

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

48

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

Mrs. Shequitta D

NICKNAME

LAST

SUFFIX

Kelly

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

P.O. Box 1835 Cedar Hill, TX 75106

☐ Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(214)4449322

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

Dr. Frederick Douglas

NICKNAME

LAST

SUFFIX

Haynes

7 CAMPAIGN
TREASURER
ADDRESS
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;

CITY;

STATE;

ZIP CODE

2020 W. Wheatland Rd- Dallas, TX 75232

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(972)228 5200

9 REPORT TYPE

☒ January 15

☐ 30th day before election

☐ Runoff

☐ 15th day after campaign

treasurer appointment
(Officeholder Only)

☐ July 15

☐ 8th day before election

☐ Exceeded Modified

Reporting Limit

☐ Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

Month

Day

Year

7

1

25

THROUGH

12

31

25

11 ELECTION

ELECTION DATE

Month

Day

Year

03

03

26

ELECTION TYPE

☐ Primary

☐ Runoff

☐ Other

Description

☒ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

Judge Of County Criminal Court 11

13 OFFICE SOUGHT (if known)

Judge of County Criminal Court 11

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

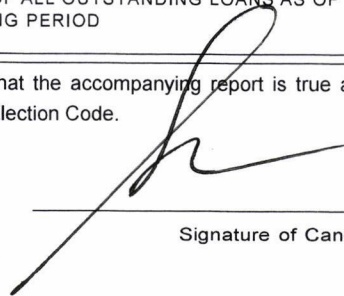
GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 2

15 JC/OH NAME Shequitta Kelly		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 31,175
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 5284.66
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 29,556.04
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

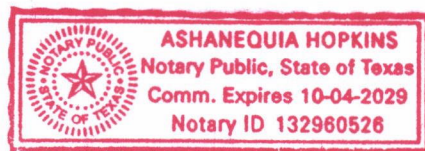
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Signature of Candidate/Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by SHEQUITTA Kelly this the 14 day of January, 2024, to certify which, witness my hand and seal of office.

Ashanequia Hopkins Ashanequia Hopkins 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)

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

35

2 FILER NAME

Shequitta Kelly

3 Filer ID (Ethics Commission Filers)

4 Date
7/22/2025

5 Full name of contributor ☐ out-of-state PAC ID#: _____
Stephanie Huff

7 Amount of contribution (\$)
\$100

6 Contributor address; City; State; Zip Code

P.O. Box 225796 Dallas, TX 75222

8 Contributor's principal occupation

Judge

9 Contributor's job title

Judge

10 Contributor's employer/law firm

Dallas County

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

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

Date

Full name of contributor ☐ out-of-state PAC ID#: _____

Amount of contribution (\$)

