

# 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: <div style="font-size: 24px; text-align: center;">13</div>							
3 CANDIDATE / OFFICEHOLDER NAME	<div style="display: flex; justify-content: space-between;"> <span>MS / MRS / MR</span> <span>FIRST</span> <span>MI</span> </div> <div style="text-align: center; font-size: 24px; margin-top: 10px;">Lisa</div> <hr style="border: 0; border-top: 1px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <span>NICKNAME</span> <span>LAST</span> <span>SUFFIX</span> </div> <div style="text-align: center; font-size: 24px; margin-top: 10px;">Green</div>		<b>OFFICE USE ONLY</b>  <div style="border: 1px solid black; padding: 5px; margin: 5px;"> Date Received   <div style="font-size: 18px; transform: rotate(-90deg); display: inline-block;">FILED</div> <div style="font-size: 18px; transform: rotate(-90deg); display: inline-block;">2026 JAN 15 AM 8:07</div> <div style="font-size: 18px; transform: rotate(-90deg); display: inline-block;">JOHN F. GREEN COUNTY CLERK DALLAS COUNTY</div> </div> <div style="border: 1px solid black; padding: 5px; margin: 5px;"> Date Hand-delivered or Date Postmarked   </div> <div style="border: 1px solid black; padding: 5px; margin: 5px;"> Receipt #   </div> <div style="border: 1px solid black; padding: 5px; margin: 5px;"> Date Processed   </div> <div style="border: 1px solid black; padding: 5px; margin: 5px;"> Date Imaged   </div>							
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	<div style="display: flex; justify-content: space-between;"> <span>ADDRESS / PO BOX;</span> <span>APT / SUITE #;</span> <span>CITY;</span> <span>STATE;</span> <span>ZIP CODE</span> </div> <div style="font-size: 24px; margin-top: 10px;">1442 Oxbow Drive, Cedar Hill.</div> <div style="font-size: 24px; margin-top: 10px;">TX 75104</div>									
5 CANDIDATE / OFFICEHOLDER PHONE	<div style="display: flex; justify-content: space-between;"> <span>AREA CODE</span> <span>PHONE NUMBER</span> <span>EXTENSION</span> </div> <div style="font-size: 24px; margin-top: 10px;">(682) 553-1994</div>									
6 CAMPAIGN TREASURER NAME	<div style="display: flex; justify-content: space-between;"> <span>MS / MRS / MR</span> <span>FIRST</span> <span>MI</span> </div> <div style="text-align: center; font-size: 24px; margin-top: 10px;">Alicia</div> <hr style="border: 0; border-top: 1px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <span>NICKNAME</span> <span>LAST</span> <span>SUFFIX</span> </div> <div style="text-align: center; font-size: 24px; margin-top: 10px;">Brown-Young</div>									
7 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	<div style="display: flex; justify-content: space-between;"> <span>STREET ADDRESS (NO PO BOX PLEASE);</span> <span>APT / SUITE #;</span> <span>CITY;</span> <span>STATE;</span> <span>ZIP CODE</span> </div> <div style="font-size: 24px; margin-top: 10px;">1503. Halsey Drive, Duncanville, TX 75137</div>									
8 CAMPAIGN TREASURER PHONE	<div style="display: flex; justify-content: space-between;"> <span>AREA CODE</span> <span>PHONE NUMBER</span> <span>EXTENSION</span> </div> <div style="font-size: 24px; margin-top: 10px;">(214) 542-9148</div>									
9 REPORT TYPE	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input checked="" type="checkbox"/> January 15</div> <div style="width: 50%;"><input type="checkbox"/> 30th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Runoff</div> <div style="width: 50%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</div> <div style="width: 50%;"><input type="checkbox"/> July 15</div> <div style="width: 50%;"><input type="checkbox"/> 8th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Exceeded Modified Reporting Limit</div> <div style="width: 50%;"><input type="checkbox"/> Final Report (Attach C/OH - FR)</div> </div>									
10 PERIOD COVERED	<div style="display: flex; justify-content: space-between;"> <div> Month      Day      Year  <div style="font-size: 24px;">7 / 1 / 2025</div> </div> <div>THROUGH</div> <div> Month      Day      Year  <div style="font-size: 24px;">12 / 31 / 2025</div> </div> </div>									
11 ELECTION	<div style="display: flex; justify-content: space-between;"> <div> ELECTION DATE  Month      Day      Year  <div style="font-size: 24px;">3 / 3 / 2026</div> </div> <div> ELECTION TYPE  <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> Runoff    <input type="checkbox"/> Other Description  <input type="checkbox"/> General    <input type="checkbox"/> Special </div> </div>									
12 OFFICE	OFFICE HELD (if any) <div style="font-size: 24px;">Presiding Judge County Criminal Court #5</div>	13 OFFICE SOUGHT (if known)								
14 NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> Additional Pages	<div style="font-size: 10px;">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.</div> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 10px;"> <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 <u>Lisa Green</u>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ <u>0</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>5,930.81</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$ <u>0</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>2,128.27</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>3,803.37</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>0</u>

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.

*Lisa Green*  
Signature of Candidate/Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Lisa Green this the 12<sup>th</sup> day of January, 2020, 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

OR

(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\_\_\_\_.

(month) (year)

\_\_\_\_\_  
Signature of Candidate/Officeholder (Declarant)



# SUBTOTALS - JC/OH

FORM JC/OH  
COVER SHEET PG 3

19 FILER NAME

*Lisa Green*

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5,930.81
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
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	\$ 2,128.27
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>6</b>
2 FILER NAME <b>Lisa Green</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>7/2/25</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <b>Semay Garrett</b>	7 Amount of contribution (\$) <b>\$500.00</b>
6 Contributor address; City; State; Zip Code <b>2000 E. Lamar Blvd, Arlington, TX 76010</b>		
8 Contributor's principal occupation <b>Lawyer</b>		9 Contributor's job title <b>Attorney</b>
10 Contributor's employer/law firm <b>The Garrett Law Office PLLC</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>7/2/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <b>L. Charles Humphreys</b>	Amount of contribution (\$) <b>\$ 200.00</b>
Contributor address; City; State; Zip Code <b>11300 N. Central Expressway Ste 430 Dallas, TX 75243</b>		
Contributor's principal occupation <b>Lawyer</b>		Contributor's job title <b>Attorney</b>
Contributor's employer/law firm <b>Humphreys and Peterson</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

  

Date <b>11/5/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <b>Stripe, Inc</b>	Amount of contribution (\$) <b>\$1.60</b>
Contributor address; City; State; Zip Code <b>354 Oyster Point Blvd, S. San Francisco, CA 94080</b>		
Contributor's principal occupation <b>Payment Processing</b>		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: 6
2 FILER NAME Lisa Green		3 Filer ID (Ethics Commission Filers)
4 Date 11/6/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Randel Cross	7 Amount of contribution (\$) \$94.80
6 Contributor address; City; State; Zip Code 3500 Oak Lawn Ave, Dallas, TX 75249		
8 Contributor's principal occupation Lawyer		9 Contributor's job title Attorney
10 Contributor's employer/law firm Law Office of Randel Cross		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date 11/7	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Charles Maduka	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 3917 W. Sublett Rd, Arlington, TX		
Contributor's principal occupation Legal		Contributor's job title Attorney
Contributor's employer/law firm Law Office of Charles Maduka		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 11/12/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: James Brian Hawkins II	Amount of contribution (\$) \$150.00
Contributor address; City; State; Zip Code 228 Crescent Ridge Drive, Fort Worth, TX 76140		
Contributor's principal occupation Legal		Contributor's job title Attorney & Counselor at Law
Contributor's employer/law firm Law Office of James Brian Hawkins II		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: 6
2 FILER NAME Lisa Green		3 Filer ID (Ethics Commission Filers)
4 Date 11/12/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Daniel Duane Johnson	7 Amount of contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 805 Sleepy Hollow Dr, Cedar Hill, TX 75104		
8 Contributor's principal occupation		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 11/12/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Semaj Garrett	Amount of contribution (\$) \$200.00
Contributor address; City; State; Zip Code 2000 E. Lamar Blvd, Arlington, TX 76006		
Contributor's principal occupation Legal		Contributor's job title Attorney at Law
Contributor's employer/law firm The Garrett Law Office PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 11/12/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Taylor R. Johnson	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 900 Jackson St., Ste 650, Dallas, TX 75202		
Contributor's principal occupation Legal		Contributor's job title Attorney at Law
Contributor's employer/law firm Taylor Johnson Attorney at 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**  
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:

6

2 FILER NAME

Lisa Green

3 Filer ID (Ethics Commission Filers)

4 Date

11/12/25

5 Full name of contributor

☐ out-of-state PAC ID#:

Thomas Hunter

7 Amount of contribution (\$)

\$300.00

6 Contributor address;

City;

State;

Zip Code

600 W. John Carpenter Fwy, Ste 276  
Irving, TX 75062

8 Contributor's principal occupation

Legal

9 Contributor's job title

Attorney

10 Contributor's employer/law firm

Thomas Hunter Law Group, PLLC

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

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

Date

11/12/25

Full name of contributor

☐ out-of-state PAC ID#:

Stripe, Inc. - electronic donations  
ACH

Amount of contribution (\$)

\$1,049.97

Contributor address;

City;

State;

Zip Code

354 Oyster Point Blvd, San Francisco, CA  
94080

Contributor's principal occupation

Payment Processing (campaign contributors)

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

11/14/25

Full name of contributor

☐ out-of-state PAC ID#:

Stripe, Inc. - electronic donations  
ACH

Amount of contribution (\$)

\$631.84

Contributor address;

City;

State;

Zip Code

354 Oyster Point Blvd, San Francisco, CA  
94080

Contributor's principal occupation

Payment Processing (campaign contributors)

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: <b>6</b>
2 FILER NAME <b>Lisa Green</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>11/17/25</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <b>Stripe, Inc. - electronic donations ACH</b>	7 Amount of contribution (\$) <b>\$248.17</b>
6 Contributor address; City; State; Zip Code <b>354 Oyster Point Blvd, San Francisco, CA 94080</b>		
8 Contributor's principal occupation <b>Payment Processing (Campaign Contributions)</b>		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 <b>11/18/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <b>Stripe Inc. electronic ACH donations</b>	Amount of contribution (\$) <b>\$485.62</b>
Contributor address; City; State; Zip Code <b>354 Oyster Point Blvd, San Francisco, CA 94080</b>		
Contributor's principal occupation <b>Payment Processing (Campaign Contributions)</b>		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 <b>11/28/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <b>Stripe Inc. electronic ACH donations</b>	Amount of contribution (\$) <b>\$475.20</b>
Contributor address; City; State; Zip Code <b>354 Oyster Point Blvd, San Francisco, CA 94080</b>		
Contributor's principal occupation <b>Payment Processing (Campaign Contributions)</b>		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: <b>6</b>
2 FILER NAME <b>Lisa Green</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>12/8/25</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <b>Stripe, Inc. electronic ACH</b>	7 Amount of contribution (\$) <b>\$496.36</b>
6 Contributor address; City; State; Zip Code <b>354 Oyster Point Blvd, San Francisco, CA 94080</b>		
8 Contributor's principal occupation <b>Payment Processing (Campaign Contributor)</b>		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 <b>12/8/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <b>Stripe, Inc. electronic ACH donations</b>	Amount of contribution (\$) <b>\$47.25</b>
Contributor address; City; State; Zip Code <b>354 Oyster Point Blvd, San Francisco, CA 94080</b>		
Contributor's principal occupation <b>Payment Processing (Campaign Contributor)</b>		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#:	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
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.

customer_j	created	name	description	email	net_volume	gross_volume	payment_c	refund_vol
Guest	9/17/2021 0:30	BILL KNOX		BILLKNOX@	1000	1000	1	0
Guest	11/7/2025 19:40	Randel Cross		texasattorr	1000	1000	1	0
Guest	12/4/2025 2:47	Jesus Marquez		wantedmai	522.24	522.24	1	0
Guest	11/25/2025 23:01	William Knox		billknox@o	500	500	1	0
Guest	11/13/2025 13:16	Tulani Washington		trwashingt	261.28	261.28	1	0
Guest	11/14/2025 0:58	Monique Ward		ward_moni	261.28	261.28	1	0
Guest	11/12/2025 4:00	Myra McIntosh		lawyermyr	261.28	261.28	1	0
Guest	11/14/2025 14:09	Rosalyn Lark		rdlark1@gr	250	250	1	0
Guest	11/12/2025 21:23	Kenneth Weatherspoo		KJWSpoon	200	200	1	0
Guest	11/12/2025 19:20	Christopher Webb		Christophe	104.7	104.7	1	0
Guest	11/7/2025 19:41	Sandra Steen		TheJoyInsti	104.7	104.7	1	0
Guest	11/16/2021 0:09	Erika Estes		askerikaes	104.15	104.15	1	0
Guest	11/4/2025 4:50	Bridgett Davis		jireh1997@	100	100	1	0
Guest	5/9/2024 13:58	Maria Rosales		marosa657	52.37	52.37	1	0
Guest	12/11/2025 18:47	Richard Alexander		richard_a3	50	50	1	0
Guest	11/12/2025 1:07	Daneshe Bethune		dannyb05C	50	50	1	0
Guest	11/12/2025 1:35	Alicia Young		brownyoun	50	50	1	0
Guest	6/28/2021 11:48	Ed Ramirez		edmram21	12.7	12.7	2	0

