

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 28						
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI John W <hr/> NICKNAME LAST SUFFIX Price	OFFICE USE ONLY Date Received ELECTRONICALLY FILED JAN 15 2026 AM 10:27 01/15/2026							
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 224725 Dallas TX 75222								
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 762-6992								
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Zan <hr/> NICKNAME LAST SUFFIX W Holmes	Date Hand-delivered or Date Postmarked <hr/> Receipt # Amount \$ <hr/> Date Processed <hr/> Date Imaged							
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE PO Box 224725 Dallas TX 75222								
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 762-6992								
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)								
10 PERIOD COVERED	Month Day Year Month Day Year 07 / 01 / 2025 THROUGH 12 / 31 / 2025								
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special								
12 OFFICE	OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) County Commissioner-District #3								
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. 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. <table style="width:100%; border: none;"> <tr> <td style="width:20%; border: none; vertical-align: top;"> COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC </td> <td style="border: none;"> <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">COMMITTEE NAME</td></tr> <tr><td style="padding: 2px;">COMMITTEE ADDRESS</td></tr> <tr><td style="padding: 2px;">COMMITTEE CAMPAIGN TREASURER NAME</td></tr> <tr><td style="padding: 2px;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td></tr> </table> </td> </tr> </table>			COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">COMMITTEE NAME</td></tr> <tr><td style="padding: 2px;">COMMITTEE ADDRESS</td></tr> <tr><td style="padding: 2px;">COMMITTEE CAMPAIGN TREASURER NAME</td></tr> <tr><td style="padding: 2px;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td></tr> </table>	COMMITTEE NAME	COMMITTEE ADDRESS	COMMITTEE CAMPAIGN TREASURER NAME	COMMITTEE CAMPAIGN TREASURER ADDRESS
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COMMITTEE ADDRESS									
COMMITTEE CAMPAIGN TREASURER NAME									
COMMITTEE CAMPAIGN TREASURER ADDRESS									

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

15 C/OH NAME

John W Price

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)

\$.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 32,760.00

**EXPENDITURE
TOTALS**

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$.00

4. TOTAL POLITICAL EXPENDITURES

\$ 63,357.35

**CONTRIBUTION
BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 177,931.00

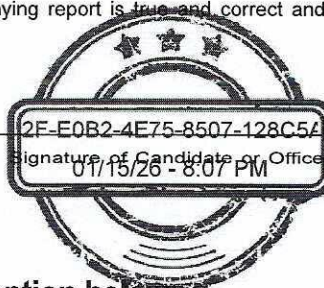
**OUTSTANDING
LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$.00

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.



Please complete either option below.

(1) Affidavit

NOTARY STAMP / SEAL

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

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

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

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

Signature of Candidate/Officeholder (Declarant)

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

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$32,760.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$0.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$0.00
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$0.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$63,357.35
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$0.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$0.00
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$0.00
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$0.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$0.00
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$0.00
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$0.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruel Hamilton 6 Contributor address; City; State; Zip Code 325 N Paul, Ste 3350 Dallas TX 75218	7 Amount of contribution (\$) \$15,000.00
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Self
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elaine Collins Contributor address; City; State; Zip Code 1721 Carl Sr Fort Worth TX 76103	Amount of contribution (\$) \$160.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeff Tillotson Contributor address; City; State; Zip Code 1201 Main Street Suite1300 Dallas TX 75202	Amount of contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisa Blue Contributor address; City; State; Zip Code 4047 Cochran Dallas TX 75209	Amount of contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Loren Collins 6 Contributor address; City; State; Zip Code W. Dallas TX 75208	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Dallas CO
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Cheryl Walton Contributor address; City; State; Zip Code 41 Watson Blvd Pine Bluff AR 71601	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) retired
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Chester Vaughn Contributor address; City; State; Zip Code 1115 Bristol Trl Desoto TX 75115	Amount of contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Law Offices of Anthony D. Lyons Contributor address; City; State; Zip Code 230 S R L Thornton Fwy, Ste Dallas TX 75203 300	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Anthony Lyons
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3
2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross Perot, Jr. <hr/> 6 Contributor address; City; State; Zip Code 3000 Turtle Creek Blvd Dallas TX 75219	7 Amount of contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Ross Perot Jr.
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devin Guinn <hr/> Contributor address; City; State; Zip Code 810 E Jefferson Blvd Dallas TX 75203	Amount of contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <hr/> Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <hr/> Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

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: 22	2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)	
4 Date 07/02/2025	5 Payee name MMS Company Ad Specialties LLC			
6 Amount (\$) \$6,105.00	7 Payee address; 217 North I-35E	City; Desoto	State; TX	Zip Code 75115
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) EventExpense		(b) Description Sponsorship Community MPact Eent	
	(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 07/01/2025	Candidate / Officeholder name Dallas County Coalition of Community Justice Agencies			
Amount (\$) \$1,000.00	Payee address; PO Box 227331	City; Dallas	State; TX	Zip Code 75222
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description Sponsorship 25th Annual Pretrial, Probation Luncheon	
	<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 07/01/2025	Candidate / Officeholder name Hailee Hall			
Amount (\$) \$500.00	Payee address; 6335 Elder Grove	City; Dallas	State; TX	Zip Code 75232
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AdvertisingExpense		Description Social Media	
	<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 John Price		Office sought	Office held Commissioner Distr

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 22	2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)	
4 Date 01/07/12025	5 Payee name Catayst for Change			
6 Amount (\$) \$1,000.00	7 Payee address; 1808 S Good Latimer, #102	City; Dallas	State; TX	Zip Code 75226
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense		(b) Description Sponsorship	
	(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 07/01/2025	Payee name US Postmaster			
Amount (\$) \$511.00	Payee address; 401 Tom Landry Freeway	City; Dallas	State; TX	Zip Code 75260
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense		Description Office Stamps	
	<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 John Price	Office sought	Office held Commissioner Distr	
Date 07/01/2025	Payee name Evans Engraving			
Amount (\$) \$470.00	Payee address; 208 S Tyler	City; Dallas	State; TX	Zip Code 75208
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense		Description Funeral Resolutionnn Framing	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 22	2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)	
4 Date 07/01/2025	5 Payee name Mineria Quezada			
6 Amount (\$) \$560.00	7 Payee address; 337 E Ledbetter		City; Dallas	State; TX
			Zip Code 75216	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) TransportationEquipmentAndRelatedExpense		(b) Description Tires for OURMAN	
	(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 John Price		Office sought	Office held Commissioner Distr
Date 07/01/2025	Payee name Jeneba Barrie Campaign			
Amount (\$) \$1,000.00	Payee address; P.O. BOX 358		City; Rowlett	State; TX
			Zip Code 75030	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ContributionsDonationsMadeByCandidateCo mmittee		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	Candidate / Officeholder name Jeneba Barrie		Office sought 282nd Judicial ./ District	Office held
Date 07/01/2025	Payee name John Ames Tax Assessor Collection			
Amount (\$) \$118.25	Payee address; 500 Elm Street Dallas		City; Dallas	State; TX
			Zip Code 75202	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) TransportationEquipmentAndRelatedExpense		Description R MAN Tags	
	<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 John Price		Office sought	Office held Commissioner Distr