7/22/2025

Bruce Patton

\$500

Contributor address; City; State; Zip Code

2626 Cole Ave Suite 399 Dallas, TX 75204

Contributor's principal occupation

Lawyer

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

Self Employed

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

Date
7/24/2025

Full name of contributor ☐ out-of-state PAC ID#: _____
Tulani Washington

Amount of contribution (\$)
\$250

Contributor address; City; State; Zip Code

333 Lee Pkwy Dallas, TX 75219

Contributor's principal occupation

Lawyer

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

Self Employed

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 7/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Randall Cross 6 Contributor address; City; State; Zip Code 3500 Oaklawn Ave Unit 530 Dallas TX 75219	7 Amount of contribution (\$) \$1000
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 7/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Okey Anyiam Contributor address; City; State; Zip Code 11615 Forest Central Dr.. Dallas, TX75243	Amount of contribution (\$) \$150
Contributor's principal occupation Lawyer		Contributor's job title
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 7/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Albert Gavaldon Contributor address; City; State; Zip Code 2820 McKinnon Dallas TX 75201	Amount of contribution (\$) \$500
Contributor's principal occupation Lawyer		Contributor's job title
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 7/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Toby Shook 6 Contributor address; City; State; Zip Code 1717 N. Harwood St. Suite 2750 Dallas, TX 75201	7 Amount of contribution (\$) \$1000
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 9/29/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Demarcus Ward Contributor address; City; State; Zip Code 1111 W. Mockingbird Ln Ste. 1480 Dallas, TX 75247	Amount of contribution (\$) \$1000
Contributor's principal occupation Lawyer		Contributor's job title
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 7/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Charles Maduka Contributor address; City; State; Zip Code 2201 Main Street Dallas, TX 75201	Amount of contribution (\$) \$1000
Contributor's principal occupation Lawyer		Contributor's job title
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 9/1/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Bradley Breitbarth 6 Contributor address; City; State; Zip Code	7 Amount of contribution (\$) \$20
8 Contributor's principal occupation Retired		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 9/24/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Mary Ruth Peterson Contributor address; City; State; Zip Code 1329 N. Harlem Ave Unit 1 Oak Park, IL 60302	Amount of contribution (\$) \$100
Contributor's principal occupation Teacher		Contributor's job title
Contributor's employer/law firm Singapore American School		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 9/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Jeffrey Rosenfield Contributor address; City; State; Zip Code 133 N. Riverfront Blvd Dallas, TX 75207	Amount of contribution (\$) \$100
Contributor's principal occupation Retired		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 9/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Monique Ward 6 Contributor address; City; State; Zip Code 1910 Pacific Ave, Dallas TX 75201	7 Amount of contribution (\$) \$1000
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/1/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Ellyce Lindberg Contributor address; City; State; Zip Code 133 N. RiverFront Blvd	Amount of contribution (\$) \$150
Contributor's principal occupation Lawyer		Contributor's job title Assistant District Attorney
Contributor's employer/law firm Dallas County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/3/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Shannon Holmes Contributor address; City; State; Zip Code 8585 N. Stemmons Fwy Dallas, TX 75247	Amount of contribution (\$) \$1000
Contributor's principal occupation Lawyer		Contributor's job title
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 9/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Nick Pittman 6 Contributor address; City; State; Zip Code 901 Main St. #3670 Dallas, TX 75202	7 Amount of contribution (\$) \$1000
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/2/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Ole Estrada Contributor address; City; State; Zip Code 5224 W. Jefferson Blvd. Dallas, TX 75211	Amount of contribution (\$) \$1000
Contributor's principal occupation Lawyer		Contributor's job title Assistant District Attonrey
Contributor's employer/law firm Dallas County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/9/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Bob Alvarado Contributor address; City; State; Zip Code 2050 W 190th Street, Ste. 105A Torrance, CA 90504	Amount of contribution (\$) \$500
Contributor's principal occupation Chief Executive officer		Contributor's job title
Contributor's employer/law firm Court Call		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/9/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Charlie Humphrey 6 Contributor address; City; State; Zip Code 11300 N. Central Exp #430 Dallas, TX 75243	7 Amount of contribution (\$) \$250
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/9/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Frederick D. Haynes III Contributor address; City; State; Zip Code 202 W. Wheatland Ave Dallas, TX	Amount of contribution (\$) \$1000
Contributor's principal occupation Clergy		Contributor's job title Pastor
Contributor's employer/law firm Friendship West Baptist Church		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/9/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Jay Zuckerman Contributor address; City; State; Zip Code 2720 N. Stemmons Dallas, TX 75207	Amount of contribution (\$) \$350
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Ivan & Lillian Freeman 6 Contributor address; City; State; Zip Code 3724 Rugged Dr. Dallas, TX 75224	7 Amount of contribution (\$) \$200
8 Contributor's principal occupation Retired		9 Contributor's job title Attorney
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/12/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: John Wiley Price Contributor address; City; State; Zip Code 411 Elm Streetm 2nd Fl Dallas, TX 75202	Amount of contribution (\$) \$1000
Contributor's principal occupation Commissioner		Contributor's job title Commissioner
Contributor's employer/law firm Dallas County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Tom Cox Contributor address; City; State; Zip Code 8150 N. Central Expy #1435 Dallas, TX 75206	Amount of contribution (\$) \$1000
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date 10/12/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Anthony Farmer	7 Amount of contribution (\$) \$1000
6 Contributor address; City; State; Zip Code 901 Main St. Ste 5330 Dallas, 75202		
8 Contributor's principal occupation Attorney		9 Contributor's job title
10 Contributor's employer/law firm Self employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Contributor address; City; State; Zip Code	Amount of contribution (\$)
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Contributor address; City; State; Zip Code	Amount of contribution (\$)
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Shawn Storey 6 Contributor address; City; State; Zip Code 7522 Campbell Rd. Dallas, TX 75248	7 Amount of contribution (\$) \$200
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/11/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Robertha Frazier Contributor address; City; State; Zip Code	Amount of contribution (\$) \$100
Contributor's principal occupation Owner		Contributor's job title Owner
Contributor's employer/law firm Sweet Encounter Bakery		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Jesus Marquez Contributor address; City; State; Zip Code 750 N. St. Paul Street Ste 2100 Dallas, TX 75201	Amount of contribution (\$) \$200
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/16/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: David LeBeau 6 Contributor address; City; State; Zip Code 602 Calhoun St. Fort Wayne, IN46802	7 Amount of contribution (\$) \$50
8 Contributor's principal occupation Judge		9 Contributor's job title Judge
10 Contributor's employer/law firm Allen County		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Jasmine Contreras Contributor address; City; State; Zip Code	Amount of contribution (\$) \$50
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Heath Harris Contributor address; City; State; Zip Code 8611 Quick Silver Dr. Dallas, TX 75249	Amount of contribution (\$) \$250
Contributor's principal occupation Attorney		Contributor's job title
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Okechukwu Okoroji 6 Contributor address; City; State; Zip Code 2909 E. Arkansas Ln Ste c-102 Arlington, TX 76010	7 Amount of contribution (\$) \$500
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/22/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Kenneth Weatherspoon Contributor address; City; State; Zip Code 2909 E. Arkansas Ln Ste c-102 Arlington, TX 76010	Amount of contribution (\$) \$200
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/7/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ MYRA McIntosh Contributor address; City; State; Zip Code 2914 Canada Drive Dallas, TX 75212	Amount of contribution (\$) \$1000
Contributor's principal occupation Lawyer		Contributor's job title Lawyer
Contributor's employer/law firm Self employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Stephanie Gonzalez 6 Contributor address; City; State; Zip Code 133 N. RiverFront Blvd	7 Amount of contribution (\$) \$ 250
8 Contributor's principal occupation Attorney		9 Contributor's job title Public Defender
10 Contributor's employer/law firm Dallas County		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Maribel Cruz Contributor address; City; State; Zip Code 628 Stellawy Dr. Desoto, TX 75115	Amount of contribution (\$) \$200
Contributor's principal occupation Court Reporter		Contributor's job title Court Reporter
Contributor's employer/law firm Dallas County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Sharon Miller Contributor address; City; State; Zip Code 608 Abott Ave Desoto, TX75115	Amount of contribution (\$) \$100
Contributor's principal occupation Sales		Contributor's job title Insurance Agent
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Russell Wilson 6 Contributor address; City; State; Zip Code 1910 Pacific Ave Ste. 12050 Dallas, TX 75201	7 Amount of contribution (\$) \$1000
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Nnamdi Ekeh Contributor address; City; State; Zip Code 11304 Preston Rd Dallas, TX75252	Amount of contribution (\$) \$100
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Rex Gerstner Contributor address; City; State; Zip Code 12225 Greenville Ave #850 Dallas, TX 75243	Amount of contribution (\$) \$50
Contributor's principal occupation Program Facilitator		Contributor's job title Program Facilitator
Contributor's employer/law firm Unlocking Doors		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Toni Rose 6 Contributor address; City; State; Zip Code P.O. Box 41867 Dallas, TX 75241	7 Amount of contribution (\$) \$100
8 Contributor's principal occupation State Representative		9 Contributor's job title State Representative
10 Contributor's employer/law firm State of Texas		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Gwednolyn Daniels Contributor address; City; State; Zip Code	Amount of contribution (\$) \$25
Contributor's principal occupation Retired		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Natasha Egharevba Contributor address; City; State; Zip Code 2610 Kestral Dr. Princeton, TX75407	Amount of contribution (\$) \$25
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Cox P.L. L. C		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/24/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Brent Gleason 6 Contributor address; City; State; Zip Code 2014 Main St. Rm 226 Dallas, TX 75201	7 Amount of contribution (\$) \$150
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/24/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Imani Maatuka Contributor address; City; State; Zip Code 2021 McKinney Ave Dallas, TX 75201	Amount of contribution (\$) \$100
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Sidley		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/24/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Kennard Bowen Contributor address; City; State; Zip Code 6659 Autumn Wood Trail Dallas, TX 75232	Amount of contribution (\$) \$100
Contributor's principal occupation Retired		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Erika Douglas 6 Contributor address; City; State; Zip Code P.O. Box 41867 Dallas, TX 75241	7 Amount of contribution (\$) \$100
8 Contributor's principal occupation CO		9 Contributor's job title CO
10 Contributor's employer/law firm Dallas County Sheriff's Department		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Crystal Garland Contributor address; City; State; Zip Code 904 Wisteria Way, Richardson TX 75080	Amount of contribution (\$) \$50
Contributor's principal occupation Pre trial Diversion Program		Contributor's job title Program manager
Contributor's employer/law firm Dallas County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Lalonni Hagerman Contributor address; City; State; Zip Code 1430 Warwick Dr. Lancaster, TX 75134	Amount of contribution (\$) \$50
Contributor's principal occupation Director of Financial Services		Contributor's job title
Contributor's employer/law firm Prairie View A&M		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/23/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Angela Lowe 6 Contributor address; City; State; Zip Code	7 Amount of contribution (\$) \$20
8 Contributor's principal occupation		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Dezmond Cooks Contributor address; City; State; Zip Code 1700 Pacific Ave Ste. 1810 Dallas, TX 75201	Amount of contribution (\$) \$100
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Derrick Julkes Contributor address; City; State; Zip Code 5009 w. 17th St. Gary, IN 46406	Amount of contribution (\$) \$250
Contributor's principal occupation Attorney		Contributor's job title
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Jennifer Castillo 6 Contributor address; City; State; Zip Code 6934 Rocky Top Cir Dallas, TX 75252	7 Amount of contribution (\$) \$500
8 Contributor's principal occupation Attorney		9 Contributor's job title
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Taylor Johnson Contributor address; City; State; Zip Code 900 Jackson St Dallas, TX75202	Amount of contribution (\$) \$500
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Bruce Kaye Contributor address; City; State; Zip Code 2121 Pearl St. Ste.300	Amount of contribution (\$) \$200
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Abigail James 6 Contributor address; City; State; Zip Code 1207 S. Maple St. Ruston, LA 71270	7 Amount of contribution (\$) \$150
8 Contributor's principal occupation Retired		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Theresa Daniel Contributor address; City; State; Zip Code 2228 Springhill Dr. Dallas, TX 75228	Amount of contribution (\$) \$200
Contributor's principal occupation Commissioner		Contributor's job title Commissioner
Contributor's employer/law firm Dallas County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Brenda Murphy Contributor address; City; State; Zip Code 300 Dashing Creek Dr. Desoto, TX 75115	Amount of contribution (\$) \$100
Contributor's principal occupation Retired		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/23/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Angel Adams 6 Contributor address; City; State; Zip Code 215 Linda Lane Irving, TX 75062	7 Amount of contribution (\$) \$300
8 Contributor's principal occupation Nurse		9 Contributor's job title Nurse Practitioner
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Cornelius Kasey Contributor address; City; State; Zip Code 4303 N. Central Expwy- Dallas, TX 75205	Amount of contribution (\$) \$150
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Desiree Patterson Contributor address; City; State; Zip Code 6440 Sudbury Ln Mesquite, TX 65181	Amount of contribution (\$) \$150
Contributor's principal occupation Unemployed		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