\*List of donors who's contributions were received via Stripe ACH processing



# 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: <b>4</b>	2 FILER NAME <b>Lisa Green</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>7/24/25</b>	5 Payee name <b>J.P. Morgan Chase Bank</b>	
6 Amount (\$) <b>\$12.00</b>	7 Payee address; City; State; Zip Code <b>P.O. Box 659754, San Antonio, TX 78265</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>monthly bank 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 <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

Date <b>8/25</b>	Payee name <b>J.P. Morgan Chase Bank</b>	
Amount (\$) <b>\$15.00</b>	Payee address; City; State; Zip Code <b>P.O. Box 659754, San Antonio, TX 78265</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>Fees</b>	Description <b>monthly bank 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 <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

Date <b>9/4/25</b>	Payee name <b>Logo Factory</b>	
Amount (\$) <b>\$298.77</b>	Payee address; City; State; Zip Code <b>116 NW 15th St., Grand Prairie, TX 75050</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>Printing of Campaign Tee Shirts</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		

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>4</b>	2 FILER NAME <b>Lisa Green</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>9/24/25</b>	5 Payee name <b>J. P. Morgan Chase Bank</b>	
6 Amount (\$) <b>\$15.00</b>	7 Payee address; <b>P.O. Box 659754, San Antonio, TX 78265</b>	City; State; Zip Code
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>fees</b>	(b) Description <b>monthly bank fee</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

Date <b>10/24/25</b>	Payee name <b>J. P. Morgan Chase Bank</b>	
Amount (\$) <b>\$15.00</b>	Payee address; <b>P.O. Box 659754, San Antonio, TX 78265</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>fees</b>	Description <b>monthly bank 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

Date <b>10/26/25</b>	Payee name <b>Times Ten Cellars</b>	
Amount (\$) <b>\$137.50</b>	Payee address; <b>6324 Prospect St. Dallas, TX 75214</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Event Expense</b>	Description <b>Campaign Event venue down payment/deposit</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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>4</b>	2 FILER NAME <b>Lisa Green</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>11/4/25</b>	5 Payee name <b>Times Ten Cellars</b>	
6 Amount (\$) <b>\$800.00</b>	7 Payee address; <b>6324 Prospect St., Dallas, TX</b> <input type="checkbox"/> Check if individual's residence address.	City; <b>Dallas</b> State; <b>TX</b> Zip Code <b>75214</b>
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Event Expense</b>	(b) Description <b>Campaign Kickoff Event expense</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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <b>12/10/25</b>	Payee name <b>Mark Green</b>	
Amount (\$) <b>\$300.00</b>	Payee address; <b>1442 Oxbow Drive</b> <input type="checkbox"/> Check if individual's residence address.	City; <b>Cedar Hill</b> State; <b>TX</b> Zip Code <b>75104</b>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Loan Repayment/Reimbursement</b>	Description <b>Repayment for loans</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

Date <b>12/15/25</b>	Payee name <b>Mark Green</b>	
Amount (\$) <b>\$200.00</b>	Payee address; <b>1442 Oxbow Drive</b> <input type="checkbox"/> Check if individual's residence address.	City; <b>Cedar Hill</b> State; <b>TX</b> Zip Code <b>75104</b>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Loan Repayment/Reimbursement</b>	Description <b>Repayment for loans</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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>4</b>	2 FILER NAME <b>Lisa Green</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>12/19/25</b>	5 Payee name <b>Lisa Green</b>	
6 Amount (\$) <b>\$135.00</b>	7 Payee address; City; State; Zip Code <b>1442 Oxbow Drive Cedar Hill, TX 75104</b>	
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Office Overhead</b>	
	(b) Description <b>Purchase of ink cartridges for home office printer</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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date <b>12/31/25</b>	Payee name <b>Lisa Green</b>		
Amount (\$) <b>\$200.00</b>	Payee address; City; State; Zip Code <b>1442 Oxbow Drive Cedar Hill, TX 75104</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Office Overhead/Rental Expense</b>		
	Description <b>Annual rental expense payment for campaign PO box</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
--	-------------------------------	---------------	-------------

Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
<b>PURPOSE OF EXPENDITURE</b>	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**