

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

| | | | | | | | | | | | |
|--|---|---|--|-------------------------------------|---|---------------------------------|--|---|--|--|--|
| The JC/OH Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00081707 | 2 Total pages filed: 31 | | | | | | | | |
| 3 CANDIDATE / OFFICEHOLDER NAME | <table style="width: 100%;"> <tr> <td style="width: 25%;">MS / MRS / MR Ms.</td> <td style="width: 25%;">FIRST LaDeitra D.</td> <td style="width: 50%;">MI</td> </tr> </table> <hr/> <table style="width: 100%;"> <tr> <td style="width: 25%;">NICKNAME</td> <td style="width: 25%;">LAST Adkins</td> <td style="width: 50%;">SUFFIX</td> </tr> </table> | | MS / MRS / MR Ms. | FIRST LaDeitra D. | MI | NICKNAME | LAST Adkins | SUFFIX | OFFICE USE ONLY | | |
| | MS / MRS / MR Ms. | FIRST LaDeitra D. | MI | | | | | | | | |
| NICKNAME | LAST Adkins | SUFFIX | | | | | | | | | |
| Date Received ELECTRONICALLY FILED 07/15/2025 | | | | | | | | | | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE <div style="background-color: black; color: white; text-align: center; padding: 5px;"> REDACTED PER 254.0313, GOV'T CODE </div> | | Date Hand-delivered or Date Postmarked | | | | | | | | |
| | <table style="width: 100%;"> <tr> <td style="width: 50%;">Receipt #</td> <td style="width: 50%;">Amount</td> </tr> </table> | | Receipt # | Amount | Date Processed | | | | | | |
| | Receipt # | Amount | | | | | | | | | |
| | Date Imaged | | | | | | | | | | |
| Date Imaged | | | | | | | | | | | |
| 5 CAMPAIGN TREASURER NAME | <table style="width: 100%;"> <tr> <td style="width: 25%;">MS / MRS / MR Mrs.</td> <td style="width: 25%;">FIRST Cynthia</td> <td style="width: 50%;">MI</td> </tr> </table> <hr/> <table style="width: 100%;"> <tr> <td style="width: 25%;">NICKNAME</td> <td style="width: 25%;">LAST Martin</td> <td style="width: 50%;">SUFFIX</td> </tr> </table> | | MS / MRS / MR Mrs. | FIRST Cynthia | MI | NICKNAME | LAST Martin | SUFFIX | | | |
| | MS / MRS / MR Mrs. | FIRST Cynthia | MI | | | | | | | | |
| NICKNAME | LAST Martin | SUFFIX | | | | | | | | | |
| STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <div style="background-color: black; color: white; text-align: center; padding: 5px;"> REDACTED PER 254.0313, GOV'T CODE </div> | | | | | | | | | | | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <div style="background-color: black; color: white; text-align: center; padding: 5px;"> REDACTED PER 254.0313, GOV'T CODE </div> | | | | | | | | | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (214) 801-5620 | | | | | | | | | | |
| 8 REPORT TYPE | <table style="width: 100%;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</td> </tr> <tr> <td><input checked="" type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded modified reporting limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH-FR)</td> </tr> </table> | | | <input 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 checked="" 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) |
| <input 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 checked="" type="checkbox"/> July 15 | <input type="checkbox"/> 8th day before election | <input type="checkbox"/> Exceeded modified reporting limit | <input type="checkbox"/> Final Report (Attach C/OH-FR) | | | | | | | | |
| 9 PERIOD COVERED | Month Day Year Month Day Year 01/01/2025 THROUGH 06/30/2025 | | | | | | | | | | |
| 10 ELECTION | ELECTION DATE Month Day Year | | ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special | | | | | | | | |
| | OFFICE HELD (if any) District Judge District 303 Dallas | | 12 OFFICE SOUGHT (if known) | | | | | | | | |

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

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|---|---|
| 13 C / OH NAME Adkins, LaDeitra D. (Ms.) | 14 Filer ID (Ethics Commission Filers) 00081707 |
|---|---|

| | | | |
|---|--|---|--------------|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. | | |
| | COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | COMMITTEE NAME | |
| | | COMMITTEE ADDRESS | |
| | | COMMITTEE CAMPAIGN TREASURER NAME | |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS | |
| 16 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | | \$ 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | | \$ 58,355.93 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | | \$ 7,692.26 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | | \$ 67,011.38 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | | \$ 2,000.00 |

17 AFFIDAVIT

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

Ms. LaDeitra D. Adkins

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, 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

SUBTOTALS - JC/OH

FORM JC/OH
COVER SHEET PG 3

3 of 31

| | | | |
|---|---|--------------------------------|----------------------------|
| 18 FILER NAME Adkins, LaDeitra D. (Ms.) | | 19 Filer ID 00081707 | (Ethics Commission Filers) |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) | \$ | 56,650.00 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ | 1,705.93 |
| 3. | <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) | \$ | |
| 4. | <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL) | \$ | |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ | 7,692.26 |
| 6. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ | |
| 7. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ | |
| 8. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ | |
| 9. | <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ | |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ | |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ | |
| 12. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 1/18 Rpt: 4/31 |
| 2 FILER NAME Adkins, LaDeitra D. (Ms.) | | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 05/28/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adam Seidel, P.C. <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75206 | 7 Amount of Contribution (\$) <div style="text-align: right;">\$250.00</div> |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/23/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexandra Greczi PLLC <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248 | Amount of Contribution (\$) <div style="text-align: right;">\$250.00</div> |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/02/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Twana <hr/> Contributor address; City; State; Zip Code Dallas , TX 75203 | Amount of Contribution (\$) <div style="text-align: right;">\$250.00</div> |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm West & Associates | | Law firm of contributor's spouse (if any) n/a |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 2/18 Rpt: 5/31 |
| 2 FILER NAME Adkins, LaDeitra D. (Ms.) | | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 05/19/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong Divorce & Family Law <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75024 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balekian Hayes, PLLC <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204 | Amount of Contribution (\$) \$2,500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowman, Laci <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation lawyer | | Contributor's Job Title partner |
| Contributor's employer/law firm Godwin Bowman P.C. | | Law firm of contributor's spouse (if any) Godwin Bowman P.C |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 3/18 Rpt: 6/31 |
| 2 FILER NAME Adkins, LaDeitra D. (Ms.) | | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 05/31/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bramlett, Brittney <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75219 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Duffee + Eitzen | | 11 Law firm of contributor's spouse (if any) n/a |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Shelton <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201 | Amount of Contribution (\$) \$50.00 |
| Contributor's Principal Occupation Family Court Services | | Contributor's Job Title Probation |
| Contributor's employer/law firm n/a | | Law firm of contributor's spouse (if any) n/a |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Andrea <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231 | Amount of Contribution (\$) \$100.00 |
| Contributor's Principal Occupation Accountant | | Contributor's Job Title unknown |
| Contributor's employer/law firm n/a | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 4/18 Rpt: 7/31 |
| 2 FILER NAME Adkins, LaDeitra D. (Ms.) | | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 05/29/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez Law Firm <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 74243 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connatser Family Law <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219 | Amount of Contribution (\$) \$5,000.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Jeffrey <hr/> Contributor address; City; State; Zip Code Dallas, TX 75039 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Owner |
| Contributor's employer/law firm n/a | | Law firm of contributor's spouse (if any) n/a |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 5/18 Rpt: 8/31 |
| 2 FILER NAME Adkins, LaDeitra D. (Ms.) | | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 05/29/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowder, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75205 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation Retired Judge | | 9 Contributor's Job Title Retired Judge |
| 10 Contributor's employer/law firm Retired Judge | | 11 Law firm of contributor's spouse (if any) n/a |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruz Arevelo, P.C. Family <hr/> Contributor address; City; State; Zip Code Dallas, TX 75202 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donavan, Carol (Ms.) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm n/a | | Law firm of contributor's spouse (if any) n/a |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 6/18 Rpt: 9/31 |
| 2 FILER NAME Adkins, LaDeitra D. (Ms.) | | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 05/23/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duffee + Eitzen <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75219 | 7 Amount of Contribution (\$) \$2,500.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eartha, Taylor <hr/> Contributor address; City; State; Zip Code Dallas, TX 75247 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Owner |
| Contributor's employer/law firm Law Office of Eartha Taylor | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epstein Family Law <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 7/18 Rpt: 10/31 |
| 2 FILER NAME Adkins, LaDeitra D. (Ms.) | | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 05/29/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank Adler Law <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76006 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/18/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedman & Feiger, LLP <hr/> Contributor address; City; State; Zip Code Dallas, TX 75254 | Amount of Contribution (\$) \$2,500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goranson Bain Ausley <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 8/18 Rpt: 11/31 |
| 2 FILER NAME Adkins, LaDeitra D. (Ms.) | | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 05/29/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isaacson, Pam (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75001 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm n/a | | 11 Law firm of contributor's spouse (if any) n/a |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Barrell (Mrs.) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation n/a | | Contributor's Job Title n/a |
| Contributor's employer/law firm n/a | | Law firm of contributor's spouse (if any) n/a |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katie L. Lewis, P.C. Family Law <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231 | Amount of Contribution (\$) \$2,500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 9/18 Rpt: 12/31 |
| 2 FILER NAME Adkins, LaDeitra D. (Ms.) | | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 05/29/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Shequita (The Honorable) | 7 Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$100.00</div> |
| 6 Contributor address; City; State; Zip Code Cedar Hill, TX 75106 | | |
| 8 Contributor's Principal Occupation Judge | | 9 Contributor's Job Title Judge |
| 10 Contributor's employer/law firm n/a | | 11 Law firm of contributor's spouse (if any) n/a |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinder Law P.L.L.C | Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$5,000.00</div> |
| Contributor address; City; State; Zip Code Dallas, TX 75220 | | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/25/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KoonsFuller, PC | Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$2,500.00</div> |
| Contributor address; City; State; Zip Code Dallas, TX 75202 | | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 10/18 Rpt: 13/31 |
| 2 FILER NAME Adkins, LaDeitra D. (Ms.) | | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 05/29/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Cato-Miller Darensburg & Associates <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75254 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Lynne A. Corsi <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204 | Amount of Contribution (\$) \$2,500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Mellannise Hederson Loveve <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201 | Amount of Contribution (\$) \$2,500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 11/18 Rpt: 14/31 |
| 2 FILER NAME Adkins, LaDeitra D. (Ms.) | | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 05/16/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Shannon Lynch <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75201 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Suzanne Lomenick <hr/> Contributor address; City; State; Zip Code Irving, TX 75062 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Thomas O'brien <hr/> Contributor address; City; State; Zip Code Dallas, TX 75226 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 12/18 Rpt: 15/31 |
| 2 FILER NAME Adkins, LaDeitra D. (Ms.) | | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 05/28/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisa E. McKnight, P.C. 6 Contributor address; City; State; Zip Code Dallas, TX 75246 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark Cohen Law Contributor address; City; State; Zip Code Dallas, TX 75209 | Amount of Contribution (\$) \$100.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClure Law Group Contributor address; City; State; Zip Code Dallas, TX 75225 | Amount of Contribution (\$) \$2,500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 13/18 Rpt: 16/31 |
| 2 FILER NAME Adkins, LaDeitra D. (Ms.) | | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 06/30/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller Family Law Group <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75219 | 7 Amount of Contribution (\$) \$2,500.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neil Wysocki PC <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201 | Amount of Contribution (\$) \$2,500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olorunnisomo, Leora (Mrs.) <hr/> Contributor address; City; State; Zip Code Rowlett, TX 75030 | Amount of Contribution (\$) \$1,500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm n/a | | 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

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 14/18 Rpt: 17/31 |
| 2 FILER NAME Adkins, LaDeitra D. (Ms.) | | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 05/29/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orsinger, Nelson, Downing and Anderson, LLP <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75225 | 7 Amount of Contribution (\$) \$2,500.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/07/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payma, Kuhnel & Smith <hr/> Contributor address; City; State; Zip Code Dallas, TX 75203 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickar Law Firm P.C. <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240 | Amount of Contribution (\$) \$100.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 15/18 Rpt: 18/31 |
| 2 FILER NAME Adkins, LaDeitra D. (Ms.) | | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 06/09/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sammie, Smith (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Southlake, TX 76092 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Partner |
| 10 Contributor's employer/law firm n/a | | 11 Law firm of contributor's spouse (if any) n/a |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Fredrick <hr/> Contributor address; City; State; Zip Code DeSoto, TX 75115 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation Employment Recruiter | | Contributor's Job Title n/a |
| Contributor's employer/law firm n/a | | Law firm of contributor's spouse (if any) n/a |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seigel Ph.D, Jeffery <hr/> Contributor address; City; State; Zip Code Dallas, TX 75252 | Amount of Contribution (\$) \$100.00 |
| Contributor's Principal Occupation ph.D | | Contributor's Job Title therapist |
| Contributor's employer/law firm n/a | | Law firm of contributor's spouse (if any) n/a |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 16/18 Rpt: 19/31 |
| 2 FILER NAME Adkins, LaDeitra D. (Ms.) | | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 05/22/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Denise <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75202 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Contributor's Principal Occupation Probation | | 9 Contributor's Job Title Probation |
| 10 Contributor's employer/law firm n/a | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/02/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Eartha <hr/> Contributor address; City; State; Zip Code Dallas, TX 75247 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title attorney |
| Contributor's employer/law firm n/a | | Law firm of contributor's spouse (if any) n/a |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Blacknall Firm <hr/> Contributor address; City; State; Zip Code Plano, TX 75024 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 17/18 Rpt: 20/31 |
| 2 FILER NAME Adkins, LaDeitra D. (Ms.) | | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 06/02/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Worrell Law Firm , P.C. <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75204 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb Family Law <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201 | Amount of Contribution (\$) \$2,500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wesley, Danielle <hr/> Contributor address; City; State; Zip Code Murphy, TX 75094 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Director | | Contributor's Job Title Director |
| Contributor's employer/law firm Children's Medical Center | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 18/18 Rpt: 21/31 |
| 2 FILER NAME Adkins, LaDeitra D. (Ms.) | | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 05/29/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Carmen (The Honorable) 6 Contributor address; City; State; Zip Code Dallas, TX 75207 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Contributor's Principal Occupation Judge | | 9 Contributor's Job Title Judge |
| 10 Contributor's employer/law firm n/a | | 11 Law firm of contributor's spouse (if any) n/a |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) martin, cynthia Contributor address; City; State; Zip Code REDACTED PER 254.0313, GOV'T CODE | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Teacher | | Contributor's Job Title Retired |
| Contributor's employer/law firm n/a | | Law firm of contributor's spouse (if any) n/a |
| If contributor is a child, law firm of parent(s) (if any) | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | |
|---|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: Sch: 1/1 Rpt: 22/31 | |
| 2 FILER NAME Adkins, LaDeitra D. (Ms.) | | 3 Filer ID (Ethics Commission Filers) 00081707 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date 05/29/2025 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connatser Family Law 7 Contributor address; City; State; Zip Code Dallas, TX 75219 | 8 Amount of contribution (\$) \$852.97 | 9 In-kind contribution description Food/Beverage for Campaign Event |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | 11 Employer (FOR NON-JUDICIAL) (See instructions) | |
| 12 Contributor's principal occupation (FOR JUDICIAL) | | 13 Contributor's job title (FOR JUDICIAL) (See instructions) | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) | | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |
| Date 05/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Lynne A. Corsi Contributor address; City; State; Zip Code Dallas, TX 75204 | Amount of contribution (\$) \$852.96 | In-kind contribution description Food/Beverage for Campain event |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | Employer (FOR NON-JUDICIAL) (See instructions) | |
| Contributor's principal occupation (FOR JUDICIAL) | | Contributor's job title (FOR JUDICIAL) (See instructions) | |
| Contributor's employer/law firm (FOR JUDICIAL) | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |
| | | | |

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: 1/8 Rpt: 23/31 | 2 FILER NAME Adkins, LaDeitra D. (Ms.) | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 02/10/2025 | 5 Payee name Alpha Kappa Alpha (Alpha Xi Omega) | |
| 6 Amount (\$) \$100.00 | 7 Payee address; City; State; Zip Code P.O.Box 222333 Dallas, TX 75222 | |
| 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 ticket |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/04/2025 | Payee name Dallas Black Dance Theatre | |
| Amount (\$) \$1,000.00 | Payee address; City; State; Zip Code 2700 Ann Williams Way Dallas, TX 75201 | |
| 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 Ad and tickets for Gala |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/31/2025 | Payee name Dallas County Democratic Party | |
| Amount (\$) \$125.00 | Payee address; City; State; Zip Code 1414 Washington Ave Dallas, TX 75223 | |
| 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 Sponsor Fish Fry |
| 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.

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|---|---|--|
| 1 Total pages Schedule F1: Sch: 2/8 Rpt: 24/31 | 2 FILER NAME Adkins, LaDeitra D. (Ms.) | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 01/21/2025 | 5 Payee name Democracy Toolbox | |
| 6 Amount (\$) \$500.00 | 7 Payee address; City; State; Zip Code 405 Rice street McKinney, TX 75069-5460 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Fee |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/24/2025 | Payee name Democracy Toolbox | |
| Amount (\$) \$375.00 | Payee address; City; State; Zip Code 405 Rice street McKinney, TX 75069-5460 | |
| 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 Justice Tour Fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/13/2025 | Payee name Democracy Toolbox | |
| Amount (\$) \$1,700.00 | Payee address; City; State; Zip Code 405 Rice street McKinney, TX 75069-5460 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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|---|---|--|
| 1 Total pages Schedule F1: Sch: 3/8 Rpt: 25/31 | 2 FILER NAME Adkins, LaDeitra D. (Ms.) | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 04/03/2025 | 5 Payee name Democracy Toolbox | |
| 6 Amount (\$) \$300.00 | 7 Payee address; City; State; Zip Code 405 Rice street McKinney, TX 75069-5460 | |
| 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 Justice Tour |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/24/2025 | Payee name Dodd Educational Foundation | |
| Amount (\$) \$150.00 | Payee address; City; State; Zip Code P.O. Box 222051 Dallas, TX 75222 | |
| 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 Ad |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/13/2025 | Payee name Garland NAACP | |
| Amount (\$) \$30.00 | Payee address; City; State; Zip Code 713 Austin St, Garland, TX 75040 | |
| 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 MLK parade fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 4/8 Rpt: 26/31 | 2 FILER NAME Adkins, LaDeitra D. (Ms.) | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 01/21/2025 | 5 Payee name IMA | |
| 6 Amount (\$) \$150.00 | 7 Payee address; City; State; Zip Code P.O. Box 41139 Dallas, TX 75241 | |
| 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 Ad |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/21/2025 | Payee name IS Sports | |
| Amount (\$) \$628.82 | Payee address; City; State; Zip Code 204 E, Pleasant Run Lancaster , TX 75146 | |
| 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 T-shirts |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/30/2025 | Payee name Lawhorn Catering and Decor | |
| Amount (\$) \$100.00 | Payee address; City; State; Zip Code 2600 Lonestar Dallas, TX 75212 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Help with Justice tour |
| 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: 5/8 Rpt: 27/31 | 2 FILER NAME Adkins, LaDeitra D. (Ms.) | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 05/29/2025 | 5 Payee name Lawhorn Catering and Decor | |
| 6 Amount (\$) \$300.00 | 7 Payee address; City; State; Zip Code 2600 Lonestar Dallas, TX 75212 | |
| 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 staff |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 05/20/2025 | Payee name Little House Design Ltd. Co. | |
| Amount (\$) \$600.00 | Payee address; City; State; Zip Code 1212 Singleton Blvd #4065 Dallas, TX 75212 | |
| 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 update |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/25/2025 | Payee name McShan Florist | |
| Amount (\$) \$101.14 | Payee address; City; State; Zip Code 10311 Garland Rd. Dallas, TX 75218 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Memorial expense |
| 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: 6/8 Rpt: 28/31 | 2 FILER NAME Adkins, LaDeitra D. (Ms.) | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 06/30/2025 | 5 Payee name Pay Pal | |
| 6 Amount (\$) \$654.43 | 7 Payee address; City; State; Zip Code 2211 N. 1st Street San Jose, CA 95131 | |
| 8 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 Pay Pal fees from donations |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/27/2025 | Payee name Rodeo/African American Museum | |
| Amount (\$) \$100.00 | Payee address; City; State; Zip Code 3536 Grand Ave Dallas, TX 75210 | |
| 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 Ad |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/17/2025 | Payee name South Dallas Business and Professional Women's Club, Inc. | |
| Amount (\$) \$200.00 | Payee address; City; State; Zip Code P.O. Box 764587 Dallas, TX 75376-4587 | |
| 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 Tickets |
| 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: 7/8 Rpt: 29/31 | 2 FILER NAME Adkins, LaDeitra D. (Ms.) | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 04/29/2025 | 5 Payee name Stonewall Democrats of Dallas | |
| 6 Amount (\$) \$250.00 | 7 Payee address; City; State; Zip Code P.O. Box 192305 Dallas, TX 75219 | |
| 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 Sponsor Event |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/20/2025 | Payee name Texas Coalition of Black Dems (Dallas Chapter) | |
| Amount (\$) \$40.00 | Payee address; City; State; Zip Code unknown Dallas, TX 75201 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Membership fee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/18/2025 | Payee name The Links Inc. (Trinity Chapter) | |
| Amount (\$) \$200.00 | Payee address; City; State; Zip Code P.O. Box 820534 Dallas, TX 75382 | |
| 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 ticket |
| 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: 8/8 Rpt: 30/31 | 2 FILER NAME Adkins, LaDeitra D. (Ms.) | 3 Filer ID (Ethics Commission Filers) 00081707 |
| 4 Date 01/21/2025 | 5 Payee name Walmart | |
| 6 Amount (\$) \$87.87 | 7 Payee address; City; State; Zip Code 5302 N. Garland Ave. Garland, TX 75040 | |
| 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 parade supplies |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

OUTSTANDING LOANS

SCHEDULE L

The Instruction Guide explains how to complete this form.

1 Total pages Schedule L:
Sch: 1/1 Rpt: 31/31

2 FILER NAME

Adkins, LaDeitra D. (Ms.)

3 Filer ID (Ethics Commission Filers)
00081707

LENDER
INFORMATION

4 Name of lender

LaDeitra, Adkins (Ms.)

5 Lender address; City; State; Zip Code

Dallas, TX 75219

GUARANTOR
INFORMATION

6 Name of guarantor

☒ not applicable

7 Guarantor address; City; State; Zip Code