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 22	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)		
4 Date 07/01/2025	5 Payee name Judge Lela Mays Campaign			
6 Amount (\$) \$1,000.00	7 Payee address; PO Box 1849	City; Dallas	State; TX	Zip Code 75376
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ContributionsDonationsMadeByCandidateCo mmittee		(b) 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	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Lela Mays	Office sought 283rd Criminal District C	Office held 283rd Criminal Dist	
Date 07/01/2025	Payee name MMS Company Ad Specialties LLC			
Amount (\$) \$3,431.00	Payee address; 217 N I35E	City; Desoto	State; TX	Zip Code 75115
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) PollingExpense		Description Field operations for Lorie Blair	
	<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 Lorie Blair	Office sought City Council District 3	Office held City Council District	
Date 07/10/2025	Payee name Felecia Pitre Campaign			
Amount (\$) \$1,000.00	Payee address; PO Box 710421	City; Dallas	State; TX	Zip Code 75371
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ContributionsDonationsMadeByCandidateCo mmittee		Description Campaign Contribution	
	<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 Felicia Pitre	Office sought District Clerk	Office held District Clerk	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 22	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)		
4 Date 07/07/2025	5 Payee name MMS Company Ad Specialties LLC			
6 Amount (\$) \$750.00	7 Payee address; 217 N I-35E	City; Desoto	State; TX	Zip Code 75115
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense		(b) Description Building Lease - Campaign Office	
	<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 John Price	Office sought	Office held Commissioner Distr	
Date 07/07/2025	Payee name Hailee Hall			
Amount (\$) \$500.00	Payee address; 6335 Elder Grove	City; Dallas	State; TX	Zip Code 75232
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AdvertisingExpense		Description Social Media	
	<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 John Price	Office sought	Office held Commissioner Distr	
Date 07/09/2025	Payee name Darryl Ayers, Jr.			
Amount (\$) \$200.00	Payee address; 206 Cool Meadow	City; Red Oak	State; TX	Zip Code 75154
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) EventExpense		Description Photography	
	<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 John Price	Office sought	Office held Commissioner Distr	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 22	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)		
4 Date 07/08/2025	5 Payee name Mineria Quezada			
6 Amount (\$) \$400.00	7 Payee address; 337 E Ledbetter	City; Dallas	State; TX	Zip Code 75216
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) TransportationEquipmentAndRelatedExpense		(b) Description RMAN Shocks (4)	
	<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 John Price	Office sought	Office held Commissioner Distr	
Date 07/18/2025	Payee name African American Museum			
Amount (\$) \$680.00	Payee address; 3536 Grand Ave	City; Dallas	State; TX	Zip Code 75210
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AdvertisingExpense		Description Sponsorship and Ads	
	<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 John Price	Office sought	Office held Commissioner Distr	
Date 07/17/2025	Payee name MMS Company			
Amount (\$) \$4,725.00	Payee address; 217 North I-35E	City; Desoto	State; TX	Zip Code 75115
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) EventExpense		Description Reimbursements for Ad Specialty Products for Event	
	<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 John Price	Office sought	Office held Commissioner Distr	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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: 22	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 07/17/2025	5 Payee name MMS Company	
6 Amount (\$) \$1,344.00	7 Payee address; 217 North I-35E	City; State; Zip Code Desoto TX 75115
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) AccountingBanking	(b) Description Promotional Products for Community Clinic
	(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 07/18/2025	Payee name Classic Lube and Oil	
Amount (\$) \$97.20	Payee address; 152 E Davis	City; State; Zip Code Dallas TX 75203
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) TransportationEquipmentAndRelatedExpense	Description RMAN2 Oil Change
	<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 08/01/2025	Payee name Hailee Hall	
Amount (\$) \$500.00	Payee address; 6335 Elder Grove	City; State; Zip Code Dallas TX 75232
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description Social Media
	<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 08/01/2025	Payee name Hailee Hall	
Amount (\$) \$500.00	Payee address; 6335 Elder Grove	City; State; Zip Code Dallas TX 75232
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description Social Media
	<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 08/01/2025	Payee name Hailee Hall	
Amount (\$) \$500.00	Payee address; 6335 Elder Grove	City; State; Zip Code Dallas TX 75232
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description Social Media
	<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 08/01/2025	Payee name Hailee Hall	
Amount (\$) \$500.00	Payee address; 6335 Elder Grove	City; State; Zip Code Dallas TX 75232
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description Social Media
	<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		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 22	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 08/01/2026	5 Payee name Dallas Examiner	
6 Amount (\$) \$810.00	7 Payee address; S Malcom X Blvd	City; State; Zip Code Dallas TX 75215
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) AdvertisingExpense	(b) Description Advertising in paper
	(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 John Price	Office sought Office held Commissioner Distr

Date 08/01/2025	Payee name Evans Engraving		
Amount (\$) \$329.00	Payee address; 208 S Tyler	City; Dallas	State; Zip Code TX 75208
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	Description Framing of Resolutions	
	<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 08/04/2025	Payee name MMS Company		
Amount (\$) \$750.00	Payee address; 217 North I-35E	City; Desoto	State; Zip Code TX 75115
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) PollingExpense	Description Building Lease - Campaign Office	
	<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 John Price	Office sought	Office held Commissioner Distr

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 22	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)		
4 Date 08/04/2025	5 Payee name Tifanee Baker Campaign			
6 Amount (\$) \$1,000.00	7 Payee address; 3300 Oak Lawn St, #100	City; Dallas	State; TX	Zip Code 75219
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ContributionsDonationsMadeByCandidateCo mmittee		(b) Description Campaign Contribution	
	(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 Tifanee Baker	Office sought County Criminal Court N	Office held	
Date 08/01/2025	Payee name Tracey Gulley Campaign			
Amount (\$) \$1,000.00	Payee address; 208 Satin	City; Dallas	State; TX	Zip Code 75227
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) CreditCardPayment		Description contribution	
	<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 Tracey Gulley	Office sought Constable Pct 1	Office held Constable Pct 1	
Date 08/01/2025	Payee name Thomas G Jones Campaign			
Amount (\$) \$3,000.00	Payee address; 1527 Bilco	City; Dallas	State; TX	Zip Code 75241
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ContributionsDonationsMadeByCandidateCo mmittee		Description Contribution	
	<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 Thoma Jones	Office sought Justice of Peace Pct 1	Office held Justice of Peace Pc	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 22	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 08/06/2025	5 Payee name Mineria Quezada	
6 Amount (\$) \$800.00	7 Payee address; 337 E Ledbetter	City; State; Zip Code Dallas TX 75216
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) TransportationEquipmentAndRelatedExpense	
	(b) Description RMAN @ Leak - Sway Bar	
	(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 John Price	Office sought Office held Commissioner Distr
Date 08/05/2025	Payee name Bishop Cory Bush	
Amount (\$) \$500.00	Payee address; 1775 Keller Parkway	City; State; Zip Code Keller TX 76248
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	
	Description 50 Years in Ministry Celebration	
	<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 08/01/2025	Payee name Evans Engraving	
Amount (\$) \$373.10	Payee address; 208 S Tyler	City; State; Zip Code Dallas TX 75298
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	
	Description Framing of Resolutions	
	<input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 22		2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)	
4 Date 09/11/2025		5 Payee name Paypal			
6 Amount (\$) \$483.97		7 Payee address; 2211 North First Street		City; San Jose	State; CA
				Zip Code 95131	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Paypal Fees		
	(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 John Price		Office sought	Office held Commissioner Distr
Date 09/01/2025		Payee name Sonia Brown Campaign			
Amount (\$) \$1,000.00		Payee address; 1230 Greerbriar		City; Desoto	State; TX
				Zip Code 75115	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ContributionsDonationsMadeByCandidateCo mmittee		Description Campaign Contibution		
	<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 Sonia Brown		Office sought Mayor Glenn Heights	Office held Mayor Glenn Heigh
Date 09/04/2025		Payee name MMS Company Ad Specialties			
Amount (\$) \$725.00		Payee address; 217 N I-35E		City; Desoto	State; TX
				Zip Code 75115	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense		Description Building Lease- Campaign Office		
	<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 John Price		Office sought	Office held Commissioner Distr

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 22	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)		
4 Date 09/04/2025	5 Payee name Hailee Hall			
6 Amount (\$) \$500.00	7 Payee address; 6335 Elder Grove	City; Dallas	State; TX	Zip Code 75232
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) AdvertisingExpense		(b) Description Social Media	
	(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 John Price		Office sought	Office held Commissioner Distr
Date 09/05/2025	Payee name Evans Engraving			
Amount (\$) \$517.00	Payee address; 208 S Tyler	City; Dallas	State; TX	Zip Code 75208
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense		Description Framing Resolutions	
	<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 09/23/2025	Payee name MSCAS Advertising Specialty			
Amount (\$) \$875.41	Payee address; 217 North I-35E	City; Desoto	State; TX	Zip Code 75115
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense		Description Tshirts for Workout Group	
	<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 John Price		Office sought	Office held Commissioner Distr

