

# 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	2 Total pages filed: 36
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Clay	<div style="border: 1px solid black; padding: 5px;"> <b>OFFICE USE ONLY</b>  <div style="display: flex; justify-content: space-between;"> <div> Date Received  2026 JAN 15 AM 10:00  JOHN F. WILKINSON  COUNTY CLERK  DALLAS COUNTY </div> <div> FILED  2026 JAN 15 PM 3:50  JOHN F. WILKINSON  COUNTY CLERK  DALLAS COUNTY </div> </div> </div>	
	NICKNAME LAST SUFFIX Jenkins		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE PO Box 600757 Dallas, TX 75360	Date Hand-Delivered or Date Postmarked	Receipt # Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI George	<div style="border: 1px solid black; padding: 5px;"> <b>FILED</b>  2026 JAN 15 PM 3:50  JOHN F. WILKINSON  COUNTY CLERK  DALLAS COUNTY  BY DEPUTY </div>	
	NICKNAME LAST SUFFIX Tex Quesada		
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3811 Turtle Creek Ste. 1400 Dallas TX 75219		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 720-0720		
8 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)		
9 PERIOD COVERED	Month Day Year    THROUGH    Month Day Year 07/01/2025    12/31/2025		
10 ELECTION	ELECTION DATE Month Day Year 11/03/2026	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) Dallas County Judge	12 OFFICE SOUGHT (if known) Dallas County Judge	

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

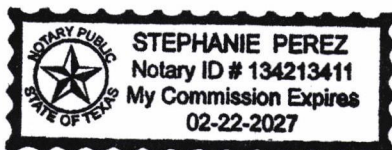
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13 C / OH NAME Jenkins, Clay	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 48,933.84
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 541.67
	4. TOTAL POLITICAL EXPENDITURES	\$ 132,942.60
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 412,781.56
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

## 17 AFFIDAVIT



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.

Clay Lewis Jenkins  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Clay Lewis Jenkins <sup>SP</sup>, this the 15 January <sup>SP</sup> day of January, 20 2026 <sup>SP</sup>, to certify which, witness my hand and seal of office.

[Signature]  
Signature of officer administering

Stephanie Perez  
Printed name of officer administering

Notary  
Title of officer administering oath

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

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<b>18 FILER NAME</b> Jenkins, Clay		<b>19 Filer ID</b>
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 48,933.84
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 FROM POLITICAL CONTRIBUTIONS	\$ 131,083.01
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 1,859.59
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 9,708.51

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/13 Rpt: 4/36
<b>2</b> FILER NAME Jenkins, Clay		<b>3</b> Filer ID
<b>4</b> Date 09/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Astle, Cynthia <hr/> <b>6</b> Contributor address; City; State; Zip Code 4140 O B Crowe Dr  Dallas, TX 75227-4774	<b>7</b> Amount of Contribution (\$)  \$10.53
<b>8</b> Principal occupation / Job title (See Instructions) Editor		<b>9</b> Employer (See Instructions) Self Employed
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Terry <hr/> Contributor address; City; State; Zip Code 308 Phillips Dr  Coppell, TX 75019-6039	Amount of Contribution (\$)  \$516.45
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Terry <hr/> Contributor address; City; State; Zip Code 308 Phillips Dr  Coppell, TX 75019-6039	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beach, Gary Lee <hr/> Contributor address; City; State; Zip Code 1021 Lake Ridge Dr  Richardson, TX 75081-5155	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Gwyneith <hr/> Contributor address; City; State; Zip Code 1133 S Madison Ave  Dallas, TX 75208-6726	Amount of Contribution (\$)  \$516.45
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/13 Rpt: 5/36
<b>2</b> FILER NAME Jenkins, Clay		<b>3</b> Filer ID
<b>4</b> Date 09/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breitbarth, Bradly <hr/> <b>6</b> Contributor address; City; State; Zip Code 5303 Parkland Ave Dallas, TX 75235-8220	<b>7</b> Amount of Contribution (\$)  \$20.85
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruegger, Joe and Judi <hr/> Contributor address; City; State; Zip Code PO Box 670344 Dallas, TX 75367-0344	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Office of Joseph Bruegger
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruegger, Joe and Judi <hr/> Contributor address; City; State; Zip Code PO Box 670344 Dallas, TX 75367-0344	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Office of Joseph Bruegger
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruegger, Joe and Judi <hr/> Contributor address; City; State; Zip Code PO Box 670344 Dallas, TX 75367-0344	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Office of Joseph Bruegger
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bush, Janie <hr/> Contributor address; City; State; Zip Code 10442 Brockbank Dr Dallas, TX 75229-4960	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/13 Rpt: 6/36
<b>2</b> FILER NAME Jenkins, Clay		<b>3</b> Filer ID
<b>4</b> Date 12/02/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bush, Janie <hr/> <b>6</b> Contributor address; City; State; Zip Code 10442 Brockbank Dr  Dallas, TX 75229-4960	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bush, Janie <hr/> Contributor address; City; State; Zip Code 10442 Brockbank Dr  Dallas, TX 75229-4960	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapin, N Roger <hr/> Contributor address; City; State; Zip Code 613 Harvest Glen Dr  Richardson, TX 75081-5643	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clouston, David <hr/> Contributor address; City; State; Zip Code 6339 Azalea Ln  Dallas, TX 75230-3411	Amount of Contribution (\$)  \$25,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sessions
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Robert <hr/> Contributor address; City; State; Zip Code 7039 Westlake Ave  Dallas, TX 75214-3545	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/13 Rpt: 7/36
<b>2</b> FILER NAME Jenkins, Clay		<b>3</b> Filer ID
<b>4</b> Date 12/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Robert <hr/> <b>6</b> Contributor address; City; State; Zip Code 7039 Westlake Ave  Dallas, TX 75214-3545	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Anthony B <hr/> Contributor address; City; State; Zip Code 606 Brittany Dr  Mesquite, TX 75150-4936	Amount of Contribution (\$)  \$26.01
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) Home Point
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darden, Margaret Furr <hr/> Contributor address; City; State; Zip Code 6335 W Northwest Hwy Apt 1016 Dallas, TX 75225-3546	Amount of Contribution (\$)  \$51.83
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duran, William <hr/> Contributor address; City; State; Zip Code 12129 Landlock Dr  Dallas, TX 75218-1227	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Quest Diagnostics
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Echols, Esther <hr/> Contributor address; City; State; Zip Code 1529 Colborne Dr  Mesquite, TX 75149-5959	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/13 Rpt: 8/36
<b>2</b> FILER NAME Jenkins, Clay		<b>3</b> Filer ID
<b>4</b> Date 09/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enloe, Paul <hr/> <b>6</b> Contributor address; City; State; Zip Code 4024 Rufe Snow Dr  North Richland Hills, TX 76180-8844	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) BrevAll
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enloe, Paul <hr/> Contributor address; City; State; Zip Code 4024 Rufe Snow Dr  North Richland Hills, TX 76180-8844	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) BrevAll
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fairchild, Laura <hr/> Contributor address; City; State; Zip Code 505 E Bethel School Rd  Coppell, TX 75019-4015	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) Coppell ISD
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fortman, Laura <hr/> Contributor address; City; State; Zip Code 4726 Cliffwood Dr  Garland, TX 75043-3319	Amount of Contribution (\$)  \$26.01
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fortman, Laura <hr/> Contributor address; City; State; Zip Code 4726 Cliffwood Dr  Garland, TX 75043-3319	Amount of Contribution (\$)  \$27.05
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/13 Rpt: 9/36
2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 08/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulbright, Lewis 6 Contributor address; City; State; Zip Code 407 Cardinal Creek Dr # FR Duncanville, TX 75137-3136	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glatz, Derek Contributor address; City; State; Zip Code 2004 Clubridge Dr Carrollton, TX 75006-1702	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Customer Experience Analyst		Employer (See Instructions) GM Financial
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glatz, Derek Contributor address; City; State; Zip Code 2004 Clubridge Dr Carrollton, TX 75006-1702	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Customer Experience Analyst		Employer (See Instructions) GM Financial
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grace, Michael Contributor address; City; State; Zip Code PO Box 382384 Duncanville, TX 75138-2384	Amount of Contribution (\$) \$103.45
Principal occupation / Job title (See Instructions) Economic Development		Employer (See Instructions) City of Forney
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Timothy Contributor address; City; State; Zip Code 3421 Webb Garden Dr Dallas, TX 75229-5935	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/13 Rpt: 10/36
<b>2</b> FILER NAME Jenkins, Clay		<b>3</b> Filer ID
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Groshardt, Joanne <hr/> <b>6</b> Contributor address; City; State; Zip Code 302 Trailridge Dr Richardson, TX 75081-4727	<b>7</b> Amount of Contribution (\$)  \$10.53
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 07/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanchey, Molly <hr/> Contributor address; City; State; Zip Code 3104 San Lucas Ave Apt 104A Dallas, TX 75228-3422	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howden, Norman <hr/> Contributor address; City; State; Zip Code 10823 Palace Way Dallas, TX 75218-2318	Amount of Contribution (\$)  \$26.01
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Rebecca Inez <hr/> Contributor address; City; State; Zip Code 1222 Wagon Wheels Trl Dallas, TX 75241-1245	Amount of Contribution (\$)  \$20.85
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaufman, Michael (Mr.) <hr/> Contributor address; City; State; Zip Code 3030 McKinney Ave Apt 506 Dallas, TX 75204-7482	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jackson Walker

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/13 Rpt: 11/36
<b>2</b> FILER NAME Jenkins, Clay		<b>3</b> Filer ID
<b>4</b> Date 12/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Tingwhai <hr/> <b>6</b> Contributor address; City; State; Zip Code 1417 Chesterton Dr  Richardson, TX 75080-2804	<b>7</b> Amount of Contribution (\$)  \$103.45
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 07/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McComb, Suzanne E <hr/> Contributor address; City; State; Zip Code 441 Bondstone Dr  Dallas, TX 75218-1715	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Human Resources Prof.		Employer (See Instructions) Retired
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillion, Muriel and Sylvia <hr/> Contributor address; City; State; Zip Code 2107 Melbourne Ave  Dallas, TX 75224-1050	Amount of Contribution (\$)  \$103.45
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Clifton E. <hr/> Contributor address; City; State; Zip Code 30 Meadowbrook Ln  Trophy Club, TX 76262-5636	Amount of Contribution (\$)  \$103.45
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Cemetrics LLC - Self Employed
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, Daniel <hr/> Contributor address; City; State; Zip Code 10619 Old Mill Rd  Greenville, TX 75402-3434	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/13 Rpt: 12/36
2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rader, Michael (Mike) E 6 Contributor address; City; State; Zip Code PO Box 249 Colleyville, TX 76034-0249	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Prime 45 Development LLC
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rea, James G. Contributor address; City; State; Zip Code 2660 S Birmingham Pl # B Tulsa, OK 74114-4322	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rush, Raye Contributor address; City; State; Zip Code 8434 Gladwood Ln Dallas, TX 75243-6504	Amount of Contribution (\$) \$27.05
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandel, Julie Contributor address; City; State; Zip Code 4819 Swiss Ave Apt D Dallas, TX 75204-7150	Amount of Contribution (\$) \$26.01
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sbaiti, Mazin Contributor address; City; State; Zip Code 4410 Bordeaux Ave Dallas, TX 75205-3621	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self employed



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/13 Rpt: 13/36
2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 09/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharp, Cynthia	7 Amount of Contribution (\$) \$20.85
	6 Contributor address; City; State; Zip Code 1421 Sunnybrook Dr Irving, TX 75061-4452	
8 Principal occupation / Job title (See Instructions) Analyst		9 Employer (See Instructions) Dallas County
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharp, Cynthia	Amount of Contribution (\$) \$26.01
	Contributor address; City; State; Zip Code 1421 Sunnybrook Dr Irving, TX 75061-4452	
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Dallas County
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Valerie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code 2120 Nob HI Carrollton, TX 75006-2817	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sommerman McCaffity & Quesada LLP	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code 3811 Turtle Creek Blvd Ste 1400 Dallas, TX 75219-4492	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Ben	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 2654 Lakeforest Ct Dallas, TX 75214-3881	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ted B. Lyon & Associates P.C.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/13 Rpt: 14/36
<b>2</b> FILER NAME Jenkins, Clay		<b>3</b> Filer ID
<b>4</b> Date 09/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Ben <hr/> <b>6</b> Contributor address; City; State; Zip Code 2654 Lakeforest Ct  Dallas, TX 75214-3881	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Ted B. Lyon & Associates P.C.
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Ben <hr/> Contributor address; City; State; Zip Code 2654 Lakeforest Ct  Dallas, TX 75214-3881	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ted B. Lyon & Associates P.C.
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thames, Tammy <hr/> Contributor address; City; State; Zip Code 1103 Harlow Ln  Duncanville, TX 75137-3560	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Administrative law judge		Employer (See Instructions) Social security administration
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turley, Windle <hr/> Contributor address; City; State; Zip Code 6440 N Central Expy Ste 1000 Dallas, TX 75206-4127	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Turley Law Firm/Attorney		Employer (See Instructions) Turley Law Firm
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turpin, Thomas <hr/> Contributor address; City; State; Zip Code 713 Saddlebrook Dr N  Bedford, TX 76021-4328	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/13 Rpt: 15/36
2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turpin, Thomas	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code 713 Saddlebrook Dr N Bedford, TX 76021-4328	
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wasserman, Tina D	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 7153 Lavendale Ave Dallas, TX 75230-3650	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilder, Laura	Amount of Contribution (\$) \$26.01
	Contributor address; City; State; Zip Code 4905 Rollingwood Ct Garland, TX 75043-3431	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilderman, Michael	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 3620 Potomac Ave Dallas, TX 75205-2111	
Principal occupation / Job title (See Instructions) Home builder		Employer (See Instructions) Double Door Custom Homes Inc
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willars, Hector	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 1318 Nashua St Houston, TX 77008-3746	
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Hector A. Willars CPA PLLC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule A1:  
Sch: 13/13 Rpt: 16/36

**2** FILER NAME

Jenkins, Clay

**3** Filer ID

**4** Date

12/03/2025

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Wise, Linda

**7** Amount of Contribution (\$)

\$26.01

**6** Contributor address; City; State; Zip Code

2719 San Jose Dr

Dallas, TX 75211-2316

**8** Principal occupation / Job title (See Instructions)

Retired

**9** Employer (See Instructions)

Retired

Date

12/02/2025

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Wiseman, Paul

Amount of Contribution (\$)

\$100.00

Contributor address; City; State; Zip Code

25 Highland Park Vlg

Ste 100 Pmb 760

Dallas, TX 75205-2726

Principal occupation / Job title (See Instructions)

Realtor

Employer (See Instructions)

Local Dwelling Property Management LLC

Date

09/30/2025

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Woodward, Ruth K

Amount of Contribution (\$)

\$10.53

Contributor address; City; State; Zip Code

5807 Belmont Ave

Dallas, TX 75206-6803

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

<b>1</b> Total pages Schedule F1: Sch: 1/18 Rpt: 17/36	<b>2</b> FILER NAME Jenkins, Clay	<b>3</b> Filer ID
<b>4</b> Date 09/21/2025	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$1,222.16	<b>7</b> Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fees - 9/21/25-12/31/25
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/25/2025	Payee name Andrew Sommerman Campaign	
Amount (\$) \$6,000.00	Payee address; City; State; Zip Code 3811 Turtle Creek Blvd Ste 1400 Dallas, TX 75219-4492	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/19/2025	Payee name Blue Nation Strategies	
Amount (\$) \$31,701.38	Payee address; City; State; Zip Code 5900 Harwick Rd  Bethesda, MD 20816-1103	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign printed materials
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

<b>1</b> Total pages Schedule F1: Sch: 2/18 Rpt: 18/36	<b>2</b> FILER NAME Jenkins, Clay	<b>3</b> Filer ID
<b>4</b> Date 12/12/2025	<b>5</b> Payee name Blue Nation Strategies	
<b>6</b> Amount (\$) \$33,190.27	<b>7</b> Payee address; City; State; Zip Code 5900 Harwick Rd  Bethesda, MD 20816-1103	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign holiday card printing
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/05/2025	Candidate/Officeholder name Payee name Bluebird Strategies	Office sought Office held
Amount (\$) \$4,000.00	Payee address; City; State; Zip Code 4849 Greenville Ave Ste 1370 Dallas, TX 75206-4130	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising consulting services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/03/2025	Candidate/Officeholder name Payee name Bluebird Strategies	Office sought Office held
Amount (\$) \$4,000.00	Payee address; City; State; Zip Code 4849 Greenville Ave Ste 1370 Dallas, TX 75206-4130	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising consulting services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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: Sch: 3/18 Rpt: 19/36		2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 09/03/2025		5 Payee name Bluebird Strategies		
6 Amount (\$) \$4,000.00		7 Payee address; City; State; Zip Code 4849 Greenville Ave Ste 1370 Dallas, TX 75206-4130		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising consulting services	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 10/02/2025		Payee name Bluebird Strategies		
Amount (\$) \$4,000.00		Payee address; City; State; Zip Code 4849 Greenville Ave Ste 1370 Dallas, TX 75206-4130		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising consulting services	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 11/04/2025		Payee name Bluebird Strategies		
Amount (\$) \$4,000.00		Payee address; City; State; Zip Code 4849 Greenville Ave Ste 1370 Dallas, TX 75206-4130		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising consulting services	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

<b>1</b> Total pages Schedule F1: Sch: 4/18 Rpt: 20/36	<b>2</b> FILER NAME Jenkins, Clay	<b>3</b> Filer ID
<b>4</b> Date 12/02/2025	<b>5</b> Payee name Bluebird Strategies	
<b>6</b> Amount (\$) \$4,000.00	<b>7</b> Payee address; City; State; Zip Code 4849 Greenville Ave Ste 1370 Dallas, TX 75206-4130	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising consulting services
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/07/2025	Candidate/Officeholder name Payee name Dallas AFL-CIO COPE Fund	Office sought Office held
Amount (\$) \$400.00	Payee address; City; State; Zip Code 1408 N Washington Ave Ste 240 Dallas, TX 75204-5168	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labor day event sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/15/2025	Candidate/Officeholder name Payee name Dallas AFL-CIO COPE Fund	Office sought Office held
Amount (\$) \$30.00	Payee address; City; State; Zip Code 1408 N Washington Ave Ste 240 Dallas, TX 75204-5168	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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: Sch: 5/18 Rpt: 21/36		2 FILER NAME Jenkins, Clay		3 Filer ID
4 Date 10/16/2025	5 Payee name Dallas County Democratic Party			
6 Amount (\$) \$10,000.00	7 Payee address; City; State; Zip Code 1414 N Washington Ave  Dallas, TX 75204-5261			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate/Officeholder name Office sought Office held				
Date 12/03/2025	Payee name Dallas County Democratic Party			
Amount (\$) \$1,250.00	Payee address; City; State; Zip Code 1414 N Washington Ave  Dallas, TX 75204-5261			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ballot filing fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate/Officeholder name Office sought Office held				
Date 10/08/2025	Payee name Elba Garcia Campaign			
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 4086  Dallas, TX 75208-0086			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate/Officeholder name Office sought Office held				

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

<b>1</b> Total pages Schedule F1: Sch: 6/18 Rpt: 22/36	<b>2</b> FILER NAME Jenkins, Clay	<b>3</b> Filer ID
<b>4</b> Date 07/11/2025	<b>5</b> Payee name Gutierrez, Sarah	
<b>6</b> Amount (\$) \$750.00	<b>7</b> Payee address; City; State; Zip Code 401 Middle Crk  Buda, TX 78610-2765	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign operations consulting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought      Office held
Date 08/18/2025	Payee name Gutierrez, Sarah	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 401 Middle Crk  Buda, TX 78610-2765	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign operations consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought      Office held
Date 10/20/2025	Payee name Gutierrez, Sarah	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 401 Middle Crk  Buda, TX 78610-2765	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign operations consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

<b>1</b> Total pages Schedule F1: Sch: 7/18 Rpt: 23/36		<b>2</b> FILER NAME Jenkins, Clay		<b>3</b> Filer ID
<b>4</b> Date 09/08/2025		<b>5</b> Payee name Gutierrez, Sarah		
<b>6</b> Amount (\$) \$750.00		<b>7</b> Payee address; City; State; Zip Code 401 Middle Crk  Buda, TX 78610-2765		
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign operations consulting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 11/19/2025		Payee name Gutierrez, Sarah		
Amount (\$) \$750.00		Payee address; City; State; Zip Code 401 Middle Crk  Buda, TX 78610-2765		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign operations consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 12/11/2025		Payee name Gutierrez, Sarah		
Amount (\$) \$750.00		Payee address; City; State; Zip Code 401 Middle Crk  Buda, TX 78610-2765		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign operations consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