35

2 FILER NAME

Shequitta Kelly

3 Filer ID (Ethics Commission Filers)

4 Date
10/23/25

5 Full name of contributor ☐ out-of-state PAC ID#: _____
David Finn

7 Amount of contribution (\$) \$300

6 Contributor address; City; State; Zip Code

4015 Main Street Dallas, TX 75223

8 Contributor's principal occupation
Attorney

9 Contributor's job title
Attorney

10 Contributor's employer/law firm

Self Employed

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

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

Date

Full name of contributor ☐ out-of-state PAC ID#: _____

Amount of contribution (\$)

10/23/25

Linda Wade

\$100

Contributor address; City; State; Zip Code

807 E. 10th St Kemp, TX 75143

Contributor's principal occupation

Home Health Aid

Contributor's job title

Contributor's employer/law firm

Self Employed

Law firm of contributor's spouse (if any)

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

Date

Full name of contributor ☐ out-of-state PAC ID#: _____

Amount of contribution (\$)

10/23/25

Carrie Singleton

\$100

Contributor address; City; State; Zip Code

P.O. Box 386

Contributor's principal occupation

Attorney

Contributor's job title

Contributor's employer/law firm

Self Employed

Law firm of contributor's spouse (if any)

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

35

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

Shequitta Kelly

4 Date
10/23/25

5 Full name of contributor ☐ out-of-state PAC ID#: _____
Eric Puente

7 Amount of contribution (\$) \$500

6 Contributor address; City; State; Zip Code

601 Haines Ave Dallas, TX 75208

8 Contributor's principal occupation
Attorney

9 Contributor's job title
Attorney

10 Contributor's employer/law firm

Self Employed

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

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

Date

Full name of contributor ☐ out-of-state PAC ID#: _____

Amount of contribution (\$)

10/23/25

Lacy Durham

\$50

Contributor address; City; State; Zip Code

2801 Tangerine Ln Plano, TX 75074

Contributor's principal occupation

Lawyer

Contributor's job title

Lawyer

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

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

Date

Full name of contributor ☐ out-of-state PAC ID#: _____

Amount of contribution (\$)

10/23/25

Katrina Coleman

\$100

Contributor address; City; State; Zip Code

Contributor's principal occupation

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/23/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Tiara Thomas 6 Contributor address; City; State; Zip Code 4131 N. Central Expwy Dallas, TX 75204	7 Amount of contribution (\$) \$100
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Darius Owens Contributor address; City; State; Zip Code 7829 Bayside Dr. Rowlett, TX 75088	Amount of contribution (\$) \$100
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Tierra Mclinn Contributor address; City; State; Zip Code 3712 Pelican Rest Way, Arlington, TX 76005	Amount of contribution (\$) \$100
Contributor's principal occupation Physican Assistant		Contributor's job title
Contributor's employer/law firm UT Southwestern		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/23/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Kamdi Umeozulu 6 Contributor address; City; State; Zip Code 932 Falcon Dr. Allen, TX 75013	7 Amount of contribution (\$) \$100
8 Contributor's principal occupation Student		9 Contributor's job title
10 Contributor's employer/law firm Unemployed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Dana Williamson Contributor address; City; State; Zip Code 913 Blue Quail Run Glenn Heights, TX 75154	Amount of contribution (\$) \$100
Contributor's principal occupation VR Counselor		Contributor's job title
Contributor's employer/law firm Texas Workforce		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Eric Mauro Contributor address; City; State; Zip Code 18601 LBJ Fwy Wesquite, TX 75150	Amount of contribution (\$) \$250
Contributor's principal occupation Attorney		Contributor's job title
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

