

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: **22**

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR **Miss** FIRST **Antoinette** MI **N.**
NICKNAME **"Nette"** LAST **Harris** SUFFIX **J.D., LL.M, Esq.**

OFFICE USE ONLY

Date Received

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
**4308 Ridgedale Drive
Mesquite, Texas 75150**

Change of Address

Date Hand-delivered or Date Postmarked

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION
(318) 201-2156

Receipt # Amount \$

6 CAMPAIGN TREASURER NAME

MS / MRS / MR **Ms.** FIRST **Alisha** MI
NICKNAME LAST **Epps** SUFFIX

Date Processed

Date Imaged

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
**2281 Palomino Street
Mesquite Tx 76149**

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(678) 622-0937

9 REPORT TYPE

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

10 PERIOD COVERED

Month Day Year Month Day Year
04 / 28 / 2025 THROUGH 06 / 30 / 2025

11 ELECTION

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

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Dallas County Justice of the Peace, Precinct 2, Place 2

14 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

Additional Pages

COMMITTEE TYPE COMMITTEE NAME
 GENERAL
 SPECIFIC
COMMITTEE ADDRESS
COMMITTEE CAMPAIGN TREASURER NAME
COMMITTEE CAMPAIGN TREASURER ADDRESS


GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH
COVER SHEET PG 2**

15 C/OH NAME Attorney Antoinette N. Harris		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)	\$0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$7,009.73
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$0
	4. TOTAL POLITICAL EXPENDITURES	\$5,836.57
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$513.73
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$0

18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



 Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

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

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

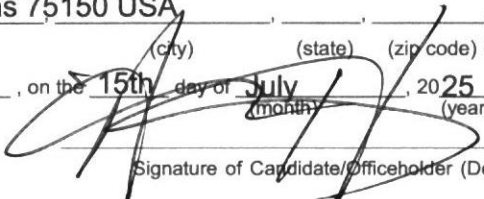
OR

(2) Unsworn Declaration

My name is Attorney Antoinette N. Harris, and my date of birth is September 28, 1992.

My address is 4308 Ridgedale Drive Mesquite, Texas 75150 USA
(street) (city) (state) (zip code) (country)

Executed in Dallas County, State of Texas, on the 15th day of July, 2025.
(month) (year)



 Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME Attorney Antoinette N. Harris		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5509.73
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1500.00
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	\$ 5127.10
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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 709.47
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

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: 12
2 FILER NAME Attorney Antoinette N. Harris		3 Filer ID (Ethics Commission Filers)
4 Date 07/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benjamin Dunn	7 Amount of contribution (\$) \$105.75
6 Contributor address; City; State; Zip Code 2980 Creek Bend Drive Apt. 61 06 New Braunfels TX 78130		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haley Lolley	Amount of contribution (\$) \$53.04
Contributor address; City; State; Zip Code 205 Summerland Key Lane Lafayette LA 70508		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zite Prescott	Amount of contribution (\$) \$41.56
Contributor address; City; State; Zip Code 607 Avoyelles Drive Alexandria LA 71302		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashley Carpenter Brauning	Amount of contribution (\$) \$105.75
Contributor address; City; State; Zip Code 3909 Brownway Drive College Station TX 77845		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<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:
2 FILER NAME Attorney Antoinette N. Harris		3 Filer ID (Ethics Commission Filers)
4 Date 05/21/20 25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Garrett Law Office, PLLC	7 Amount of contribution (\$) \$105.75
6 Contributor address; City; State; Zip Code 325 North Saint Paul Street 3100-8104 Dallas TX 75201		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/23/20 25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Law Office of Antoinette N. Harris, PLLC	Amount of contribution (\$) \$263.89
Contributor address; City; State; Zip Code 2911 Turtle Creek Blvd. Suite 300 Dallas, Texas 75219		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark Law, PLLC	Amount of contribution (\$) \$105.75
Contributor address; City; State; Zip Code 7322 Southwest Freeway Suite 1025 Houston, Texas 7 707 4		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steven Pruitt Jr.	Amount of contribution (\$) \$10.00
Contributor address; City; State; Zip Code 3633 Long Branch Boulevard Rowlett 75088		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<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:

2 FILER NAME

Attorney Antoinette N. Harris

3 Filer ID (Ethics Commission Filers)

4 Date
06/09/2025

5 Full name of contributor out-of-state PAC (ID#: _____)
Seth Minix

7 Amount of contribution (\$)
\$250.00

6 Contributor address; City; State; Zip Code
5502 Denton Drive Cut Off Dallas TX 75235

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
06/11/2025

Full name of contributor out-of-state PAC (ID#: _____)
Morgan Latin

Amount of contribution (\$)
\$105.75

Contributor address; City; State; Zip Code
13615 Thunder Stone Lane Pearland TX 77584