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 22		2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)	
4 Date 09/13/2025		5 Payee name Oasis			
6 Amount (\$) \$500.00		7 Payee address; 4141 N Central, Ste 900		City; Dallas	State; TX
				Zip Code 75219	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) EventExpense		(b) Description Sponsorship		
	(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 09/25/2025		Payee name ALW Entertainment			
Amount (\$) \$1,135.00		Payee address; 320 S R L Thornton		City; Dallas	State; TX
				Zip Code 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense		Description Constituents Gifts for College		
	<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 09/20/2025		Payee name Paypal			
Amount (\$) \$87.53		Payee address; 2211 North First Street		City; San Jose	State; CA
				Zip Code 95131	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description Paypal banking fees		
	<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 John Price		Office sought	Office held Commissioner Distr
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 22	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)	
4 Date 10/29/2025	5 Payee name Paypal		
6 Amount (\$) \$100.04	7 Payee address; 2211 North First Street	City; San Jose	State; CA Zip Code 95131
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Paypal bank fees
	(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: John Price Office sought: Office held: Commissioner Distr			
Date 10/24/2025	Payee name iPromoteU		
Amount (\$) \$3,929.48	Payee address; Dept 2419 PO Box 122419	City; Dallas	State; TX Zip Code 75312
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AdvertisingExpense		Description Charity Support to Community Event
	<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 10/01/2025	Payee name Hailee Hall		
Amount (\$) \$500.00	Payee address; 6335 Elder Grove	City; Dallas	State; TX Zip Code 75232
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AdvertisingExpense		Description Social Media
	<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: John Price Office sought: Office held: Commissioner Distr			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 22	2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)	
4 Date 09/16/2024	5 Payee name CFW Ventures LLC			
6 Amount (\$) \$3,550.00	7 Payee address; 1615 Seebreeze		City; Grand Prairie	State; TX
			Zip Code 75150	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) AdvertisingExpense		(b) Description Lil John Educational Series	
	<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 John Price		Office sought		Office held Commissioner Distr
Date 09/30/2025	Payee name MMS Company			
Amount (\$) \$725.00	Payee address; 217 North I-35E		City; Desoto	State; TX
			Zip Code 75115	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense		Description Building Lease -Campaign office	
	<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 John Price		Office sought		Office held Commissioner Distr
Date 10/12/0025	Payee name Darryl Ayers, Jr.			
Amount (\$) \$500.00	Payee address; 206 Cool Meadow		City; Red Oak	State; TX
			Zip Code 75154	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AdvertisingExpense		Description Photography	
	<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 John Price		Office sought		Office held Commissioner Distr

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 22	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)		
4 Date 10/07/2025	5 Payee name Toni Rose Campaign			
6 Amount (\$) \$1,000.00	7 Payee address; P.O. Box 41867	City; Dallas	State; TX	Zip Code 75241
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ContributionsDonationsMadeByCandidateCo mmittee		(b) Description Campaign Contribution	
	(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 Toni Rose	Office sought State Rep	Office held State Rep	
Date 10/20/2025	Payee name Evans Engraving			
Amount (\$) \$540.00	Payee address; 208 S Tyler	City; Dallas	State; TX	Zip Code 75208
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense		Description Framing of Resolutions	
	<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 10/09/2025	Payee name Sara Martiniz Campaign			
Amount (\$) \$500.00	Payee address; P.O. Box 570212	City; Dallas	State; TX	Zip Code 75241
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ContributionsDonationsMadeByCandidateCo mmittee		Description Campaign Contribution	
	<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 Sara Martinez	Office sought Justice of Peace 5-1	Office held Justice of Peace 5-	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 22	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 10/12/2025	5 Payee name Shequitta Kelly Campaign	
6 Amount (\$) \$1,000.00	7 Payee address; PO Box 1835	City; State; Zip Code Cedar Hill TX 75106
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ContributionsDonationsMadeByCandidateCo mmittee	(b) Description Campaign Contribution
	(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 Shequitta Kelly	Office sought County Criminal Court 1
		Office held County Criminal Co
Date 10/17/2025	Payee name Paula Beggars	
Amount (\$) \$1,200.00	Payee address; PO Box 224725	City; State; Zip Code Dallas TX 75222
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) FoodBeverageExpense	Description Cater Unveiling of Craig Watkins Bust At Frank Crowley
	<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 10/24/2025	Payee name MMS Company Ad Specialties. LLC	
Amount (\$) \$825.00	Payee address; 217 N I-35E	City; State; Zip Code Desoto TX 75115
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Promotional products for event
	<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 John Price	Office sought
		Office held Commissioner Distr

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 22	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 10/22/2025	5 Payee name Tea Cake Kids	
6 Amount (\$) \$320.42	7 Payee address; PO Box 137	City; State; Zip Code Hutchins TX 75141
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) LegalServices	(b) Description Constituents Newborn Gifts
	(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 11/01/2025	Payee name PayPal	
Amount (\$) \$24.14	Payee address; 2211 North First Street	City; State; Zip Code San Jose TX 95131
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Paypal bank fees
	<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 John Price	Office sought Office held Commissioner Distr
Date 11/06/2025	Payee name Florida A&M University	
Amount (\$) \$1,000.00	Payee address; 320 S R L Thornton	City; State; Zip Code Dallas TX 75208
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense	Description Donation to University
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 22	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)		
4 Date 10/07/2025	5 Payee name Aaron White			
6 Amount (\$) \$600.00	7 Payee address; 500 Records	City; Dallas	State; TX	Zip Code 75202
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense		(b) Description Gift to employee due to house fire	
	(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 11/03/2025	Payee name Evans Engraving			
Amount (\$) \$399.50	Payee address; 208 S Tyler	City; Dallas	State; TX	Zip Code 75203
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) GiftAwardsMemorialsExpense		Description Framing of Resolutions	
	<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 11/03/2025	Payee name US Postmaster			
Amount (\$) \$420.00	Payee address; 401 Tom Landry Freeway	City; Dallas	State; TX	Zip Code 75360
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense		Description Office Stamps	
	<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 John Price		Office sought	Office held Commissioner Distr

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 22	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 11/04/2025	5 Payee name MMS Company Ad Specialties LLC	
6 Amount (\$) \$750.00	7 Payee address; 217 N I-35E	City; State; Zip Code Desoto TX 75115
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense	(b) Description Building Lease Campaign Office
	(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: John Price Office sought: _____ Office held: Commissioner Dist		
Date 11/06/2025	Payee name Hailee Hall	
Amount (\$) \$500.00	Payee address; 6335 Elder Grove	City; State; Zip Code Dallas TX 75232
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description Social Media
	<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: John Price Office sought: _____ Office held: Commissioner Dist		
Date 11/05/2025	Payee name Classic Lube and Oil	
Amount (\$) \$113.04	Payee address; 152 W Davis	City; State; Zip Code Dallas TX 75203
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) TransportationEquipmentAndRelatedExpense	Description OUR MAN oil change
	<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: John Price Office sought: _____ Office held: Commissioner Dist		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 22	2 FILER NAME John W Price		3 Filer ID (Ethics Commission Filers)	
4 Date 11/06/2025	5 Payee name Paula Biggers			
6 Amount (\$) \$1,250.00	7 Payee address; PO Box 224725	City; Dallas	State; TX	Zip Code 75222
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) FoodBeverageExpense		(b) Description Craig Watkins Catering Service	
	(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 11/09/2025	Payee name Danielle Diaz Clark Campaign			
Amount (\$) \$1,000.00	Payee address; PO Box 1052	City; Desoto	State; TX	Zip Code 75123
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ContributionsDonationsMadeByCandidateCo mmittee		Description Campaign Contribution	
	<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 Danielle Diaz Clark		Office sought 330th Family Court	Office held 330 Family Court
Date 11/12/2025	Payee name MMS Company Ad Specialties LLC			
Amount (\$) \$825.00	Payee address; 217 N I-35E	City; Desoto	State; TX	Zip Code 75115
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AdvertisingExpense		Description Program Booklets for Luncheon	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 22	2 FILER NAME John W Price	3 Filer ID (Ethics Commission Filers)
4 Date 11/21/2025	5 Payee name Darryl Ayers, Jr.	
6 Amount (\$) \$500.00	7 Payee address; 206 Cool Meadow	City; State; Zip Code Red Oak TX 75154
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) AdvertisingExpense	(b) Description Photography
	(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 John Price	Office sought Office held Commissioner Distr
Date 11/28/2025	Payee name MMS Company	
Amount (\$) \$860.00	Payee address; 217 North I-35E	City; State; Zip Code Desoto TX 75115
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OfficeOverheadRentalExpense	Description Building Lease and paper 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 John Price	Office sought Office held Commissioner Distr
Date 11/22/2025	Payee name PayPal	
Amount (\$) \$148.27	Payee address; 2211	City; State; Zip Code San Jose CA 95131
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description paypal fees
	<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 John Price	Office sought Office held Commissioner Distr

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