35

2 FILER NAME

Shequitta Kelly

3 Filer ID (Ethics Commission Filers)

4 Date
10/23/25

5 Full name of contributor ☐ out-of-state PAC ID#: _____
Elizabeth Pryor

6 Contributor address; City; State; Zip Code

332 Squirebrook Dr. Desoto, TX 75115

7 Amount of contribution (\$)
\$200

8 Contributor's principal occupation

Attorney

9 Contributor's job title

Prosecutor

10 Contributor's employer/law firm

Dallas County

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

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

Date

10/23/25

Full name of contributor ☐ out-of-state PAC ID#: _____

Beatrice Bruno

Contributor address; City; State; Zip Code

412 S. 13th St. Van Buren, AR 72956

Amount of contribution (\$)

\$100

Contributor's principal occupation

Student/Editor

Contributor's job title

Contributor's employer/law firm

Self Employed

Law firm of contributor's spouse (if any)

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

Date

10/23/25

Full name of contributor ☐ out-of-state PAC ID#: _____

Mason Hart

Contributor address; City; State; Zip Code

711 Duffield Dr Dallas, TX 75240

Amount of contribution (\$)

\$100

Contributor's principal occupation

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/23/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Pepper Johnson	7 Amount of contribution (\$) \$50
6 Contributor address; City; State; Zip Code		
8 Contributor's principal occupation Strategist		9 Contributor's job title Leadership Development Chair
10 Contributor's employer/law firm Toyota		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Marla Peterson	Amount of contribution (\$) \$15
Contributor address; City; State; Zip Code 625 Stroud Ln Garland TX 75043		
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/24/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Tulani Washington	Amount of contribution (\$) \$250
Contributor address; City; State; Zip Code 333 Lee PKwy Dallas, TX 75219		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/11/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: David Reyna	7 Amount of contribution (\$) \$1000
6 Contributor address; City; State; Zip Code 300 Centre St. Dallas TX 75208		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm self employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Crystal Love Contributor address; City; State; Zip Code undisclosed	Amount of contribution (\$) \$150
Contributor's principal occupation Confinement officer		Contributor's job title
Contributor's employer/law firm Dallas Sheriff's Department		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/24/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Jennifer Phillips Contributor address; City; State; Zip Code	Amount of contribution (\$) \$30
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)****SCHEDULE A(J)1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 39
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/23/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Shaquandi Eaves 6 Contributor address; City; State; Zip Code 2007 Paducah Ln Grand Prairie, TX 75052	7 Amount of contribution (\$) \$200
8 Contributor's principal occupation Representative		9 Contributor's job title Sales
10 Contributor's employer/law firm Court Call		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Dana Jackson Contributor address; City; State; Zip Code 201 South Joe Wilson Rd Apt. 1522	Amount of contribution (\$) \$25
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/24/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Shannon Evans Contributor address; City; State; Zip Code 1420 Oakhill Dr Plano Texas 75075	Amount of contribution (\$) \$50
Contributor's principal occupation Director		Contributor's job title
Contributor's employer/law firm Herrin Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/23/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Idris Ashimi <i>Type text here</i> 6 Contributor address; City; State; Zip Code 2939 Corston Rd Ann Arbor MI 48105	7 Amount of contribution (\$) \$100
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Hop Skip Drive Inc		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/24/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Janie Martinez Contributor address; City; State; Zip Code 1951 Pleasant Dr Dallas, TX 75217	Amount of contribution (\$) \$100
Contributor's principal occupation Attorney		Contributor's job title Prosecutor
Contributor's employer/law firm Dallas County District Attorney's Office		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/24/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Karl Warren Contributor address; City; State; Zip Code 1304 Boardwalk St Arlington, TX 76011	Amount of contribution (\$) \$100
Contributor's principal occupation IT		Contributor's job title Sr. Systems Analyst
Contributor's employer/law firm Dallas County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/27/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Larry Allen 6 Contributor address; City; State; Zip Code 225 W. Cartwright Rd Mesquite, TX 75149	7 Amount of contribution (\$) \$500
8 Contributor's principal occupation Insurance		9 Contributor's job title Owner
10 Contributor's employer/law firm State Farm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/27/25	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC ID#: Hugo Aguilar Contributor address; City; State; Zip Code 1111 Wst Mockingbird Ln Dallas, TX75247	Amount of contribution (\$) \$250
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/28/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Shareeka Meadows Contributor address; City; State; Zip Code 124 Ervin Street Hendersonville, TN 37075	Amount of contribution (\$) \$250
Contributor's principal occupation Sales		Contributor's job title Vice President
Contributor's employer/law firm Dollar General		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 10/30/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Tanjaree Turner 6 Contributor address; City; State; Zip Code 1200 Snowbird Dr. Little Elm, TX 75068	7 Amount of contribution (\$) \$100
8 Contributor's principal occupation Government Contracts		9 Contributor's job title Senior Human Resources Specialist
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/4/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Priscilla Pelli Contributor address; City; State; Zip Code 3212 Woodwind Ln Dallas, TX 75229	Amount of contribution (\$) \$100
Contributor's principal occupation Attorney		Contributor's job title Prosecutor
Contributor's employer/law firm Dallas District Attorney		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/11/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Michael Jones Contributor address; City; State; Zip Code 1715 Maplewood Dr. Glenn Heights, TX 75154	Amount of contribution (\$) \$100
Contributor's principal occupation Law Enforcement		Contributor's job title Bailiff