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/12/2025

Full name of contributor out-of-state PAC (ID#: _____)
Lauren Villanueva

Amount of contribution (\$)
\$53.04

Contributor address; City; State; Zip Code
672 Quail Lane Coppell TX 75019

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/12/2025

Full name of contributor out-of-state PAC (ID#: _____)
Alan Perez

Amount of contribution (\$)
\$53.04

Contributor address; City; State; Zip Code
15480 Dallas Pkwy 2098 Dallas TX 75248

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Attorney Antoinette N. Harris		3 Filer ID (Ethics Commission Filers)
4 Date 06/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyiah Walker	7 Amount of contribution (\$) \$10.86
6 Contributor address; City; State; Zip Code 7820 Brownsville Avenue Dallas TX 75216		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathan Hawks	Amount of contribution (\$) \$263.90
Contributor address; City; State; Zip Code 3818 North Hall Street 123 Dallas TX 75219		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy Smith	Amount of contribution (\$) \$53.04
Contributor address; City; State; Zip Code 8585 Spicewood Springs Road 111 3 Austin TX 78759		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darien Griffith	Amount of contribution (\$) \$105.75
Contributor address; City; State; Zip Code 1520 N Beckley Ave A pt 1212 Dallas TX 75203		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Attorney Antoinette N. Harris		3 Filer ID (Ethics Commission Filers)
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darien Griffith	7 Amount of contribution (\$) \$105.75
6 Contributor address; City; State; Zip Code 1520 N Beckley A veA pt 1212 Dallas TX 75203		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Health Harris	Amount of contribution (\$) \$527.47
Contributor address; City; State; Zip Code 8611 Quicksilver Drive Dallas TX 75249		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tai Vuong	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code 925 Rendon Place Mansfield TX 76063		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tracie Trotter	Amount of contribution (\$) \$25.00
Contributor address; City; State; Zip Code 2850 Gareths Sword Drive Lewisville TX 75056		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Attorney Antoinette N. Harris		3 Filer ID (Ethics Commission Filers)
4 Date 06/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodney Baker	7 Amount of contribution (\$) \$105.75
6 Contributor address; City; State; Zip Code 135 Charleston Lane Royse City TX 75189		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jesus Marques	Amount of contribution (\$) \$105.75
Contributor address; City; State; Zip Code 3061 Silvertown Drive Dallas TX 75229		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gigi Lewi	Amount of contribution (\$) \$105.75
Contributor address; City; State; Zip Code 7545 Donnelly Avenue Dallas TX 75228		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arielle Williams	Amount of contribution (\$) \$53.04
Contributor address; City; State; Zip Code 3706 Star Mesa Street Crandall TX 75114		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<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

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1 Total pages Schedule A1:

2 FILER NAME

Attorney Antoinette N. Harris

3 Filer ID (Ethics Commission Filers)

4 Date
06/30/2025

5 Full name of contributor out-of-state PAC (ID#: _____)
Michael Coleman II

7 Amount of contribution (\$) **\$53.04**

6 Contributor address; City; State; Zip Code
3113 Kaufman Court Little Elm TX 75068

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
06/30/2025

Full name of contributor out-of-state PAC (ID#: _____)
Khanay Turner

Amount of contribution (\$) **\$105.75**

Contributor address; City; State; Zip Code
6805 Briarwood Drive Fort Worth TX 76132

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/30/2025

Full name of contributor out-of-state PAC (ID#: _____)
Sharita Blacknall

Amount of contribution (\$) **\$105.75**

Contributor address; City; State; Zip Code
739 Monterey Dr. Rockwall TX 75087

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/30/2025

Full name of contributor out-of-state PAC (ID#: _____)
Elizabeth Pryor

Amount of contribution (\$) **\$105.75**

Contributor address; City; State; Zip Code
332 Squirebrook Drive DeSoto TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Attorney Antoinette N. Harris		3 Filer ID (Ethics Commission Filers)
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myka Watts 6 Contributor address; City; State; Zip Code 2061 Texas Plaza Dr Apt 6205 Irving TX 75062	7 Amount of contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Justin Brett Contributor address; City; State; Zip Code 3320 Edwards Drive Plano TX 75025	Amount of contribution (\$) \$105.75
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tiffany Simon Contributor address; City; State; Zip Code 6736 Verde Apt. 364 Irving TX 75039	Amount of contribution (\$) \$10.86
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chivonne Mitchell Contributor address; City; State; Zip Code 1514 Northampton Drive Rowlett TX 75089	Amount of contribution (\$) \$105.75
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Attorney Antoinette N. Harris		3 Filer ID (Ethics Commission Filers)
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Juwana Sims 6 Contributor address; City; State; Zip Code 2627 Live Oak Street 11100 Dallas TX 75204	7 Amount of contribution (\$) \$263.90
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) H. Nicole Law Contributor address; City; State; Zip Code 1700 Pacific Avenue Suite 1810 Dallas TX 75201	Amount of contribution (\$) \$263.90
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dr. Shadana Hill Contributor address; City; State; Zip Code 225 Happy Lane Red Oak TX 75154	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiristen Byrd Contributor address; City; State; Zip Code 2022 North Beckley Avenue 1256 Dallas TX 75208	Amount of contribution (\$) \$10.86
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Attorney Antoinette N. Harris		3 Filer ID (Ethics Commission Filers)
4 Date 06/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaehla Outlaw 6 Contributor address; City; State; Zip Code 1601 Elm St apt. 2405 Dallas, TX 75201	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kira Briggs Contributor address; City; State; Zip Code 659 Junction Dr., C306, Allen TX 75013	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Garrett Law Office, PLLC Contributor address; City; State; Zip Code 325 North Saint Paul Street 3100-8104 Dallas TX 75201	Amount of contribution (\$) \$400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jazzmond J. Turner Contributor address; City; State; Zip Code 2901 Lady Bettye Dr., Apt. 2103, Lewisville, Tx 75056	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Attorney Antoinette N. Harris		3 Filer ID (Ethics Commission Filers)
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Law Office of Jesus Marquez, PLLC 6 Contributor address; City; State; Zip Code 11300 N. Central Expwy. Ste. 370 Dallas, TX 75243	7 Amount of contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seth Minix Contributor address; City; State; Zip Code 5502 Denton Drive Cut Off Dallas TX 75235	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virginia Taborn Contributor address; City; State; Zip Code 2522 Magna Vista Dr. Dallas 75216	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terrance Alexander Contributor address; City; State; Zip Code 4925 Raser Blvd Apt 362 Plano, TX 75024	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Attorney Antoinette N. Harris		3 Filer ID (Ethics Commission Filers)
4 Date 07/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emily Adams	7 Amount of contribution (\$) \$53.04
6 Contributor address; City; State; Zip Code 4125 Herschel Ave, Dallas, Texas 75219		
8 Principal occupation / Job title (See Instructions)		9 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)
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)

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME Attorney Antoinette N. Harris		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$1,500.00	
5 Date 05/07/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUME Motion Arts, LLC	8 Amount of Contribution \$ \$1,500.00	9 In-kind contribution description Video
7 Contributor address; City; State; Zip Code 816 W Colony Dr Arlington, Texas 76001		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of Contribution \$	In-kind contribution description
			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | 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: 5	2 FILER NAME Attorney Antoinette N. Harris	3 Filer ID (Ethics Commission Filers)
4 Date 05/22/2025	5 Payee name UPrinting	
6 Amount (\$) \$262.74	7 Payee address; City; State; Zip Code 8000 Haskell Avenue Van Nuys, CA 91406	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing & Adverting Expense	(b) Description Flyers
	(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 06/02/2025	Payee name Table Covers Now	
Amount (\$) \$246.65	Payee address; City; State; Zip Code 4000 Greenbriar Dr, Ste 200, Stafford, TX 77477	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Custom Table Cover
	<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 06/03/2025	Payee name The Galiston on Main	
Amount (\$) \$420.00	Payee address; City; State; Zip Code 215 W Main St, Mesquite, TX 75149	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Event Space
	<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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 06/21/20 25	5 Payee name Banners on the Cheap
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6 Amount (\$) \$134.48	7 Payee address; 11525A Stonehollow Dr Ste 100 Austin, TX, 78758, US	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing & Adverting Expense	(b) Description Retractable Banner
	(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
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Date 06/24/2025	Payee name Amazon
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Amount (\$) \$96.32	Payee address; 410 Terry Ave N, Seattle, WA 98109	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Party decor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06/27/2025	Payee name Amazon
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Amount (\$) \$173.08	Payee address; 410 Terry Ave N, Seattle, WA 98109	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Party decor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED