

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:

12

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

Mrs.

Margaret

NICKNAME

LAST

SUFFIX

Jones-Johnson

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX

APT / SUITE #

CITY

STATE

ZIP CODE

PO Box 223 Cedar Hill, TX 75106

Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(214)

228-0412

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

Ms.

LaShonda

NICKNAME

LAST

SUFFIX

Dennis

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE)

APT / SUITE #

CITY

STATE

ZIP CODE

1320 Prudential Dr. Dallas TX 75235

(Residence or Business)

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(214)

559-6900

9 REPORT TYPE



January 15



30th day before election



Runoff



15th day after campaign
treasurer appointment
(Officeholder Only)



July 15



8th day before election



Exceeded Modified
Reporting Limit



Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

1

1

25

THROUGH

Month

Day

Year

6

30

25

11 ELECTION

ELECTION DATE

Month

Day

Year

/

/

ELECTION TYPE



Primary



Runoff



Other
Description



General



Special

12 OFFICE

OFFICE HELD (if any)

Judge Dallas County Probate Court No. 3

13 OFFICE SOUGHT (if known)

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

COMMITTEE NAME



GENERAL

COMMITTEE ADDRESS



SPECIFIC

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 Hon. Margaret Jones-Johnson		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 2992.10
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 43,388.25
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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.

[Handwritten Signature]
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Margaret Jones-Johnson this the 14 day of July

20 25, to certify which, witness my hand and seal of office.

Elizabeth Lariz-Roberson Elizabeth Lariz-Roberson Notary Public
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____

My address is _____
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

Hon. Margaret Jones-Johnson

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
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	\$ 250.00
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	\$ 2,742.10
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	\$

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 G: 9	2 FILER NAME Hon. Margaret Jones-Johnson	3 Filer ID (Ethics Commission Filers)
4 Date 07/01/2025	5 Payee name Amazon	
6 Amount (\$) 27.05 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code Amazon.com	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) gift	(b) Description birthday gifts for staff
	(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 07/01/2025	Payee name Amazon	
Amount (\$) 130.92 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code Amazon.com	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) gift	Description birthday gifts for staff
	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 05/29/2025	Payee name Amazon	
Amount (\$) 50.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code Amazon.com	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) gift	Description bithday gifts for staff
	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 PERSONAL FUNDS

SCHEDULE G

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
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Credit Card Payment

Event Expense
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Food/Beverage Expense
Gift/Awards/Memorials Expense
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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: 9	2 FILER NAME Hon. Margaret Jones-Johnson	3 Filer ID (Ethics Commission Filers)
4 Date 01/23/2025	5 Payee name Jason's Deli	
6 Amount (\$) 221.86 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; jason'sdeli.com	City: State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food Beverage	(b) Description Staff lunch
	(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 02/13/2025	Payee name NCPJ	
Amount (\$) 200.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; NCPJ.org	City: State: Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Dues	Description Annual membership dues
	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 02/13/2025	Payee name Tiff's Treats	
Amount (\$) 60.43 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; Tiffstreats.com	City: State: Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Beverage	Description Valentine's treat for staff
	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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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
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Gift/Awards/Memorials Expense
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Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
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Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

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1 Total pages Schedule G: 9	2 FILER NAME Hon. Margaret Jones-Johnson	3 Filer ID (Ethics Commission Filers)
4 Date 04/22/2025	5 Payee name Target	
6 Amount (\$) 16.24 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City: State: Zip Code Cedar Hill, TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift	(b) Description Staff member birthday gift
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 05/12/2025	Payee name TCJ	
Amount (\$) 40.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City: State: Zip Code Yourhonor.com	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description Purchase Water bottle at convention
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 05/15/2025	Payee name ifretelli Pizza	
Amount (\$) 107.24 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City: State: Zip Code ifratellipizza.com	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Beverage	Description Lunch for staff
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
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Candidate/Officeholder/Political Committee
Credit Card Payment

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Gift/Awards/Memorials Expense
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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: 9	2 FILER NAME Hon. Margaret Jones-Johnson	3 Filer ID (Ethics Commission Filers)
4 Date 05/29/2025	5 Payee name Elle Vie	
6 Amount (\$) 80.01 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address: Ellevie.com City: State: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift	(b) Description Staff member birthday gift
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense.	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 05/30/2025	Payee name Sushi Ya	
Amount (\$) 166.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address: Elm St. Dallas, TX City: State: Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Beverage	Description Lunch for saff
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 06/04/2025	Payee name Menger Hotel	
Amount (\$) 146.41 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address: MENGERHOTEL.com City: State: Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Beverage	Description Dinner for staff participants AOT training
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

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

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1 Total pages Schedule G: 9	2 FILER NAME Hon. Margaret Jones-Johnson	3 Filer ID (Ethics Commission Filers)
4 Date 06/05/2025	5 Payee name Morton's Steak house	
6 Amount (\$) 106.48 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code Morton'ssteakhouse.com	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food Beverage	(b) Description Dinner Staff members AOT training
	(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 06/05/2025	Payee name Menger Hotel	
Amount (\$) 33.06 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code Mengerhotel.com	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Beverage	Description Breakfast for self + tip
	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 06/11/2025	Payee name Flowers by Legacy	
Amount (\$) 122.97 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code flowersbylegacy.com	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Berevemet	Description Purchase a tree for planting in memory of Judge Joe Loving
	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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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 9	2 FILER NAME Hon. Margaret Jones-Johnson	3 Filer ID (Ethics Commission Filers)
4 Date 01/14/2025	5 Payee name Speed Burger	
6 Amount (\$) 127.18 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code Seedburger.com	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food Beverage	(b) Description Reimbursed Zane Braggs for Lunch purchase for Staff members
	(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 01/17/2025	Payee name Domino's Pizza	
Amount (\$) 125.46 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code Dominospizza.com	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Beverage	Description Reimburse Jesus Espinoza for Lunch purchase for staff members
	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 06/28/2025	Payee name Print Noise	
Amount (\$) 257.21 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code printnoise.com	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Campaign expense	Description purchase campaign cards
	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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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

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Candidate/Officeholder/Political Committee
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Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

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1 Total pages Schedule G: 9	2 FILER NAME Hon. Margaret Jones-Johnson	3 Filer ID (Ethics Commission Filers)
4 Date 05/17/2025	5 Payee name Amazon	
6 Amount (\$) 36.98 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code Amazon.com	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift	(b) Description Staff Birthday gifts
	(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 03/28/2025	Payee name Domino's Pizza	
Amount (\$) 88.64 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code Dominospizza.com	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Beverage	Description Purchased Pizza Lunch for staff members
	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 01/25/2025	Payee name Amazon	
Amount (\$) 97.41 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code Amazon.com	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office expense	Description purchase cabinet for new office bathroom
	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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Travel In District
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Other (enter a category not listed above)

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1 Total pages Schedule G: 9	2 FILER NAME Hon. Margaret Jones-Johnson	3 Filer ID (Ethics Commission Filers)
4 Date 03/05/2025	5 Payee name Speed Burger	
6 Amount (\$) 58.22 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code Seedburger.com	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food Beverage	(b) Description Purchase Lunch for Staff members
	(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 01/22/2025	Payee name Amazon	
Amount (\$) 58.60 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code Amazon.com	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office expense	Description cleaning products for new offices
	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 06/04/2025	Payee name Sams	
Amount (\$) 116.46 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code Sams.com	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Beverage	Description Purchased bottled water and snacks for staff
	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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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: 9	2 FILER NAME Hon. Margaret Jones-Johnson	3 Filer ID (Ethics Commission Filers)
4 Date 01/28/2025	5 Payee name Costco	
6 Amount (\$) 135.72 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address: City: State: Zip Code Costco.com	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food Beverage	(b) Description Purchase bottled water and snacks for staff
	(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 01/17/2025	Payee name Costco	
Amount (\$) 131.55 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address: City: State: Zip Code Costco.com	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food beverage	Description Purchase bottled water and snacks for staff
	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 (\$) <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address: City: State: Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Beverage	Description Purchased bottled water and snacks for staff
	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