Contributor's employer/law firm Dallas County Sheriff's Department		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 11/13/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Chance Smalley 6 Contributor address; City; State; Zip Code 3930 Clade Rd Suite 109 Colleyville, TX 76034	7 Amount of contribution (\$) \$500
8 Contributor's principal occupation Non profits		9 Contributor's job title President
10 Contributor's employer/law firm Jewel Foundation		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/21/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Tiffany Garner Contributor address; City; State; Zip Code 11 Municipal Dr St. 200 Fishers IN 46038	Amount of contribution (\$) \$500
Contributor's principal occupation Owner/CEO		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/27/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Kevin Goss Contributor address; City; State; Zip Code Nashville, TN	Amount of contribution (\$) \$40
Contributor's principal occupation Unemployed		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 11/28/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Bill Knox 6 Contributor address; City; State; Zip Code 900 Jackson St. #650 Dallas, TX 75202	7 Amount of contribution (\$) \$500
8 Contributor's principal occupation Attorney		9 Contributor's job title
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/28/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Gail Lofton Contributor address; City; State; Zip Code 1108 Longmeadow Ln Desoto, TX 75115	Amount of contribution (\$) \$150
Contributor's principal occupation Retired		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/4/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Gail Lofton Contributor address; City; State; Zip Code 1108 Longmeadow Ln Desoto, TC 75115	Amount of contribution (\$) \$125
Contributor's principal occupation Reitred		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 35
2 FILER NAME Shequitta Kelly		3 Filer ID (Ethics Commission Filers)
4 Date 12/4/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Claudia Jordan 6 Contributor address; City; State; Zip Code 3624 Sable Ridge Dr. Dallas, TX 75287	7 Amount of contribution (\$) \$250
8 Contributor's principal occupation Entrepreneur		9 Contributor's job title
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/8/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Preston Pete Contributor address; City; State; Zip Code 11163 Still Hollow Dr. Frisco, TX 75035	Amount of contribution (\$) \$500
Contributor's principal occupation Engineer		Contributor's job title
Contributor's employer/law firm Microsoft		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/31/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Darren James Contributor address; City; State; Zip Code 5010 Riverside Dr. Suite 250 Building 4 Irving, TX 75039	Amount of contribution (\$) \$250
Contributor's principal occupation Architect		Contributor's job title
Contributor's employer/law firm KAI Enterprises		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 11		2 FILER NAME STHEQUITA Kelly		3 Filer ID (Ethics Commission Filers)	
4 Date 7-2-25		5 Payee name African American Museum			
6 Amount (\$) \$100		7 Payee address; City; State; Zip Code 3536 Grand Avenue Dallas TX 75210			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fee		(b) Description Ad expense		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 7-15-25		Payee name USPS			
Amount (\$) \$ 31.20		Payee address; City; State; Zip Code 401 Tom Landry Fwy Dallas, TX 75260			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Overhead expense		Description Postage		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 7-28-25		Payee name Constant Contact			
Amount (\$) \$12.79		Payee address; City; State; Zip Code 890 Winter St Ste 300 Waltham, MA 02451			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fee		Description Email Platform		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name Office sought Office held					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 11		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date 8-4-25		5 Payee name Ashanequia Hopkins			
6 Amount (\$) \$100		7 Payee address; City; State; Zip Code 2400 S. Hampton Rd. #9304 Glenn Heights, TX 75154			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fee		(b) Description Retiree worker		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 8-12-25		Payee name Stephanie Huff			
Amount (\$) \$100		Payee address; City; State; Zip Code P.O. Box 225796 Dallas, TX 75222			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation		Description Campaign Donation		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 8-27-25		Payee name Constant Contact			
Amount (\$) \$12.79		Payee address; City; State; Zip Code 890 Winter St. Ste 300 Waltham, MA 02451			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fee		Description Email platform		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 11	2 FILER NAME SHEQUITA Kelly	3 Filer ID (Ethics Commission Filers)
4 Date 9-8-25	5 Payee name Darcia Jacobs	
6 Amount (\$) \$100	7 Payee address; City; State; Zip Code P.O. Box 2438 Dexto, TX 75123	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation	(b) Description Campaign Donation
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 9-22-25	Payee name Temu	
Amount (\$) \$112.86	Payee address; City; State; Zip Code 31 St. James Avenue, Boston MA 02114	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Fundraiser Decor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 9.29.25	Payee name Constant Contact	
Amount (\$) \$25.52	Payee address; City; State; Zip Code 890 Winter St. Ste 300 Waltham, MA 02451	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fee	Description Email Platform
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 11		2 FILER NAME SHEQUITA Kily		3 Filer ID (Ethics Commission Filers)	
4 Date 9-30-25		5 Payee name Clearstream			
6 Amount (\$) \$ 29.00		7 Payee address; City; State; Zip Code 260 S. Tarragona St. Ste 150 Pensacola, FL 32502			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) fee		(b) Description Text messaging Service		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 10-1-25		Payee name Temu			
Amount (\$) \$ 84.10		Payee address; City; State; Zip Code 31 St. James Avenue, Boston MA 02116			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Donor Gifts		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 10/24		Payee name Matthew Simmons			
Amount (\$) \$ 125		Payee address; City; State; Zip Code 18777 Midway Rd Apt. 306 Dallas, TX 75287			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event expense		Description Payroll / talent		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 11	2 FILER NAME Shequita Kelly	3 Filer ID (Ethics Commission Filers)			
4 Date 10/24	5 Payee name Otis Clayborne				
6 Amount (\$) \$150	7 Payee address; City; State; Zip Code 3415 Parrot Street Dallas TX 75216				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Photographer			
