

**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	2 Total pages filed: 22			
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST ADAM	MI M.			
	NICKNAME	LAST SWARTZ	SUFFIX			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 6820 LBJ Freeway, Suite 3100		ZIP CODE			
	Dallas, TX 75241		Date Hand Delivered or Date Postmarked 2026 JAN 15 PM			
			Receipt # F1501			
			Date Processed 2026 JAN 15 PM			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST JENA	MI			
	NICKNAME	LAST DAVIDSON	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 1520 N BECKLEY AVE		APT / SUITE #;	CITY; DALLAS	STATE; TX	ZIP CODE 75203
7 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION (254) 485-8988					
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)					
9 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
10 ELECTION	ELECTION DATE Month Day Year 11/03/2026		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special			
11 OFFICE	OFFICE HELD (if any) Justice of the Peace Place 1 District 3			12 OFFICE SOUGHT (if known) Justice of the Peace Place 1 District 3		

**GO TO PAGE 2**

**Title of officer administering oath**

Printed name of officer administering oath

Signature of officer administering oath

Frank J. Alvarado Notary Public  
Brett P. Alvarado Notary Public

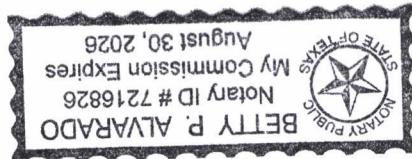
of January, 2026, to certify which, witness my hand and seal of office.  
Sworn to and subscribed before me, by the said Adam M. Schwartz, this the 15th day

AFFIX NOTARY STAMP / SEAL ABOVE

**Signature of Candidate or Officeholder**

Signature of Candida

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.



17 AFEIDAVIT

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.

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT:		FORM JC/OH	COVER SHEET PG 2	SUPPORT & TOTALS	2 of 22
				Swartz, Adam M.	13 C / OH NAME
				14 File ID	14 File ID

**SUBTOTALS - JC/OH**

20 SCHEDULE SUBTOTALS		NAME OF SCHEDULE
		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A(j)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 4,815.00	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS
2. <input type="checkbox"/>	\$	SCHEDULE B(j): PLEDGED CONTRIBUTIONS (JUDICIAL)
3. <input type="checkbox"/>	\$	SCHEDULE E(j): LOANS (JUDICIAL)
4. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 5,700.00	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS
5. <input checked="" type="checkbox"/>	\$ 8,039.04	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS
6. <input type="checkbox"/>	\$	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD
7. <input type="checkbox"/>	\$	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS
8. <input type="checkbox"/>	\$	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH
9. <input type="checkbox"/>	\$	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS
10. <input type="checkbox"/>	\$	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 1/10 Rpt: 4/22												
<b>2</b> FILER NAME Swartz, Adam M.		<b>3</b> Filer ID												
<b>4</b> Date 10/21/2025	<b>5</b> Full name of contributor BURTON, JOHN ..... <b>6</b> Contributor address; City; State; Zip Code 2247 Tealford Dr  Dallas, TX 75228	<b>7</b> Amount of Contribution (\$) \$25.00												
<b>8</b> Contributor's Principal Occupation MSR-1		<b>9</b> Contributor's Job Title												
<b>10</b> Contributor's employer/law firm Texans Credit Union		<b>11</b> Law firm of contributor's spouse (if any)												
<b>12</b> If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 10/22/2025</td> <td>Full name of contributor Boss, Alanna ..... Contributor address; City; State; Zip Code 2858 W. 12th St.  Dallas, TX 75211</td> <td>Amount of Contribution (\$) \$50.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation Contracts Manager</td> <td>Contributor's Job Title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm Jacobs Solutions</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 10/22/2025	Full name of contributor Boss, Alanna ..... Contributor address; City; State; Zip Code 2858 W. 12th St.  Dallas, TX 75211	Amount of Contribution (\$) \$50.00	Contributor's Principal Occupation Contracts Manager		Contributor's Job Title	Contributor's employer/law firm Jacobs Solutions		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 10/22/2025	Full name of contributor Boss, Alanna ..... Contributor address; City; State; Zip Code 2858 W. 12th St.  Dallas, TX 75211	Amount of Contribution (\$) \$50.00												
Contributor's Principal Occupation Contracts Manager		Contributor's Job Title												
Contributor's employer/law firm Jacobs Solutions		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 09/30/2025</td> <td>Full name of contributor Cocklin, Ashley ..... Contributor address; City; State; Zip Code 3230 Maple Avenue Apt 469  Dallas, TX 75201</td> <td>Amount of Contribution (\$) \$25.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation Lawyer</td> <td>Contributor's Job Title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm O'Neil Wysocki</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 09/30/2025	Full name of contributor Cocklin, Ashley ..... Contributor address; City; State; Zip Code 3230 Maple Avenue Apt 469  Dallas, TX 75201	Amount of Contribution (\$) \$25.00	Contributor's Principal Occupation Lawyer		Contributor's Job Title	Contributor's employer/law firm O'Neil Wysocki		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 09/30/2025	Full name of contributor Cocklin, Ashley ..... Contributor address; City; State; Zip Code 3230 Maple Avenue Apt 469  Dallas, TX 75201	Amount of Contribution (\$) \$25.00												
Contributor's Principal Occupation Lawyer		Contributor's Job Title												
Contributor's employer/law firm O'Neil Wysocki		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 2/10 Rpt: 5/22
<b>2</b> FILER NAME Swartz, Adam M.		<b>3</b> Filer ID
<b>4</b> Date 10/17/2025	<b>5</b> Full name of contributor Coker, Kaitlyn ..... <b>6</b> Contributor address; City; State; Zip Code 1714 Brookhollow Drive  Carrollton, TX 75010	<b>7</b> Amount of Contribution (\$) \$50.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title
<b>10</b> Contributor's employer/law firm Farmer & Coker PLLC		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/25/2025	Full name of contributor Daniel, Gracen ..... Contributor address; City; State; Zip Code 5245 Crestfield PI  Dallas, TX 75206	Amount of Contribution (\$) \$150.00
Contributor's Principal Occupation Lawyer		Contributor's Job Title
Contributor's employer/law firm Crawford Wishnew and lang		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/24/2025	Full name of contributor Dart, Christopher ..... Contributor address; City; State; Zip Code 4147 Bretton Bay Lane  Dallas, TX 75287	Amount of Contribution (\$) \$80.00
Contributor's Principal Occupation Attorney		Contributor's Job Title
Contributor's employer/law firm DEAC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 3/10 Rpt: 6/22												
<b>2</b> FILER NAME Swartz, Adam M.		<b>3</b> Filer ID												
<b>4</b> Date 09/26/2025	<b>5</b> Full name of contributor Datta, Anjali ..... <b>6</b> Contributor address; City; State; Zip Code 5719 Tremont Street  Dallas, TX 75214	<b>7</b> Amount of Contribution (\$) \$50.00												
<b>8</b> Contributor's Principal Occupation Director		<b>9</b> Contributor's Job Title												
<b>10</b> Contributor's employer/law firm Frontier Inc		<b>11</b> Law firm of contributor's spouse (if any)												
<b>12</b> If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 09/26/2025</td> <td>Full name of contributor Datta, Partha ..... Contributor address; City; State; Zip Code 5719 Tremont St  Dallas, TX 75214</td> <td>Amount of Contribution (\$) \$50.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation Business Consultant</td> <td>Contributor's Job Title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm AT&amp;T</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 09/26/2025	Full name of contributor Datta, Partha ..... Contributor address; City; State; Zip Code 5719 Tremont St  Dallas, TX 75214	Amount of Contribution (\$) \$50.00	Contributor's Principal Occupation Business Consultant		Contributor's Job Title	Contributor's employer/law firm AT&T		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 09/26/2025	Full name of contributor Datta, Partha ..... Contributor address; City; State; Zip Code 5719 Tremont St  Dallas, TX 75214	Amount of Contribution (\$) \$50.00												
Contributor's Principal Occupation Business Consultant		Contributor's Job Title												
Contributor's employer/law firm AT&T		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 10/04/2025</td> <td>Full name of contributor Davidson, Jenafer ..... Contributor address; City; State; Zip Code 1520 N Beckley 1014  Dallas, TX 75203</td> <td>Amount of Contribution (\$) \$50.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation Attorney</td> <td>Contributor's Job Title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm DEAC</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 10/04/2025	Full name of contributor Davidson, Jenafer ..... Contributor address; City; State; Zip Code 1520 N Beckley 1014  Dallas, TX 75203	Amount of Contribution (\$) \$50.00	Contributor's Principal Occupation Attorney		Contributor's Job Title	Contributor's employer/law firm DEAC		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 10/04/2025	Full name of contributor Davidson, Jenafer ..... Contributor address; City; State; Zip Code 1520 N Beckley 1014  Dallas, TX 75203	Amount of Contribution (\$) \$50.00												
Contributor's Principal Occupation Attorney		Contributor's Job Title												
Contributor's employer/law firm DEAC		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 4/10 Rpt: 7/22																								
<b>2</b> FILER NAME Swartz, Adam M.		<b>3</b> Filer ID																								
<b>4</b> Date 10/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Davis, Emily ..... <b>6</b> Contributor address; City; State; Zip Code 5213 De Lange Ln  Houston, TX 77092	<b>7</b> Amount of Contribution (\$) \$100.00																								
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title																								
<b>10</b> Contributor's employer/law firm Mega International LLC		<b>11</b> Law firm of contributor's spouse (if any)																								
<b>12</b> If contributor is a child, law firm of parent(s) (if any)																										
 <table border="1"> <tr> <td> <b>Date</b> 12/08/2025         </td> <td> <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: Davis, Emily ..... <b>Contributor address; City; State; Zip Code</b> 5213 De Lange Ln  Houston, TX 77092         </td> <td> <b>Amount of Contribution (\$)</b> \$100.00         </td> </tr> <tr> <td colspan="2"> <b>Contributor's Principal Occupation</b> Attorney         </td> <td> <b>Contributor's Job Title</b> </td> </tr> <tr> <td colspan="2"> <b>Contributor's employer/law firm</b> Mega International LLC         </td> <td> <b>Law firm of contributor's spouse (if any)</b> </td> </tr> <tr> <td colspan="3"> <b>If contributor is a child, law firm of parent(s) (if any)</b> </td> </tr> </table> <table border="1"> <tr> <td> <b>Date</b> 11/14/2025         </td> <td> <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: Faulhaber, Shana ..... <b>Contributor address; City; State; Zip Code</b> 8929 Woodshore Dr  Dallas, TX 75243         </td> <td> <b>Amount of Contribution (\$)</b> \$50.00         </td> </tr> <tr> <td colspan="2"> <b>Contributor's Principal Occupation</b> Attorney         </td> <td> <b>Contributor's Job Title</b> </td> </tr> <tr> <td colspan="2"> <b>Contributor's employer/law firm</b> Self         </td> <td> <b>Law firm of contributor's spouse (if any)</b> </td> </tr> <tr> <td colspan="3"> <b>If contributor is a child, law firm of parent(s) (if any)</b> </td> </tr> </table> 			<b>Date</b> 12/08/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: Davis, Emily ..... <b>Contributor address; City; State; Zip Code</b> 5213 De Lange Ln  Houston, TX 77092	<b>Amount of Contribution (\$)</b> \$100.00	<b>Contributor's Principal Occupation</b> Attorney		<b>Contributor's Job Title</b>	<b>Contributor's employer/law firm</b> Mega International LLC		<b>Law firm of contributor's spouse (if any)</b>	<b>If contributor is a child, law firm of parent(s) (if any)</b>			<b>Date</b> 11/14/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: Faulhaber, Shana ..... <b>Contributor address; City; State; Zip Code</b> 8929 Woodshore Dr  Dallas, TX 75243	<b>Amount of Contribution (\$)</b> \$50.00	<b>Contributor's Principal Occupation</b> Attorney		<b>Contributor's Job Title</b>	<b>Contributor's employer/law firm</b> Self		<b>Law firm of contributor's spouse (if any)</b>	<b>If contributor is a child, law firm of parent(s) (if any)</b>		
<b>Date</b> 12/08/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: Davis, Emily ..... <b>Contributor address; City; State; Zip Code</b> 5213 De Lange Ln  Houston, TX 77092	<b>Amount of Contribution (\$)</b> \$100.00																								
<b>Contributor's Principal Occupation</b> Attorney		<b>Contributor's Job Title</b>																								
<b>Contributor's employer/law firm</b> Mega International LLC		<b>Law firm of contributor's spouse (if any)</b>																								
<b>If contributor is a child, law firm of parent(s) (if any)</b>																										
<b>Date</b> 11/14/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: Faulhaber, Shana ..... <b>Contributor address; City; State; Zip Code</b> 8929 Woodshore Dr  Dallas, TX 75243	<b>Amount of Contribution (\$)</b> \$50.00																								
<b>Contributor's Principal Occupation</b> Attorney		<b>Contributor's Job Title</b>																								
<b>Contributor's employer/law firm</b> Self		<b>Law firm of contributor's spouse (if any)</b>																								
<b>If contributor is a child, law firm of parent(s) (if any)</b>																										

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 5/10 Rpt: 8/22												
<b>2</b> FILER NAME Swartz, Adam M.		<b>3</b> Filer ID												
<b>4</b> Date 09/25/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: George, Natasha ..... <b>6</b> Contributor address; City; State; Zip Code 1222 e Arapaho Rd STE 301  Richardson, TX 75081	<b>7</b> Amount of Contribution (\$) \$2,500.00												
<b>8</b> Contributor's Principal Occupation Entrepreneur		<b>9</b> Contributor's Job Title												
<b>10</b> Contributor's employer/law firm The Phenix Group		<b>11</b> Law firm of contributor's spouse (if any)												
<b>12</b> If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 10/08/2025</td> <td>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Glover, Joshua L ..... Contributor address; City; State; Zip Code 1235 Seminole Dr  Richardson, TX 75080</td> <td>Amount of Contribution (\$) \$50.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation Restaurant Manager</td> <td>Contributor's Job Title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm Remedy</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Glover, Joshua L ..... Contributor address; City; State; Zip Code 1235 Seminole Dr  Richardson, TX 75080	Amount of Contribution (\$) \$50.00	Contributor's Principal Occupation Restaurant Manager		Contributor's Job Title	Contributor's employer/law firm Remedy		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Glover, Joshua L ..... Contributor address; City; State; Zip Code 1235 Seminole Dr  Richardson, TX 75080	Amount of Contribution (\$) \$50.00												
Contributor's Principal Occupation Restaurant Manager		Contributor's Job Title												
Contributor's employer/law firm Remedy		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 10/21/2025</td> <td>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Grinter, Alison ..... Contributor address; City; State; Zip Code 6738 Old Settlers Way  Dallas, TX 75236</td> <td>Amount of Contribution (\$) \$50.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation Attorney</td> <td>Contributor's Job Title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm Self</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Grinter, Alison ..... Contributor address; City; State; Zip Code 6738 Old Settlers Way  Dallas, TX 75236	Amount of Contribution (\$) \$50.00	Contributor's Principal Occupation Attorney		Contributor's Job Title	Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Grinter, Alison ..... Contributor address; City; State; Zip Code 6738 Old Settlers Way  Dallas, TX 75236	Amount of Contribution (\$) \$50.00												
Contributor's Principal Occupation Attorney		Contributor's Job Title												
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 6/10 Rpt: 9/22												
<b>2</b> FILER NAME Swartz, Adam M.		<b>3</b> Filer ID												
<b>4</b> Date 10/25/2025	<b>5</b> Full name of contributor Grinter, Alison ..... <b>6</b> Contributor address; City; State; Zip Code 6738 Old Settlers Way  Dallas, TX 75236	<b>7</b> Amount of Contribution (\$) \$100.00												
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title												
<b>10</b> Contributor's employer/law firm Self		<b>11</b> Law firm of contributor's spouse (if any)												
<b>12</b> If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 09/25/2025</td> <td>Full name of contributor Kutac, Gary ..... Contributor address; City; State; Zip Code 1552 San Saba Dr  Dallas, TX 75218</td> <td>Amount of Contribution (\$) \$100.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation Not Employed</td> <td>Contributor's Job Title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm Not Employed</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 09/25/2025	Full name of contributor Kutac, Gary ..... Contributor address; City; State; Zip Code 1552 San Saba Dr  Dallas, TX 75218	Amount of Contribution (\$) \$100.00	Contributor's Principal Occupation Not Employed		Contributor's Job Title	Contributor's employer/law firm Not Employed		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 09/25/2025	Full name of contributor Kutac, Gary ..... Contributor address; City; State; Zip Code 1552 San Saba Dr  Dallas, TX 75218	Amount of Contribution (\$) \$100.00												
Contributor's Principal Occupation Not Employed		Contributor's Job Title												
Contributor's employer/law firm Not Employed		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 09/27/2025</td> <td>Full name of contributor Moore, Erin ..... Contributor address; City; State; Zip Code 324 Easton Rd  Dallas, TX 75218</td> <td>Amount of Contribution (\$) \$50.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation Executive Admin</td> <td>Contributor's Job Title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm Dallas County</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 09/27/2025	Full name of contributor Moore, Erin ..... Contributor address; City; State; Zip Code 324 Easton Rd  Dallas, TX 75218	Amount of Contribution (\$) \$50.00	Contributor's Principal Occupation Executive Admin		Contributor's Job Title	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 09/27/2025	Full name of contributor Moore, Erin ..... Contributor address; City; State; Zip Code 324 Easton Rd  Dallas, TX 75218	Amount of Contribution (\$) \$50.00												
Contributor's Principal Occupation Executive Admin		Contributor's Job Title												
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)														

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 7/10 Rpt: 10/22												
<b>2</b> FILER NAME Swartz, Adam M.		<b>3</b> Filer ID												
<b>4</b> Date 10/25/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munguerra, Peter  <b>6</b> Contributor address; City; State; Zip Code 1226 Baylor Ave #108  Waco, TX 76706	<b>7</b> Amount of Contribution (\$) \$50.00												
<b>8</b> Contributor's Principal Occupation Executive Director		<b>9</b> Contributor's Job Title												
<b>10</b> Contributor's employer/law firm MCDP		<b>11</b> Law firm of contributor's spouse (if any)												
<b>12</b> If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 12/11/2025</td> <td>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathan, Daniel  Contributor address; City; State; Zip Code 6211 W Northwest Highway Suite C258  Dallas, TX 75225</td> <td>Amount of Contribution (\$) \$250.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation Attorney</td> <td>Contributor's Job Title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm Nathan Law PLLC</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathan, Daniel  Contributor address; City; State; Zip Code 6211 W Northwest Highway Suite C258  Dallas, TX 75225	Amount of Contribution (\$) \$250.00	Contributor's Principal Occupation Attorney		Contributor's Job Title	Contributor's employer/law firm Nathan Law PLLC		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathan, Daniel  Contributor address; City; State; Zip Code 6211 W Northwest Highway Suite C258  Dallas, TX 75225	Amount of Contribution (\$) \$250.00												
Contributor's Principal Occupation Attorney		Contributor's Job Title												
Contributor's employer/law firm Nathan Law PLLC		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 09/06/2025</td> <td>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Tracey  Contributor address; City; State; Zip Code 305 Auburn Avenue  Buffalo, NY 14213</td> <td>Amount of Contribution (\$) \$25.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation legal assistant</td> <td>Contributor's Job Title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm Roger B. Simon</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 09/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Tracey  Contributor address; City; State; Zip Code 305 Auburn Avenue  Buffalo, NY 14213	Amount of Contribution (\$) \$25.00	Contributor's Principal Occupation legal assistant		Contributor's Job Title	Contributor's employer/law firm Roger B. Simon		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 09/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Tracey  Contributor address; City; State; Zip Code 305 Auburn Avenue  Buffalo, NY 14213	Amount of Contribution (\$) \$25.00												
Contributor's Principal Occupation legal assistant		Contributor's Job Title												
Contributor's employer/law firm Roger B. Simon		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 8/10 Rpt: 11/22												
<b>2</b> FILER NAME Swartz, Adam M.		<b>3</b> Filer ID												
<b>4</b> Date 10/24/2025	<b>5</b> Full name of contributor Parry, Megam ..... <b>6</b> Contributor address; City; State; Zip Code 2213 Argylr Cir  Plano, TX 75023	<b>7</b> Amount of Contribution (\$) \$50.00												
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title												
<b>10</b> Contributor's employer/law firm Dallas Eviction Advocacy Center		<b>11</b> Law firm of contributor's spouse (if any)												
<b>12</b> If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 10/08/2025</td> <td>Full name of contributor Payne, Scott ..... Contributor address; City; State; Zip Code 1819 Harvard Dr.  Richardson, TX 75081</td> <td>Amount of Contribution (\$) \$250.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation Gaffer</td> <td>Contributor's Job Title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm SiegeWorks LLC</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 10/08/2025	Full name of contributor Payne, Scott ..... Contributor address; City; State; Zip Code 1819 Harvard Dr.  Richardson, TX 75081	Amount of Contribution (\$) \$250.00	Contributor's Principal Occupation Gaffer		Contributor's Job Title	Contributor's employer/law firm SiegeWorks LLC		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 10/08/2025	Full name of contributor Payne, Scott ..... Contributor address; City; State; Zip Code 1819 Harvard Dr.  Richardson, TX 75081	Amount of Contribution (\$) \$250.00												
