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: 2

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

2026 OCT 26 PM 2:44

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: Miss | FIRST: Antoinette | MI: N

NICKNAME: "Nette" | LAST: Harris | SUFFIX: J.D., LL.M, Esq.

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

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

☐ Change of Address

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (318) | PHONE NUMBER: 2012156 | EXTENSION:

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: Ms. | FIRST: Alisha | MI:

NICKNAME: | LAST: Epps | SUFFIX:

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)

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

8 CAMPAIGN TREASURER PHONE

AREA CODE: (678) | PHONE NUMBER: 622-0937 | EXTENSION:

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: 02 Day: 02 Year: 2026 THROUGH Month: 10 Day: 26 Year: 2026

11 ELECTION

ELECTION DATE: Month: 11 Day: 03 Year: 2025

ELECTION TYPE: ☐ Primary ☐ Runoff ☐ Other Description ☑ 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.

COMMITTEE TYPE: ☐ GENERAL ☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME	**16** Filer ID (Ethics Commission Filers)
Attorney Antoinette N. Harris	

17 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	$
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 1849.52
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 4,822.32
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 343.08
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 3,015.88

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 Antoinette N Harris, and my date of birth is 9/28/1992

My address is 4308 Ridgedale Dr. Mesquite TX 75150 USA
(street) (city) (state) (zip code) (country)

Executed in Dallas County, State of TX, on the 26 day of Oct (month), 2025 (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME	20 Filer ID (Ethics Commission Filers)
Attorney Antoinette N. Harris	

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	☑	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$1849.52
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	$ 4,822.32
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

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	5 Full name of contributor / ☐ out-of-state PAC (ID#:)	7 Amount of contribution ($)
02/05/2026	Georgiana Bustos	$21.41
	6 Contributor address; City; State; Zip Code: 5309 Yager Dr, The Colony, TX, United States, 75056	
8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)	

Date	Full name of contributor / ☐ out-of-state PAC (ID#:)	Amount of contribution ($)
02/09/2026	Kelvin Sanders	$527.47
	Contributor address; City; State; Zip Code: 418 Desoto Street, Alexandria, LA, United States, 71301	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor / ☐ out-of-state PAC (ID#:)	Amount of contribution ($)
02/14/2026	Ruby Robinson	$!00.00
	Contributor address; City; State; Zip Code: 928 Bennett Street, Alexandria, LA, United States, 71302	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor / ☐ out-of-state PAC (ID#:)	Amount of contribution ($)
02/14/2026	Rosa Williams	105.75
	Contributor address; City; State; Zip Code: 705 Woodard Street, Alexandria, LA, United States, 71302	
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

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
Antoinette N. Harris

3 Filer ID (Ethics Commission Filers)

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of contribution ($)
02/20/2026	Kristin Schoen	$100.00
	6 Contributor address; City; State; Zip Code: 11305 Hollister Drive, Austin, TX, United States, 78739	
8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
07/13/2026	Megan David	$263.90
	Contributor address; City; State; Zip Code: 12222 Merit Drive, Suite 1200, Dallas, TX, United States, 75251	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
07/21/2026	Terry Cherry	$519.49
	Contributor address; City; State; Zip Code: 4209 Crestover Drive, Crestover Drive, Mesquite, TX, United States, 75150	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
07/22/22026	Syvondia Bailey	$105.75
	Contributor address; City; State; Zip Code: 600 Commerce Street, Dallas, TX, United States, 75202	
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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1 Total pages Schedule A1:

2 FILER NAME
Antoinette N. Harris

3 Filer ID (Ethics Commission Filers)

4 Date
02/22/2026

5 Full name of contributor ☐ out-of-state PAC (ID#:_____)
Virgina F. Taborn

6 Contributor address; City; State; Zip Code
2522 Magna Vista Dr, Dallas, TX, United States, 75216

7 Amount of contribution ($)
$105.75

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

☐ 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 ☐ 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 ☐ 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

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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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Attorney Antoinette N. Harris	

4 Date
08/31/2026

5 Payee name
Antoinette N. Harris

6 Amount ($)
$300.00

7 Payee address; City; State; Zip Code
2911 Turtle Creek Blvd. Suite 300, Dallas Texas 75150

☐ Check if individual's residence address.

8 PURPOSE OF EXPENDITURE
Loan repayment/ Reimbursement

Various previously reported expenses

(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX. officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name | Office sought | Office held

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Date
06/22/2026

Payee name
Alejandro's Resturant

Amount ($)
$3223.33

State; Zip Code
117 West Main Street, Mesquite, Tx 75149

☐ Check if individual's residence address.

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)
Food/Bev/Event Expenses

Description
Victory Party

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX. officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name | Office sought | Office held

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Date
06/22/2026

Payee name
Jayden Sweet Treats

Amount ($)
$200.00

Payee address; City; State; Zip Code
Undisclosed

☐ Check if individual's residence address.

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)
Food/Bev

Description
Victory Party Treats

☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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:	2 FILER NAME Attorney Antoinette N. Harris	3 Filer ID (Ethics Commission Filers)
4 Date 07/12/2026	5 Payee name RushImprints	
6 Amount ($) $705.24	7 Payee address; City; State; Zip Code 167 Dexter Drive Monroeville, PA 15146 ☐ Check if individual's residence address.	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event expense	(b) Description Party favors
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.	☐ 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 07/15/20026	Payee name Superior Promos	
Amount ($)	Payee address; City; State; Zip Code 12-45 River Road, Fair Lawn, NJ 07410 ☐ Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event expense	Description Party favors
	☐ Check if travel outside of Texas. Complete Schedule T.	☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date	Payee name	
Amount ($)	Payee address; City; State; Zip Code ☐ Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	☐ Check if travel outside of Texas. Complete Schedule T.	☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

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