woodbridge, VA 22143		
Principal occupation / Job title (See Instructions) unknown		Employer (See Instructions) unknown
Date 12/11/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carmen Davis	Amount of contribution (\$) \$100
Contributor address; City; State; Zip Code 684 Arbol Irving, TX		
Principal occupation / Job title (See Instructions) notary		Employer (See Instructions) self employed
Date 12/11/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacob Zachariah	Amount of contribution (\$) \$100
Contributor address; City; State; Zip Code 1134 Ballantyne Dallas TX 75200		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self employed

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <i>6/10</i>
2 FILER NAME <i>Amber Given S</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>12/13/25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Tulani Washington</i>	7 Amount of contribution (\$) <i>\$2,000</i>
6 Contributor address; City; State; Zip Code <i>2626 Cole Ave Dallas, TX 75204</i>		
8 Principal occupation / Job title (See Instructions) <i>Attorney</i>		9 Employer (See Instructions) <i>self employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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JAN 15 26 PM 5:00

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7/10
2 FILER NAME Amber Given S		3 Filer ID / (Ethics Commission Filers)
4 Date 12/29/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steven Hayes	7 Amount of contribution (\$) \$100
6 Contributor address; City; State; Zip Code 1459 Oxbow Dr. Cedar Hill TX 75104		
8 Principal occupation / Job title (See Instructions) Unknown		9 Employer (See Instructions) Unknown
Date 12/29/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardell Hunter	Amount of contribution (\$) \$10
Contributor address; City; State; Zip Code 700 Mirkes Pkwy De Soto, TX 75115		
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 12/29/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ty Holmes	Amount of contribution (\$) \$500
Contributor address; City; State; Zip Code 140 Richardson St SE Atlanta GA 30312		
Principal occupation / Job title (See Instructions) Aviation		Employer (See Instructions) Unknown
Date 12/29/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TR Washington Law Office	Amount of contribution (\$) \$ 2,200
Contributor address; City; State; Zip Code 2626 Cole Ave Ste 200 Dallas TX 75204		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self employed
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