<b>1</b> Total pages Schedule F1: Sch: 8/18 Rpt: 24/36	<b>2</b> FILER NAME Jenkins, Clay	<b>3</b> Filer ID
<b>4</b> Date 07/07/2025	<b>5</b> Payee name Heart Led Digital	
<b>6</b> Amount (\$) \$350.00	<b>7</b> Payee address; City; State; Zip Code 134 S Cypress Ave  Columbus, OH 43222-1404	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital fundraising consulting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/06/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$175.00	Payee name Heart Led Digital	Office held
Purpose (\$) \$175.00	Payee address; City; State; Zip Code 134 S Cypress Ave  Columbus, OH 43222-1404	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital fundraising consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/04/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$175.00	Payee name Heart Led Digital	Office held
Purpose (\$) \$175.00	Payee address; City; State; Zip Code 134 S Cypress Ave  Columbus, OH 43222-1404	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital fundraising consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/04/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$175.00	Payee name Heart Led Digital	Office held
Purpose (\$) \$175.00	Payee address; City; State; Zip Code 134 S Cypress Ave  Columbus, OH 43222-1404	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital fundraising consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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: Sch: 9/18 Rpt: 25/36		2 FILER NAME Jenkins, Clay		3 Filer ID	
4 Date 10/03/2025		5 Payee name Heart Led Digital			
6 Amount (\$) \$350.00		7 Payee address; City; State; Zip Code 134 S Cypress Ave  Columbus, OH 43222-1404			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital fundraising consulting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/19/2025		Payee name Heart Led Digital			
Amount (\$) \$350.00		Payee address; City; State; Zip Code 134 S Cypress Ave  Columbus, OH 43222-1404			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital fundraising consulting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/25/2025		Payee name Intuit			
Amount (\$) \$79.95		Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting software subscription	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

<b>1</b> Total pages Schedule F1: Sch: 10/18 Rpt: 26/36	<b>2</b> FILER NAME Jenkins, Clay	<b>3</b> Filer ID
<b>4</b> Date 07/24/2025	<b>5</b> Payee name Intuit	
<b>6</b> Amount (\$) \$79.95	<b>7</b> Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting software subscription
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/24/2025	Candidate/Officeholder name Payee name Intuit	Office sought Office held
Amount (\$) \$79.95	Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting software subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/24/2025	Candidate/Officeholder name Payee name Intuit	Office sought Office held
Amount (\$) \$79.95	Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting software subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

<b>1</b> Total pages Schedule F1: Sch: 11/18 Rpt: 27/36		<b>2</b> FILER NAME Jenkins, Clay		<b>3</b> Filer ID
<b>4</b> Date 11/24/2025		<b>5</b> Payee name Intuit		
<b>6</b> Amount (\$) \$79.95		<b>7</b> Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126		
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting software subscription
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 12/24/2025		Payee name Intuit		
Amount (\$) \$79.95		Payee address; City; State; Zip Code 2632 Marine Way  Mountain View, CA 94043-1126		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting software subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 07/01/2025		Payee name Jenkins, Clay		
Amount (\$) \$259.54		Payee address; City; State; Zip Code Po Box 600757  Dallas, TX 75360		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Schedule G Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

<b>1</b> Total pages Schedule F1: Sch: 12/18 Rpt: 28/36	<b>2</b> FILER NAME Jenkins, Clay	<b>3</b> Filer ID
<b>4</b> Date 12/12/2025	<b>5</b> Payee name Lone Star Project	
<b>6</b> Amount (\$) \$10,000.00	<b>7</b> Payee address; City; State; Zip Code 6 E St SE  Washington, DC 20003-2611	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/03/2025	Candidate/Officeholder name NGP VAN	Office sought Office held
Amount (\$) \$425.33	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign database service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/04/2025	Candidate/Officeholder name NGP VAN	Office sought Office held
Amount (\$) \$425.33	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign database service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

<b>1</b> Total pages Schedule F1: Sch: 13/18 Rpt: 29/36		<b>2</b> FILER NAME Jenkins, Clay		<b>3</b> Filer ID	
<b>4</b> Date 09/05/2025		<b>5</b> Payee name NGP VAN			
<b>6</b> Amount (\$) \$425.33		<b>7</b> Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign database service	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/03/2025		Payee name NGP VAN			
Amount (\$) \$425.33		Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign database service	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/03/2025		Payee name NGP VAN			
Amount (\$) \$425.33		Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign database service	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

<b>1</b> Total pages Schedule F1: Sch: 14/18 Rpt: 30/36		<b>2</b> FILER NAME Jenkins, Clay		<b>3</b> Filer ID
<b>4</b> Date 12/31/2025		<b>5</b> Payee name NGP VAN		
<b>6</b> Amount (\$) \$446.60		<b>7</b> Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738		
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign database service		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 09/22/2025		Payee name Norton		
Amount (\$) \$368.04		Payee address; City; State; Zip Code 60 E Rio Salado Pkwy Ste 1000 Tempe, AZ 85281-9124		
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software subscription for campaign equipment		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 07/02/2025		Payee name Paragon		
Amount (\$) \$70.10		Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895		
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking <b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fee		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

<b>1</b> Total pages Schedule F1: Sch: 15/18 Rpt: 31/36		<b>2</b> FILER NAME Jenkins, Clay		<b>3</b> Filer ID	
<b>4</b> Date 08/04/2025		<b>5</b> Payee name Paragon			
<b>6</b> Amount (\$) \$25.10		<b>7</b> Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/02/2025		Payee name Paragon			
Amount (\$) \$119.79		Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/02/2025		Payee name Paragon			
Amount (\$) \$81.07		Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

<b>1</b> Total pages Schedule F1: Sch: 16/18 Rpt: 32/36		<b>2</b> FILER NAME Jenkins, Clay		<b>3</b> Filer ID	
<b>4</b> Date 11/03/2025		<b>5</b> Payee name Paragon			
<b>6</b> Amount (\$) \$53.72		<b>7</b> Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fee	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/02/2025		Payee name Paragon			
Amount (\$) \$25.00		Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/19/2025		Payee name Preston Hollow Democrats			
Amount (\$) \$500.00		Payee address; City; State; Zip Code PO Box 670631  Dallas, TX 75367-0631			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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.

<b>1</b> Total pages Schedule F1: Sch: 17/18 Rpt: 33/36		<b>2</b> FILER NAME Jenkins, Clay		<b>3</b> Filer ID
<b>4</b> Date 07/28/2025		<b>5</b> Payee name SquareSpace		
<b>6</b> Amount (\$) \$294.22		<b>7</b> Payee address; City; State; Zip Code 8 Clarkson St  New York, NY 10014-4301		
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign website development
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 12/19/2025		Payee name Stonewall Democrats		
Amount (\$) \$500.00		Payee address; City; State; Zip Code PO Box 192305  Dallas, TX 75219		
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 08/18/2025		Payee name United States Postal Service		
Amount (\$) \$420.00		Payee address; City; State; Zip Code 401 Tom Landry Hwy  Dallas, TX 75260-9990		
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PO box renewal
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

<b>1</b> Total pages Schedule F1: Sch: 18/18 Rpt: 34/36	<b>2</b> FILER NAME Jenkins, Clay	<b>3</b> Filer ID
<b>4</b> Date 10/23/2025	<b>5</b> Payee name United States Postal Service	
<b>6</b> Amount (\$) \$78.00	<b>7</b> Payee address; City; State; Zip Code 401 Tom Landry Hwy  Dallas, TX 75260-9990	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

## 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 G: Sch: 1/1 Rpt: 35/36		2 FILER NAME Jenkins, Clay		3 Filer ID	
4 Date 12/03/2025		5 Payee name Amazon			
6 Amount (\$) \$1,600.05  <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 440 Terry Ave N  Seattle, WA 98109			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Candy gifts for constituents and supporters	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/01/2025		Payee name Sam's Club			
Amount (\$) \$259.54  <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 2218 Greenville Ave  Dallas, TX 75206-7122			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parade candy	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:  
Sch: 1/1 Rpt: 36/36

2 FILER NAME  
Jenkins, Clay

3 Filer ID

4 Date  
12/31/2025

5 Name of person from whom amount is received  
Vanguard

8 Amount (\$)  
\$9,708.51

6 Address of person from whom amount is received; City; State; Zip Code  
100 Vanguard Blvd  
Malvern, PA 19355

7 Purpose for which amount is received  
Account interest

☐ Check if political contribution returned to filer