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width:100%; border: none;"> <tr> <td style="width:50%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
Date 10/24	Payee name Lukwan Macellan				
Amount (\$) \$500	Payee address; City; State; Zip Code				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description DJ			
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width:100%; border: none;"> <tr> <td style="width:50%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
Date 10/27	Payee name W Dallas				
Amount (\$) 2,276.82	Payee address; City; State; Zip Code 2440 Victory PARK LN Dallas TX 75219				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event expense	Description Venue			
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width:100%; border: none;"> <tr> <td style="width:50%;">Candidate / Officeholder name</td> <td style="width:25%;">Office sought</td> <td style="width:25%;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 11	2 FILER NAME STEQUITA Kelly	3 Filer ID (Ethics Commission Filers)
4 Date 10/27	5 Payee name Constant Contact	
6 Amount (\$) \$12.79	7 Payee address; City; State; Zip Code 890 Winter St. Ste 300 Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) fee	(b) Description Email Platform
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 11/12/25	Payee name Dallas County Democrats		
Amount (\$) \$250	Payee address; City; State; Zip Code 1414 N. Washington Ave, Dallas TX 75204		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description JJ. Dinner Ticket	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 11/13/25	Payee name Clear stream		
Amount (\$) \$49.00	Payee address; City; State; Zip Code 260 S. Tarragona St. Ste 150 Pensacola, FL 32502		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fee	Description Text Messaging Service	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 11		2 FILER NAME SHEQUITA Kelly		3 Filer ID (Ethics Commission Filers)	
4 Date 12-5-25		5 Payee name Contessa Porter			
6 Amount (\$) \$200		7 Payee address; City; State; Zip Code 381 W. Fork Apt 3623 Irving TX 75039			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation		(b) Description 12 Days of Christmas		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 12/7/25		Payee name Ashanequa Hopkins			
Amount (\$) \$150		Payee address; City; State; Zip Code 2400 S. Hampton Rd # 9304 Glenn Heights, TX 75154			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) fee		Description Notary		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 12/15/25		Payee name Judge Angela King			
Amount (\$) \$100		Payee address; City; State; Zip Code P.O. Box 2685 Desoto, TX 75123			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description Donation		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name		Office sought		Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>11</u>		2 FILER NAME <u>SHEQUITA Kelly</u>		3 Filer ID (Ethics Commission Filers)																														
4 Date <u>11/21/25</u>		5 Payee name <u>Elite News</u>																																
6 Amount (\$) <u>\$500</u>		7 Payee address; City; State; Zip Code 																																
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>		(b) Description <u>Ad</u>																															
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense																															
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held																																		
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">Date <u>11/28/25</u></td> <td colspan="4">Payee name <u>Constant Contact</u></td> </tr> <tr> <td colspan="2">Amount (\$) <u>\$12.79</u></td> <td colspan="4"> Payee address; City; State; Zip Code <u>890 Winter St. Ste 300 Waltham, MA 02451</u> </td> </tr> <tr> <td rowspan="2">PURPOSE OF EXPENDITURE</td> <td colspan="2">Category (See Categories listed at the top of this schedule) <u>Fec</u></td> <td colspan="3">Description <u>Email Platform</u></td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</td> <td colspan="3"><input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td colspan="6"> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held </td> </tr> </table>						Date <u>11/28/25</u>		Payee name <u>Constant Contact</u>				Amount (\$) <u>\$12.79</u>		Payee address; City; State; Zip Code <u>890 Winter St. Ste 300 Waltham, MA 02451</u>				PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Fec</u>		Description <u>Email Platform</u>			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense			Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
Date <u>11/28/25</u>		Payee name <u>Constant Contact</u>																																
Amount (\$) <u>\$12.79</u>		Payee address; City; State; Zip Code <u>890 Winter St. Ste 300 Waltham, MA 02451</u>																																
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Fec</u>		Description <u>Email Platform</u>																															
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense																															
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held																																		
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">Date <u>10-25-25</u></td> <td colspan="4">Payee name <u>Renee Cole for Jack and Jill INC</u></td> </tr> <tr> <td colspan="2">Amount (\$) <u>\$150</u></td> <td colspan="4"> Payee address; City; State; Zip Code <u>1930 17th Street, NW Washington, DC 20009</u> </td> </tr> <tr> <td rowspan="2">PURPOSE OF EXPENDITURE</td> <td colspan="2">Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u></td> <td colspan="3">Description <u>Jack and Jill Ad</u></td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</td> <td colspan="3"><input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td colspan="6"> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held </td> </tr> </table>						Date <u>10-25-25</u>		Payee name <u>Renee Cole for Jack and Jill INC</u>				Amount (\$) <u>\$150</u>		Payee address; City; State; Zip Code <u>1930 17th Street, NW Washington, DC 20009</u>				PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>		Description <u>Jack and Jill Ad</u>			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense			Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
Date <u>10-25-25</u>		Payee name <u>Renee Cole for Jack and Jill INC</u>																																
Amount (\$) <u>\$150</u>		Payee address; City; State; Zip Code <u>1930 17th Street, NW Washington, DC 20009</u>																																
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>		Description <u>Jack and Jill Ad</u>																															
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense																															
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held																																		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED																																		