Contributor's Principal Occupation Gaffer		Contributor's Job Title												
Contributor's employer/law firm SiegeWorks LLC		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 10/25/2025</td> <td>Full name of contributor Peeler, Spencer ..... Contributor address; City; State; Zip Code 11911 Greenville Ave 1207  Dallas, TX 75243</td> <td>Amount of Contribution (\$) \$25.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation Attorney</td> <td>Contributor's Job Title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm LANWT</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 10/25/2025	Full name of contributor Peeler, Spencer ..... Contributor address; City; State; Zip Code 11911 Greenville Ave 1207  Dallas, TX 75243	Amount of Contribution (\$) \$25.00	Contributor's Principal Occupation Attorney		Contributor's Job Title	Contributor's employer/law firm LANWT		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 10/25/2025	Full name of contributor Peeler, Spencer ..... Contributor address; City; State; Zip Code 11911 Greenville Ave 1207  Dallas, TX 75243	Amount of Contribution (\$) \$25.00												
Contributor's Principal Occupation Attorney		Contributor's Job Title												
Contributor's employer/law firm LANWT		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 9/10 Rpt: 12/22												
<b>2</b> FILER NAME Schwartz, Adam M.		<b>3</b> Filer ID												
<b>4</b> Date 09/22/2025	<b>5</b> Full name of contributor Pincus, Scott <b>6</b> Contributor address; City; State; Zip Code 6505 Brantford Ct  Plano, TX 75093	<b>7</b> Amount of Contribution (\$) \$360.00												
<b>8</b> Contributor's Principal Occupation Dentist		<b>9</b> Contributor's Job Title												
<b>10</b> Contributor's employer/law firm Parkhaven Dental		<b>11</b> Law firm of contributor's spouse (if any)												
<b>12</b> If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 09/02/2025</td> <td>Full name of contributor Schwarz, Andrew Contributor address; City; State; Zip Code 4037 New Orleans Dr  Odessa, TX 79762</td> <td>Amount of Contribution (\$) \$100.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation Vet</td> <td>Contributor's Job Title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm Angel vet clinic</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 09/02/2025	Full name of contributor Schwarz, Andrew Contributor address; City; State; Zip Code 4037 New Orleans Dr  Odessa, TX 79762	Amount of Contribution (\$) \$100.00	Contributor's Principal Occupation Vet		Contributor's Job Title	Contributor's employer/law firm Angel vet clinic		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 09/02/2025	Full name of contributor Schwarz, Andrew Contributor address; City; State; Zip Code 4037 New Orleans Dr  Odessa, TX 79762	Amount of Contribution (\$) \$100.00												
Contributor's Principal Occupation Vet		Contributor's Job Title												
Contributor's employer/law firm Angel vet clinic		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 10/22/2025</td> <td>Full name of contributor Thompson, Kathleen Contributor address; City; State; Zip Code PO Box 132162  DALLAS, TX 75313</td> <td>Amount of Contribution (\$) \$25.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation writer</td> <td>Contributor's Job Title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm self</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 10/22/2025	Full name of contributor Thompson, Kathleen Contributor address; City; State; Zip Code PO Box 132162  DALLAS, TX 75313	Amount of Contribution (\$) \$25.00	Contributor's Principal Occupation writer		Contributor's Job Title	Contributor's employer/law firm self		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 10/22/2025	Full name of contributor Thompson, Kathleen Contributor address; City; State; Zip Code PO Box 132162  DALLAS, TX 75313	Amount of Contribution (\$) \$25.00												
Contributor's Principal Occupation writer		Contributor's Job Title												
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 10/10 Rpt: 13/22
<b>2</b> FILER NAME Swartz, Adam M.		<b>3</b> Filer ID
<b>4</b> Date 11/14/2025	<b>5</b> Full name of contributor Wright, Tycom ..... <b>6</b> Contributor address; City; State; Zip Code 340 Shady Lane Dr  Fort Worth, TX 76112	<b>7</b> Amount of Contribution (\$) \$50.00
<b>8</b> Contributor's Principal Occupation Mediator		<b>9</b> Contributor's Job Title
<b>10</b> Contributor's employer/law firm Wisdom Mediation and Consulting		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		

## LOANS (JUDICIAL)

## SCHEDULE E(J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): Sch: 1/3 Rpt: 14/22
2 FILER NAME Swartz, Adam M.		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 08/04/2025	7 Name of lender SWARTZ, ADAM M.	8 out-of-state PAC (ID#: \$2,000.00)
6 Is lender a financial institution? No	9 Loan Amount (\$) \$2,000.00	
	10 Interest Rate	
	11 Maturity Date	
12 Lender's Principal Occupation		13 Lender's Job Title
14 Lender's Employer/Law Firm		15 Law Firm of lender's spouse (if any)
16 If lender is child, law firm of parent(s) (if any)		
17 Description of Collateral <input checked="" type="checkbox"/> None		18 Check if personal funds were deposited into political account <input checked="" type="checkbox"/> (See Instructions)
19 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	20 Name of guarantor ..... 21 Guarantor address; City; State; Zip Code	22 Amount Guaranteed (\$)
23 Guarantor's Principal Occupation		24 Guarantor's Job Title
25 Guarantor's Employer/Law Firm		26 Law Firm of guarantor's spouse (if any)
27 If guarantor is child, law firm of parent(s) (if any)		

## LOANS (JUDICIAL)

## SCHEDULE E(J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): Sch: 2/3 Rpt: 15/22		
2 FILER NAME Swartz, Adam M.		3 Filer ID		
4 TOTAL OF UNITEMIZED LOANS		\$		
5 Date of loan 09/08/2025		7 Name of lender SWARTZ, ADAM M.	8 out-of-state PAC (ID#: _____)	9 Loan Amount (\$) \$3,500.00
6 Is lender a financial institution? No		8 Lender address; City; State; Zip Code TX		10 Interest Rate
				11 Maturity Date
12 Lender's Principal Occupation		13 Lender's Job Title		
14 Lender's Employer/Law Firm		15 Law Firm of lender's spouse (if any)		
16 If lender is child, law firm of parent(s) (if any)				
17 Description of Collateral <input checked="" type="checkbox"/> None		18 Check if personal funds were deposited into political account <input checked="" type="checkbox"/> (See Instructions)		
19 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable		20 Name of guarantor _____		22 Amount Guaranteed (\$)
		21 Guarantor address; City; State; Zip Code _____		
23 Guarantor's Principal Occupation		24 Guarantor's Job Title		
25 Guarantor's Employer/Law Firm		26 Law Firm of guarantor's spouse (if any)		
27 If guarantor is child, law firm of parent(s) (if any)				

## LOANS (JUDICIAL)

**SCHEDULE E(J)**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E(J): Sch: 3/3 Rpt: 16/22
<b>2</b> FILER NAME Swartz, Adam M.	<b>3</b> Filer ID	
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$</b>
<b>5</b> Date of loan 12/08/2025	<b>7</b> Name of lender SWARTZ, ADAM M.	<b>8</b> <input type="checkbox"/> out-of-state PAC (ID#: <b>9</b> Loan Amount (\$) \$200.00
<b>6</b> Is lender a financial institution? No	<b>10</b> Interest Rate	<b>11</b> Maturity Date
<b>12</b> Lender's Principal Occupation		<b>13</b> Lender's Job Title
<b>14</b> Lender's Employer/Law Firm		<b>15</b> Law Firm of lender's spouse (if any)
<b>16</b> If lender is child, law firm of parent(s) (if any)		
<b>17</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>18</b> Check if personal funds were deposited into political account <input checked="" type="checkbox"/> (See Instructions)
<b>19</b> GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	<b>20</b> Name of guarantor <b>21</b> Guarantor address; City; State; Zip Code	<b>22</b> Amount Guaranteed (\$)
<b>23</b> Guarantor's Principal Occupation		<b>24</b> Guarantor's Job Title
<b>25</b> Guarantor's Employer/Law Firm		<b>26</b> Law Firm of guarantor's spouse (if any)
<b>27</b> If guarantor is child, law firm of parent(s) (if any)		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/6 Rpt: 17/22	2 FILER NAME Swartz, Adam M.	3 Filer ID	
4 Date 08/11/2025	5 Payee name AMAZON.COM		
6 Amount (\$) \$135.25	7 Payee address; City; State; Zip Code 410 TERRY AVENUE NORTH  SEATTLE, WA 98109		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EVENT SUPPLIES	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/05/2025	Payee name AMAZON.COM		
Amount (\$) \$69.27	Payee address; City; State; Zip Code 410 TERRY AVENUE NORTH  SEATTLE, WA 98109		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EVENT SUPPLIES	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/05/2025	Payee name AMAZON.COM		
Amount (\$) \$6.48	Payee address; City; State; Zip Code 410 TERRY AVENUE NORTH  SEATTLE, WA 98109		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EVENT SUPPLIES	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/6 Rpt: 18/22	2 FILER NAME Swartz, Adam M.	3 Filer ID
4 Date 12/08/2025	5 Payee name CHICKEN EXPRESS	
6 Amount (\$) \$25.31	7 Payee address; City; State; Zip Code 10930 N CENTRAL EXPY  DALLAS, TX 75231	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN LUNCH
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/11/2025	Payee name DALLAS COUNTY DEMOCRATIC PARTY	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 1414 N. WASHINGTON AVE  DALLAS, TX 75204	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EVENT SPONSORSHIP
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/08/2025	Payee name DALLAS COUNTY DEMOCRATIC PARTY	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1414 N. WASHINGTON AVE  DALLAS, TX 75204	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FILING FEE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Sch: 3/6 Rpt: 19/22 Swartz, Adam M.	3 Filer ID
4 Date 09/23/2025	5 Payee name EDWARDS & PATTERSON SIGNS	
6 Amount (\$) \$3,474.83	7 Payee address; City; State; Zip Code 203 S BELT LINE RD  IRVING, TX 75060	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN SHIRTS
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/24/2025	Payee name EDWARDS & PATTERSON SIGNS	
Amount (\$) \$1,980.29	Payee address; City; State; Zip Code 203 S BELT LINE RD  IRVING, TX 75060	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN SIGNS
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name FEDEX	
Amount (\$) \$27.05	Payee address; City; State; Zip Code 5500 GREENVILLE AVE #1203 DALLAS, TX 75206	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAMPS
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/6 Rpt: 20/22	2 FILER NAME Swartz, Adam M.	3 Filer ID	
4 Date 08/25/2025	5 Payee name GODADDY		
6 Amount (\$) \$61.02	7 Payee address; City; 100 S. MILL AVE SUITE 1600 TEMPE, AZ 85281	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/25/2025	Payee name GODADDY		
Amount (\$) \$25.46	Payee address; City; 100 S. MILL AVE SUITE 1600 TEMPE, AZ 85281	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/25/2025	Payee name GODADDY		
Amount (\$) \$127.79	Payee address; City; 100 S. MILL AVE SUITE 1600 TEMPE, AZ 85281	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/6 Rpt: 21/22	2 FILER NAME Swartz, Adam M.	3 Filer ID	
4 Date 12/16/2025	5 Payee name JAKES BURGERS		
6 Amount (\$) \$64.04	7 Payee address; City; State; Zip Code 4925 GREENVILLE AVE SUITE 150 DALLAS, TX 75206		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN DINNER	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/08/2025	Payee name SHELL SERVICE STATION		
Amount (\$) \$30.00	Payee address; City; State; Zip Code 10405 N CENTRAL EXPY  DALLAS, TX 75231		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GAS FOR CAMPAIGN TRAVEL	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/02/2025	Payee name TARGET		
Amount (\$) \$10.79	Payee address; City; State; Zip Code 6464 E NW HWY SUITE 212 DALLAS, TX 75214		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EVENT SUPPLIES	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/6 Rpt: 22/22	2 FILER NAME Swartz, Adam M.	3 Filer ID	
4 Date 12/18/2025	5 Payee name TAZIKI'S MEDITERRANEAN CAF		
6 Amount (\$) \$74.46	7 Payee address; City; State; Zip Code 5500 GREENVILLE AVE UNIT #507 DALLAS, TX 75206		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN DINNER	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/14/2025	Payee name TEXAS DEMOCRATIC PARTY		
Amount (\$) \$727.00	Payee address; City; State; Zip Code PO BOX 15707  AUSTIN, TX 78761		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense VAN ACCESS	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held