SCHEDULE F1

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

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)

1 Total pages Schedule F1: 11	2 FILER NAME SHEQUITA Kelly	3 Filer ID (Ethics Commission Filers)
----------------------------------	--------------------------------	---------------------------------------

4 Date 12/12/25	5 Payee name Stephanie Mitchell-Huff
--------------------	---

6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
\$100	P.O. Box 225 796	Dallas, TX		75222

8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
		Fee	Reimbursed Labor Day Table fee
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date	Payee name
------	------------

Amount (\$)	Payee address;	City;	State;	Zip Code
-------------	----------------	-------	--------	----------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date	Payee name
------	------------

Amount (\$)	Payee address;	City;	State;	Zip Code
-------------	----------------	-------	--------	----------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Forms provided by Texas Ethics Commission

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 11	2 FILER NAME SHEQUITA Kelly	3 Filer ID (Ethics Commission Filers)
4 Date 12-17-25	5 Payee name Costco	
6 Amount (\$) \$82.59	7 Payee address; City; State; Zip Code 250 Hwy 67 Duncanville, TX 75137	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event expense	
	(b) Description Luncheon Supplies	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 12-17-25	Payee name TBC Enterprise	
Amount (\$) \$339.53	Payee address; City; State; Zip Code Desoto TX 75115	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event expenses	
	Description Catering	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 12-19-25	Payee name Albertson Grocery	
Amount (\$) \$179.04	Payee address; City; State; Zip Code 427 E FARM to Market Rd 1382 Cedar Hill, TX 75137	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	
	Description Holiday Party Supplies	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 11	2 FILER NAME SHEQUITA Kelly	3 Filer ID (Ethics Commission Filers)
4 Date 12-29-25	5 Payee name Constant Contact	
6 Amount (\$) \$12.79	7 Payee address; City; State; Zip Code 890 Winter St. Ste 300 Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fee	(b) Description Email Platform
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 12/17/25	Payee name Ashanequia Hopkins		
Amount (\$) \$150	Payee address; City; State; Zip Code 2400 S. Hampton Rd #9304 Gunn Heights, TX 75154		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fee	Description Notary for petitions	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 9-22-25	Payee name Woman Carter Moses		
Amount (\$) \$100	Payee address; City; State; Zip Code 711 S. Cedar Ridge Dr. Duncenville, TX 75137		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED