FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00069606 63 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Staci NAME Date Received **ELECTRONICALLY FILED** 07/15/2025 NICKNAME LAST **SUFFIX** Williams CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Steven R. NAME NICKNAME LAST **SUFFIX** Shirley **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (469) 540-9811 **PHONE** REPORT TYPE January 15 30th day before election 15th day after campaign treasurer Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Day Month Day Year Year **COVERED THROUGH** 01/01/2025 06/30/2025 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 03/03/2026 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 101st Dallas

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 63

13 C / OH NAME	Williams, Staci (The	Honorable)	14 Filer ID 00069606	(Ethics Commission Filers)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendi These expenditures may have been made withou d officeholders are required to report this information	t the candidate's or office	eholder's knowledge or	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRE	ESS		
16 CONTRIBUTION TOTALS	OR GUARANTE	IZED POLITICAL CONTRIBUTIONS(OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE EL		\$ 0.00	
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAI	NS)	\$ 142,050.00	
EXPENDITURE TOTALS	3. TOTAL UNITEM	TOTAL UNITEMIZED POLITICAL EXPENDITURES			
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 41,597.43	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 111,749.61	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A TING PERIOD	S OF THE LAST DAY	\$ 0.00	
17 AFFIDAVIT					
		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code.	all information required t		
		The Ho	norable Staci Williams	6	
		Signature of	of Candidate or Officehol	der	
AFFIX NOT	TARY STAMP / SEAL AB	OVE			
		aid	, this the	day	
		ertify which, witness my hand and seal of office.			
Signature of offic	er administering oath	Printed name of officer administering oath	Title of office	r administering oath	

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

				OVE	R SHEET PG 3 3 of 63
	ER NAM	ME Staci (The Honorable)	19 Filer ID 00069606	(Ethic	cs Commission Filers)
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	142,050.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS				29,275.48
6.	6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS				
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	12,321.95
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.	12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER			\$	

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 1/26 Rpt: 4/63
2	FILER NAME Williams, Sta	aci (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069606
4	Date 05/21/2025	5 Full name of contributor Abbasi, Mohamma6 Contributor address; City;	ima iss; City; State; Zip Code		7	Amount of Contribution (\$) \$100.00
		Sugar Land, TX 77478				
8	Contributor's I Retired	Principal Occupation		9 Contributor's Job Title Retired		
10		and a sault assisting				on (if any)
10	Retired	employer/law firm		11 Law firm of contributor's sp	Jous	se (II arry)
12		s a child, law firm of parent(s) (i	f any)	<u> </u>		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/21/2025	Abbasi, Mohammad Contributor address; City; Sugar Land, TX 77478	State; Zip Code			\$100.00
	Contributor's I	Principal Occupation		Contributor's Job Title		
	retired	-Tiricipal Occupation		retired		
			Law firm of contributor's sp	oous	se (if any)	
	If contributor i	s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	06/30/2025	Adler, Jim				\$2,500.00
		Contributor address; City; Houston, TX 77027	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	_	
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Self					
	If contributor i	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	tal pages Schedule A(J): h: 2/26 Rpt: 5/63	L:
2	FILER NAME Williams, Sta	aci (The Honorable)			1	er ID (Ethics Commissi 069606	on Filers)
4	05/30/2025 Albert, Craig (Mr.) 6 Contributor address; City; State; Zip Code		7 An	nount of Contribution (\$)	\$250.00		
		Dallas, TX 75225					
8		Principal Occupation		9 Contributor's Job Title			
_	Attorney			Attorney	· · · · · · · · · · · ·	f A	
10	10 Contributor's employer/law firm Cherry Petersen Albert 11 Law firm of contributor's sp			ouse (i	i any)		
12	-	s a child, law firm of parent(s) (i	f any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	An	nount of Contribution (\$)	
	06/30/2025	Aldous Law Contributor address; City;	State; Zip Code				\$5,000.00
	O a stalle at a size I	Dallas, TX 75219		Occasillant and Dala Title			
	Contributors	Principal Occupation		Contributor's Job Title			
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oouse (i	f any)	
	If contributor is	s a child, law firm of parent(s) (i	f any)	<u> </u>			
	Date	Full name of contributor	out-of-state PAC (ID#:)	An	nount of Contribution (\$)	
	06/04/2025	Anderson, Terri Contributor address; City; Coppell, TX 75019	State; Zip Code				\$1,000.00
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>		
	Commercial	Real Estate Developer		Commercial Real Estate	e Deve	eloper	
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (i	f any)	
	Anderson De	evelopment & Construction L	LC				
	If contributor is	s a child, law firm of parent(s) (if	f any)				

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDUL	E A(J)1
	The Instru	ction Guide explains how t	to complete this f	orm.	1 Total pages Schedule A Sch: 3/26 Rpt: 6/63	A(J)1:
2	FILER NAME Williams, Sta	aci (The Honorable)			3 Filer ID (Ethics Comn 00069606	nission Filers)
4	Date 06/30/2025			7 Amount of Contribution	(\$) \$2,500.00	
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	0 Contributor's employer/law firm 11 Law firm of contributor's spe			pouse (if any)		
12	If contributor is	s a child, law firm of parent(s) (if an	у)			
Date O6/30/2025 Full name of contributor out-of-state PAC (ID#:) Baron & Budd, P.C. Contributor address; City; State; Zip Code		Amount of Contribution	(\$) \$5,000.00			
	Contributor's I	Dallas, TX 75219 Principal Occupation		Contributor's Job Title		
Contributor's employer/law firm				Law firm of contributor's sp	pouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if an	у)			
	Date 05/12/2025	Full name of contributor Baron and Blue Contributor address; City; State Dallas, TX 75225	out-of-state PAC (ID#:_)	Amount of Contribution	(\$) \$5,000.00
	Contributor's I	I Principal Occupation		Contributor's Job Title	_ L	
	Contributor's e	employer/law firm		Law firm of contributor's sp	pouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if an	y)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 4/26 Rpt: 7/63
2	FILER NAME Williams, Sta	aci (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069606
4	Date 06/09/2025			7	Amount of Contribution (\$) \$2,000.00	
Ļ				I		
8		Principal Occupation		9 Contributor's Job Title		
_	Marketing			Marketing Manager		
10	10 Contributor's employer/law firm McCathern 11 Law firm of contributor's s			oou	se (if any)	
12	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)
	05/16/2025	Barron, Thomas Contributor address; City; 9 Dallas, TX 75204	State; Zip Code			\$250.00
	Contributorio [Contributor's Job Title	<u> </u>	
	Attorney	Principal Occupation		Attorney		
		employer/law firm		Law firm of contributor's sp	2011	co (if any)
	Self	ыпрюуетлаж шт		Law IIIII of Contributor 5 Sp	Jou	se (II ally)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	05/20/2025	Bell Nunnally & Martin L	LP		l	\$1,500.00
		Contributor address; City; S Dallas, TX 75201	State; Zip Code		•	
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's e	employer/law firm		Law firm of contributor's sp	oou	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 5/26 Rpt: 8/63
2	FILER NAME Williams, Sta	aci (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069606
4	Date 05/13/2025	5 Full name of contributor Bell, Jasmine6 Contributor address; City;			7	Amount of Contribution (\$) \$2,500.00
L	Contributorio	l		Contributorio Joh Titlo		
8	CFO	Contributor's Principal Occupation 9 Contributor's Job Title CFO CFO				
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if anv)
		nstone Panatier, PC				(1, 7)
12	2 If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/20/2025	Bivins, Ron Contributor address; City; Desoto, TX 75115	State; Zip Code			\$50.00
_	Contributor's F	Principal Occupation		Contributor's Job Title		
Community Leader Community Leader						
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	I.		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	03/06/2025	Black, Tre'				\$5,000.00
		Contributor address; City; Dallas, TX 75208	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	CEO			CEO		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	On-Target L					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 6/26 Rpt: 9/63
2	FILER NAME Williams, Sta	aci (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069606
4	Date 05/21/2025	Full name of contributor Boll, George (Mr.) Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$150.00
		Addison, TX 75001				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10		employer/law firm & Stacy PLLC		11 Law firm of contributor's sp	oous	se (if any)
12		s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/20/2025	Brewer, Attorneys & Col Contributor address; City;				\$2,500.00
	Contributor's I	Dallas, TX 75201 Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/22/2025	Brooker, Chip	_			\$1,000.00
		Contributor address; City; Dallas, TX 75219	State; Zip Code		1	
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Brooker Law	PLLC		Scheef & Stone		
	If contributor is	s a child, law firm of parent(s) (i	fany)	•		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A	\(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 7/26 Rpt: 10/63	
2	FILER NAME Williams, Sta	aci (The Honorable)			1	Filer ID (Ethics Commission)	n Filers)
4	Date 05/14/2025	D5/14/2025 Burke, Aaron 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00	
Ļ		Dallas, TX 75270		T			
8		Principal Occupation		9 Contributor's Job Title			
40	Attorney			Attorney		(** · · · · · · ·	
10	LO Contributor's employer/law firm Burke Bogdanowisc PLLC 11 Law firm of contributor's sp			oouse	(If any)		
12	If contributor is	s a child, law firm of parent(s) (i	f any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/30/2025	Carter Arnett PLLC Contributor address; City; Dallas, TX 75206	State; Zip Code				\$5,000.00
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Continuator 5 i	-ппстрат Оссираціон		Continuator 5 300 Title			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse	(if any)	
	If contributor is	s a child, law firm of parent(s) (i	f any)	L			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	05/19/2025	Chalaki Law PC					\$5,000.00
		Contributor address; City; Carrollton, TX 75006	State; Zip Code				
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oouse	(if any)	
	If contributor is	s a child, law firm of parent(s) (i	f any)	1			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 8/26 Rpt: 11/63
2	FILER NAME Williams, Sta	aci (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069606
4	Date 05/20/2025	5 Full name of contributor Clardy, Thelma6 Contributor address; City;	ess; City; State; Zip Code		7	Amount of Contribution (\$) \$100.00
		Desoto, TX 75115				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney Attorney					
10	10 Contributor's employer/law firm Clardy Law Firm			oous	se (if any)	
12	If contributor is	s a child, law firm of parent(s) (if	f any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/20/2025	Clayton, Gary Contributor address; City; Dallas, TX 75248	State; Zip Code			\$500.00
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Consultant	-Tiricipal Occupation		Consultant		
		employer/law firm		Law firm of contributor's sp	าดบร	se (if any)
	Negotiate.Pr					
	If contributor is	s a child, law firm of parent(s) (if	f any)	I		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/19/2025	Clouston, David (Mr.)	_			\$5,000.00
		Contributor address; City; Dallas, TX 75230	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Sessions Fir			Winston Strawn		
	If contributor is	s a child, law firm of parent(s) (if	f any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 9/26 Rpt: 12/63
2	FILER NAME Williams, Sta	aci (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069606
4	Date 05/30/2025	5 Full name of contributor Cunningham, Vickers6 Contributor address; City; S	Cunningham, Vickers Ontributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$250.00
		Dallas, TX 75223		T		
8		Principal Occupation		9 Contributor's Job Title		
_	Attorney			Attorney		
10	Cunningham	employer/law firm		11 Law firm of contributor's sp	ous	se (II ariy)
12		s a child, law firm of parent(s) (if	anvi			
12	. Il contributor i	s a criliu, iaw ilitii of parerit(s) (ii	arry			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/16/2025	DeSimone, Donald		,		\$500.00
		Contributor address; City; S Houston, TX 77027	štate; Zip Code			
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	DeSimone L	aw Office				
	If contributor is	s a child, law firm of parent(s) (if	any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)
	05/20/2025	Farmer & Coker	out or state 1740 (IBII.	/		\$1,500.00
		Contributor address; City; S	State; Zip Code		-	
		Dallas, TX 75202				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 10/26 Rpt: 13/63
2	FILER NAME Williams, Sta	aci (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069606
4	Date 05/12/2025	05/12/2025 Fokas, Terry 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$500.00	
		Dallas, TX 75252				
8		Principal Occupation		9 Contributor's Job Title		
	Manager			Manager		
10	10 Contributor's employer/law firm Parallel Networks 11 Law firm of contributor's s				oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/20/2025	Frost Brown Todd LLP Contributor address; City;	State; Zip Code			\$1,000.00
		Lousiville, KY 40202				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	05/19/2025	Gabriel, Freddie	_			\$250.00
		Contributor address; City; Grand Prairie, TX 75052	·			
	Contributor's I	rincipal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Law Office o	f Domingo Garcia				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 11/26 Rpt: 14/63
2	FILER NAME Williams, Sta	aci (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069606
4	Date 06/30/2025	5 Full name of contributor Godwin Bowman6 Contributor address; City;	out-of-state PAC (ID#:_		7	Amount of Contribution (\$) \$5,000.00
L		Dallas, TX 75201		1		
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm 11 Law firm of contributor's spo			ous	se (if any)	
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	O6/17/2025 Goudarzi, Brent Contributor address; City; State; Zip Code			\$5,000.00		
		Gilmer, TX 75644				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Goudarzi & `					
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/20/2025	Gracie, Whitely	_			\$300.00
	Contributor address; City; State; Zip Code Garland, TX 75041		•			
_	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Retired	iniopai Godapaion		Retired		
	Contributor's employer/law firm Law firm of contributor's s			ous	se (if any)	
	Retired					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 12/26 Rpt: 15/63
2	FILER NAME Williams, Sta	aci (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069606
4	Date 06/30/2025	5 Full name of contributorGrau Law Group PLLC6 Contributor address; City;	out-of-state PAC (ID#:_		7	Amount of Contribution (\$) \$500.00
L		Dallas, TX 75201		I		
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm 11 Law firm of contributor's spo			ous	se (if any)	
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)
	05/20/2025 Holmes Firm PC Contributor address; City; State; Zip Code				\$500.00	
		Dallas, TX 75254				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	Date Full name of contributor out-of-state PAC (ID#:) 05/12/2025 Kaplan, Charles Contributor address; City; State; Zip Code			•	\$500.00	
		Dallas, TX 75204				
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's employer/law firm Law firm of contributor's s			ous	se (if any)	
	Kaplan & Cr		f A			
	it contributor is	s a child, law firm of parent(s) (i	r any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1	Total pages Schedule A(J)1: Sch: 13/26 Rpt: 16/63
2	FILER NAME Williams, Sta	aci (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069606
4	Date 05/20/2025	5 Full name of contributor Kastl Law, P.C.6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$2,500.00
		Dallas, TX 75204		1		
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	e (if any)
12	! If contributor i	s a child, law firm of parent(s) (i	f any)	<u> </u>		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	I	Amount of Contribution (\$)
	06/30/2025 Kizzia Jonson PLLC Contributor address; City; State; Zip Code			\$100.00		
		Dallas, TX 75201-3239				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor i	s a child, law firm of parent(s) (i	f any)	<u> </u>		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/20/2025	Lauten, Brian	_	· · · · · · · · · · · · · · · · · · ·		\$1,000.00
Contributor address; City; State; Zip Code Dallas, TX 75219						
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's employer/law firm Law firm of contributor's s			Law firm of contributor's sp	oous	e (if any)
	Brian Lauter	ı , P.C.				
	If contributor i	s a child, law firm of parent(s) (i	f any)			

MONET	ARY POLITICAL CONTRIBUTI	IONS	SCHEDULE A(J)1
The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule A(J)1: Sch: 14/26 Rpt: 17/63
2 FILER NAME Williams, Sta	aci (The Honorable)		3 Filer ID (Ethics Commission Filers) 00069606
4 Date 05/20/2025	Law Office of Cynthia F. Solls 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$100.00
	Dallas, TX 75230		
8 Contributor's I	Principal Occupation	9 Contributor's Job Title	
10 Contributor's 6	employer/law firm	pouse (if any)	
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID:	#:)	Amount of Contribution (\$)
05/20/2025	Law Offices of Cato-Miller Darensburg & Asso Contributor address; City; State; Zip Code	\$1,000.00	
	Dallas, TX 75254		
Contributor's I	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	pouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID:	#:)	Amount of Contribution (\$)
05/13/2025	Lester, James		\$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75236		
Contributor's F	I Principal Occupation	Contributor's Job Title	<u> </u>
RN RN			
	employer/law firm	Law firm of contributor's sp	pouse (if any)
Resource Co			
If contributor is	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this f	form.	1	Total pages Schedule A(J)1: Sch: 15/26 Rpt: 18/63
2	FILER NAME Williams, Sta	aci (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069606
4	Date 05/15/2025	Loewinsohn, Alan 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$5,000.00	
_		Dallas, TX 75201		T		
8		Principal Occupation		9 Contributor's Job Title		
_	Attorney			Attorney		
10	10 Contributor's employer/law firmMcKool Smith11 Law firm of contributor's sp			oou	se (if any)	
12	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)
	05/20/2025 Lowe, Gwenda (Ms.) Contributor address; City; State; Zip Code				\$250.00	
		Duncanville, TX 75137-6	306	1		
		Principal Occupation		Contributor's Job Title		
	Retired			Retired		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oou	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	05/19/2025	Lucas, Lita			l	\$50.00
		Contributor address; City; S Mesquite, TX 75150	State; Zip Code		-	
	Contributor's I	Principal Occupation		Contributor's Job Title	_	
	Realtor			Realtor		
	Contributor's employer/law firm Law firm of contributor's s			oou	se (if any)	
	Self					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 16/26 Rpt: 19/63
2	FILER NAME Williams, Sta	aci (The Honorable)			1	Filer ID (Ethics Commission Filers) 00069606
4	Date 05/19/2025	5 Full name of contributor Lucas, Shelia6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$50.00
		Mesquite, TX 75150				
8		Principal Occupation		9 Contributor's Job Title		
L	Realtor Realtor					
10	10 Contributor's employer/law firmSelf11 Law firm of contributor's sp			oous	e (if any)	
12		s a child, law firm of parent(s) (if	any)	<u></u>		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/30/2025 Lyons & Simmons LLP Contributor address; City; State; Zip Code				\$5,000.00	
	O a stalle at a size I	Dallas, TX 75201		O contributanta dal Titta		
	Contributors	Principal Occupation		Contributor's Job Title		
Contributor's employer/law firm Law firm of contributor's			Law firm of contributor's sp	oous	e (if any)	
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/12/2025	Malik, Adam				\$100.00
	Contributor address; City; State; Zip Code Carrollton, TX 75011					
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	n/a			n/a		
	Contributor's employer/law firm Law firm of contributor's sp			oous	e (if any)	
	n/a					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL (CONTRIBUTIO	DNS		SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A(J)1: Sch: 17/26 Rpt: 20/63
2	FILER NAME Williams, Sta	aci (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069606
4	Date 05/20/2025	5 Full name of contributor Maxwell II, Hal W.6 Contributor address; City; St	out-of-state PAC (ID#:_tate; Zip Code		7	Amount of Contribution (\$) \$75.00
		Dallas, TX 75243-3443				
8		Principal Occupation		9 Contributor's Job Title		
<u> </u>	Attorney Attorney				<i>(1)</i>	
10	10 Contributor's employer/law firm Self 11 Law firm of contributor's sp			ous	se (If any)	
12	! If contributor is	s a child, law firm of parent(s) (if a	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)
	05/12/2025 McCullough, Paul Contributor address; City; State; Zip Code			•	\$250.00	
		Dallas, TX 75251				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Mediator			Mediator		
		employer/law firm		Law firm of contributor's sp	ous	se (if any)
	McCullough	Mediaton				
	If contributor is	s a child, law firm of parent(s) (if a	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)
	05/20/2025	Miller Weisbrod Olesky LI	_P			\$2,500.00
		Contributor address; City; Si Dallas, TX 75243	tate; Zip Code		•	
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if a	any)	L		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 18/26 Rpt: 21/63
2	FILER NAME Williams, Sta	aci (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069606
4	Date 05/20/2025	Miller, John 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$500.00	
		Dallas, TX 75201		_		
8		Principal Occupation		9 Contributor's Job Title		
_	Attorney Attorney				<i>(1)</i>	
10	10 Contributor's employer/law firm Miller Copeland LLP 11 Law firm of contributor's sp			oous	se (IT any)	
12	! If contributor i	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/12/2025 Miller, John Contributor address; City; State; Zip Code				\$250.00	
		Dallas, TX 75201				
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Miller Copela		• · · ·			
	ii contributor i	s a child, law firm of parent(s) (i	rany)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)
	05/20/2025	Modjarrad, Sean	_			\$5,000.00
		Contributor address; City; Dallas, TX 75081	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	_	
	Attorney			Attorney		
	Contributor's employer/law firm Law firm of contributor's s			oous	se (if any)	
	MAS Law					
	If contributor is	s a child, law firm of parent(s) (i	f any)	•		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 19/26 Rpt: 22/63
2	FILER NAME Williams, Sta	aci (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069606
4	Date 06/16/2025	Montgomery, Sadat 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$5,000.00	
Ļ	0	Dallas, TX 75033		la o di di alami		
8		Principal Occupation		9 Contributor's Job Title		
_	Attorney Attorney				(1)	
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp			oous	se (IT any)	
40	Montgomery					
12	if contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/20/2025 Patton, Jonathan (Mr.) Contributor address; City; State; Zip Code				\$250.00	
		Dallas, TX 75225				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Tillotson, Pa	tton & Johnson				
	If contributor is	s a child, law firm of parent(s) (if	any)			
_	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	05/13/2025	Payseur, Joan		·		\$100.00
		Contributor address; City; S Dallas, TX 75254	State; Zip Code			
-	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Retired			Retired		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Retired	•				· • • • • • • • • • • • • • • • • • • •
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 20/26 Rpt: 23/63
2	FILER NAME Williams, Sta	aci (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069606
4	Date 05/16/2025			7	Amount of Contribution (\$) \$5,000.00	
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
°	Attorney	Tincipal Occupation		Attorney		
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp			2011	co (if any)	
10	The Petitt Law Firm Norton Rose Fulbright			Jou.	se (ii diiy)	
12		s a child, law firm of parent(s) (i	f any)	Notion Rose Fullshight		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/29/2025 Rafi, Ayesha Contributor address; City; State; Zip Code Dallas, TX 75243				\$1,000.00	
_	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Attorney	ттора: Оссаралот		Attorney		
		employer/law firm		Law firm of contributor's sp	าดนะ	se (if any)
	Rafi Debose					(, ,
		s a child, law firm of parent(s) (i	f any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/20/2025	Reichek, Amanda	_			\$100.00
		Contributor address; City; Dallas, TX 75218	State; Zip Code			
	Contributor's F	Principal Occupation		Contributor's Job Title	•	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Tillotson Joh	inson & Patton				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 21/26 Rpt: 24/63
2	FILER NAME Williams, Sta	aci (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069606
4	Date 05/20/2025	5 Full name of contributor Richardson, Vernon6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$100.00
		Red Oak, TX 75154				
8		Principal Occupation		9 Contributor's Job Title		
10	Retired Retired				and the service	
10	10 Contributor's employer/law firm Retired 11 Law firm of contributor's sp)OU:	se (II any)	
12	! If contributor i	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/12/2025	Rodriguez, O. Rey Contributor address; City;	State; Zip Code			\$250.00
_	Contributor's I	Dallas, TX 75370 Principal Occupation		Contributor's Job Title		
		te Specialist		Civil Appellate Specialis	st	
		employer/law firm		Law firm of contributor's sp		se (if any)
		Devin Madden Kenefick Har	ris			
	If contributor i	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/12/2025	Rosenberg, Betsy				\$250.00
		Contributor address; City; Dallas, TX 75252	State; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Retired			Retired		
	Contributor's	employer/law firm		Law firm of contributor's sp	oou	se (if any)
	Retired					
	If contributor i	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 22/26 Rpt: 25/63
2	FILER NAME Williams, Sta	aci (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069606
4	Date 05/20/2025	5 Full name of contributorSmth, Jason6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$500.00
		Ft. worth, TX 76104				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	10 Contributor's employer/law firmLaw Offices of Jason Smith11 Law firm of contributor's sp			oous	e (if any)	
12	If contributor is	s a child, law firm of parent(s) (if	any)	I .		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)
	05/20/2025 Sommerman McCaffity Quesada & Geisler LLP Contributor address; City; State; Zip Code				\$5,000.00	
		Dallas, TX 75219		I		
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/20/2025	Sorrells, Linda				\$10,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75232					
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
Contributor's employer/law firm Law firm of contributor's s			oous	e (if any)		
	Self					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1		
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 23/26 Rpt: 26/63		
2	FILER NAME Williams, Sta	aci (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069606		
4	Date 05/21/2025	5 Full name of contributor out-of-state PAC (ID#:)			7	Amount of Contribution (\$) \$150.00		
		Addison, TX 75001						
8		or's Principal Occupation 9 Contributor's Job Title						
	Attorney			Attorney				
10		employer/law firm & Stacy PLLC		11 Law firm of contributor's sp	oou	se (if any)		
12		s a child, law firm of parent(s) (i	f anv)					
			,,					
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)		
	05/20/2025	Stradley, Mark Contributor address; City;	State; Zip Code			\$125.00		
		Dallas, TX 75243						
	Contributor's Principal Occupation Contributor's Job Title							
	Attorney			Attorney				
		employer/law firm		Law firm of contributor's sp	spouse (if any)			
	Stradley Lav							
	If contributor is	s a child, law firm of parent(s) (i	f any)					
=	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)		
	05/19/2025	Syed, Hisham (Mr.)	_			\$100.00		
		Contributor address; City; Dallas, TX 75081	State; Zip Code					
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>			
	Consultant			Consultant				
	Contributor's	employer/law firm		Law firm of contributor's sp	oou	se (if any)		
	Self							
	If contributor is	s a child, law firm of parent(s) (i	f any)	•				

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A(J)1		
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 24/26 Rpt: 27/63	
2	FILER NAME Williams, Sta	aci (The Honorable)		3 Filer ID (Ethics Commission Filers) 00069606	
4	Date 05/12/2025			7 Amount of Contribution (\$) \$100.00	
8	Contributor's I	Principal Occupation	9 Contributor's Job Title		
	Attorney		Attorney		
10		employer/law firm & Associates	11 Law firm of contributor's sp	ouse (if any)	
12	If contributor is	s a child, law firm of parent(s) (if any)			
	Date	Full name of contributor	:)	Amount of Contribution (\$)	
	05/20/2025	The Farmer Law Group,PLLC Contributor address; City; State; Zip Code Dallas, TX 75208		\$1,000.00	
		Contributor's Job Title			
	Contributor's	employer/law firm	Law firm of contributor's sp	ouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if any)	1		
	Date	Full name of contributor out-of-state PAC (ID#	:)	Amount of Contribution (\$)	
	05/20/2025	The Law Offices of Domingo Garcia Contributor address; City; State; Zip Code Dallas, TX 75247		\$3,000.00	
	Contributor's I	Principal Occupation	Contributor's Job Title		
Contributor's employer/law firm			Law firm of contributor's sp	ouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1	
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 25/26 Rpt: 28/63	
2	FILER NAME Williams, Sta	aci (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069606	
4	Date 05/20/2025	5 Full name of contributor out-of-state PAC (ID#:			7	Amount of Contribution (\$) \$5,000.00	
L		Dallas, TX 75202		1			
8	Contributor's I	tributor's Principal Occupation 9 Contributor's Job Title					
10 Contributor's employer/law firm 11 Law firm of contributor's s					ous	se (if any)	
12	! If contributor is	s a child, law firm of parent(s) (i	f any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)	
	06/30/2025	Tillotson, Jeffrey Contributor address; City;	<u> </u>			\$5,000.00	
		Dallas, TX 75209					
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Attorney			Attorney			
	Contributor's 6	employer/law firm		Law firm of contributor's spouse (if any)			
	If contributor is	s a child, law firm of parent(s) (i	f any)	1			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)	
	05/20/2025	Turner, Andrew	out of state 1710 (IBM.			\$250.00	
		Contributor address; City; Dallas, TX 75214	State; Zip Code				
-	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>		
	Mediator			Mediator			
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)	
	Turner ADR						
	If contributor is	s a child, law firm of parent(s) (i	f any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 26/26 Rpt: 29/63
2	FILER NAME Williams, Sta	aci (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069606
4	Date 05/21/2025	oate 5 Full name of contributor out-of-state PAC (ID#:			7	Amount of Contribution (\$) \$1,000.00
		Celina, TX 75009				
8		butor's Principal Occupation 9 Contributor's Job Title				
	Attorney Attorney					
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)	<u>I</u>		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/16/2025	Wishnew, Dave Contributor address; City;	State; Zip Code			\$5,000.00
		Dallas, TX 75201				
		Principal Occupation		Contributor's Job Title		
	Attorney			Atorney		and the sun of
		employer/law firm shnew & Lang PLLC		Law firm of contributor's sp	ous	se (II any)
		s a child, law firm of parent(s) (i	f any)			
	ii dontributor ii	o a orma, iaw iirii or paroni(o) (i				
=	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/16/2025	Wolf, Marquette (Mr.)	_			\$1,000.00
		Contributor address; City; Mesquite, TX 75150	State; Zip Code		•	
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Ted Lyon &	Associates				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
<u> </u>	Total name - Oct - 1 1 Er	
1	Total pages Schedule F1: Sch: 1/23 Rpt: 30/63	2 FILER NAME Williams, Staci (The Honorable) 3 Filer ID (Ethics Commission Filers) 00069606
4	Date	5 Payee name
	03/01/2025	ABM Parking at GAB
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.00	600 Commerce Street
		Dallas, TX 75201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Parking for Court Coordinator
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_		
	Date	Payee name
	02/20/2025	ABM Parking at GAB
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.00	600 Commerce Street
		Dallas, TX 75201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Parking for Court Coordinator
		Paiking for Court Coordinator
<u> </u>	Complete ONU V if allow	Condidate/Officeholder come
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
-	Data	Davisa nama
	Date	Payee name
	06/17/2025	ADOBE, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$14.06	151 South Almaden Blvd
		San Jose, CA 95110
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Monthly subscription
_	Operation Children	Overfild to 100% or helder a company of the company
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	onponditure to benefit 0/01	•

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
l	Sch: 2/23 Rpt: 31/63	Williams, Staci (The Honorable) 00069606	
4	Date	5 Payee name	_
	06/02/2025	AIDS Walk South Dallas	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$2,000.00	701 Commerce St., #701	
l			
l		Dallas, TX 75202	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
l	OF EXPENDITURE	Advertising Expense	
l		Check if Austin, TX, officeholder living expense Sponsorship	
l		Sponsorship	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
F	Date	Payee name	=
l	01/30/2025	Ace Parking	
⊢	Amount (\$)	Payee address; City; State; Zip Code	_
l	\$12.00	200 Crescent Court	
l	412.00	200 Grossoft Gourt	
l		Dallas, TX 75201	
⊢	PURPOSE		_
l	OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T.	
l	EXPENDITURE	Check if Austin, TX, officeholder living expense	
l		Parking	
L			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
┡	· 		_
l	Date	Payee name	
L	03/06/2025	ActBlue	
l	Amount (\$)	Payee address; City; State; Zip Code	
l	\$185.23	P.O Box 441146	
l			
L		Sommerville, MA 02144	
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taxes Complete Schedule T	
l	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
l		On-line fundraising Expense	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/Ol	1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Co Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment			Legal Services	s Expense	Salaries/M		e /Contract Labor		OTHER (enter a	strict a category not listed above)
	Credit Card Payment			The Instruction G	uide explains	how to co	mple	ete this form.			
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission Filers)
	Sch: 3/23 Rpt: 32/63		Williams, Sta	aci (The Honoi	able)					00069606	
4	Date	5	Payee name								
	06/26/2025		Albertson's								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de				
	\$24.39		427 E Farm	to Market 138	2						
			Cedar Hill, T	X 75104							
8	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sch	edule)	(b)	Description			
	OF	 ` ´		age Expense	the top of this sch	edule)	` ,		outsi	de of Texas. Con	nplete Schedule T.
	EXPENDITURE							—		officeholder livin	
								• •	vec	lding celebr	ations court free
								weddings.			
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	C	Office sou	ght			Office h	eld
	experiorare to benefit C/O										
	Date		Payee name								
	06/30/2025		Anedot								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de				
	\$2,452.10		1340 Poydra	as Street							
			Suite 1770								
			New Orleans	s, LA 70112							
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sch	edule)	(b)	Description			
	OF EXPENDITURE			- -undraising Ex		,		<u></u>			nplete Schedule T.
	LXI LINDITORL							—		officeholder livin	
								On line fundr	ais	ang lees an	edol
_	Computate ONLY if diseast	Ļ	Canadidate (Offic			Off: 0.0 0.011				Office h	ald
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	enoluei name	(Office sou	gnı			Office fi	eiu
_		_									
	Date		Payee name								
	05/12/2025		Bankem Prir								
	Amount (\$)		Payee addres		State;	Zip Co	de				
	\$81.19		2357 S. Coll	ins St.							
			Arlington, T	X 76014							
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Printing Exp	ense				므			nplete Schedule T.
								Pushcards	, IA,	officeholder livin	g expense
								. acrioaras			
\vdash	Complete ONLY if direct	<u> </u>	Candidate/Offic	ceholder name		Office sou	aht			Office h	eld
	expenditure to benefit C/OI					55 50u	a			000 11	
l											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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 3 Filer ID (Ethics Commission Filers)
	Sch: 4/23 Rpt: 33/63	Williams, Staci (The Honorable) 00069606
4	Date	5 Payee name
	06/05/2025	Bankem Printing
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$129.90	2357 S. Collins St.
		Arlington, TX 76014
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Pushcards
		i usilcalus
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Data	
	Date	Payee name
	01/24/2025	Cathedral Garage Ltd.
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	1726 N. Pearl Street
		Dallas, TX 75201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Parking
		Faining
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Data	
	Date	Payee name
	01/22/2025	Cindi's New York Deli
	Amount (\$)	Payee address; City; State; Zip Code
	\$42.92	306 S. Houston Street
		Dallas, TX 75202
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense Lunch with Staff
		Lunch with Stan
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 5/23 Rpt: 34/63	Williams, Staci (The Honorable)	00069606
4	Date	5 Payee name	
	01/13/2025	Constant Contact	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$271.84	1601 Tapelo Rd.	
		Waltham, MA 02451	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		outside of Texas. Complete Schedule T.
		Monthly Sub:	n, TX, officeholder living expense
		monany casa	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
_	Date	Payee name	
	03/13/2025	Constant Contact	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$543.68	1601 Tapelo Rd.	
		•	
		Waltham, MA 02451	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	outside of Texas. Complete Schedule T.
	EXPENDITORE	, 	, TX, officeholder living expense
		Monthly subs	scription (2 months)
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	•	Office field
_	Date	Davis norms	
	04/13/2025	Payee name Constant Contact	
	Amount (\$) \$271.84	Payee address; City; State; Zip Code 1601 Tapelo Rd.	
	Ψ211.04	1001 Tapelo Na.	
		Waltham, MA 02451	
	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin	, TX, officeholder living expense
		Monthly subs	scription
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experientare to benefit G/OI	•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers))
	Sch: 6/23 Rpt: 35/63	Williams, Staci (The Honorable) 00069606	
4	Date	5 Payee name	
	05/01/2025	Constant Contact	
6	Amount (\$) \$5.34	7 Payee address; City; State; Zip Code 1601 Tapelo Rd.	
		Waltham, MA 02451	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Purchase of Image	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	05/11/2025	Constant Contact	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$5.34	1601 Tapelo Rd.	
		Waltham, MA 02451	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Purchase of Image	
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	05/13/2025	Constant Contact	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$271.84	1601 Tapelo Rd.	
		Waltham, MA 02451	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Monthly subscription	
		Worthing Subscription	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee 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 3 Filer ID (Ethics Commission Filers)
	Sch: 7/23 Rpt: 36/63	Williams, Staci (The Honorable) 00069606
4	Date	5 Payee name
	05/20/2025	Constant Contact
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5.34	1601 Tapelo Rd.
		Waltham, MA 02451
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Purchase of image
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	05/29/2025	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.34	1601 Tapelo Rd.
		Waltham, MA 02451
	DUDDOGE	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Purchase image
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/06/2025	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.34	1601 Tapelo Rd.
		Waltham, MA 02451
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Purchase of image
	Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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 3 Filer ID (Ethics Commission Filers)
	Sch: 8/23 Rpt: 37/63	Williams, Staci (The Honorable) 00069606
4	Date	5 Payee name
	06/06/2025	Constant Contact
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5.34	1601 Tapelo Rd.
		Waltham, MA 02451
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Purchase of image
		T dionase of image
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	Complete ONLY if direct expenditure to benefit C/OI	the state of the s
⊨	Date	Payee name
	06/05/2025	Constant Contact
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.34	1601 Tapelo Rd.
		Waltham, MA 02451
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	2/11/2/10/12	Check if Austin, TX, officeholder living expense
		Purchase of image
L	2	
l	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	06/13/2025	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$298.48	1601 Tapelo Rd.
		Waltham, MA 02451
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Office Overhead/Rental Expense
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
1		Monthly Subscription
L	0 1. 0	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u> </u>		
_		

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

sement Solicitation/Fundraising Expense
pense Transportation Equipment & Related Expense
Travel in District
Travel Out of District

OTHER (enter a category not listed above)

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/23 Rpt: 38/63	Williams, Staci (The Honorable) 00069606
4	Date	5 Payee name
	05/20/2025	Culpepper Cattle Compay
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,810.15	3309 Elm Street
	!	Suite 100
	!	Dallas, TX 75226
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	!	Fundraiser expense
	!	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/09/2025	Dollar Tree
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.36	435 E FM36
	!	
		Cedar Hill, TX 75104
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	!	Decorations for office
	!	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/30/2025	EAVentures
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	6595 Roswell Road
	!	Suite G
	!	Atlanta , GA 30328
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	!	Social Media Management
	!	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	Ⅎ

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Ļ		
1	Total pages Schedule F1: Sch: 10/23 Rpt: 39/63	2 FILER NAME Williams, Staci (The Honorable) 3 Filer ID (Ethics Commission Filers) 00069606
4	Date	5 Payee name
	05/27/2025	Edible Arrangements
6	Amount (\$) \$100.80	7 Payee address; City; State; Zip Code 980 Hammond Drive
		Atlanta, GA 30328
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Arrangement sent to constituent for outstanding achievement
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/26/2025	Facebook
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.46	1 Hacker Way
		Menlo Park, CA 94025
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		FB advertisement for wedding
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/15/2025	Federal Express
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.55	3965 Airways, Module G
		Memphis, TN 38116
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Overnight service
	Compulate ONU V if allow :	Condidate Office helder name Office sought
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Co

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	l Committee 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 3 Filer ID (Ethics Commission Filers)
	Sch: 11/23 Rpt: 40/63	Williams, Staci (The Honorable) 00069606
4	Date	5 Payee name
	01/28/2025	Hyatt Regency Dallas
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.00	300 Reunion Blvd
		Dallas, TX 75207
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Parking for event
_	Operation Children	On didn't 10 ff a halden name
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/10/2025	Michael's #88 Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.13	5301 Beltline Road
		Dallas, TX 75251
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Stationary
		- Ctationally
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	<u> </u>	
	Date	Payee name
	06/02/2025	Michael's #88 Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.53	5301 Beltline Road
		Dallas, TX 75251
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		stationary
_	Operation ONE V. C. P.	Ora didata (Office hadden grown
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (party a category not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
4. Tatalmana C. I. I. T.			
1 Total pages Schedule F1:			
Sch: 12/23 Rpt: 41/63	Williams, Staci (The Honorable) 00069606		
4 Date	5 Payee name		
06/03/2025	Michael's #88 Store		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$69.79	5301 Beltline Road		
Ψ03.73	3001 Belline Rodu		
	Dallas, TX 75251		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Solicitation/Fundraising Expense		
	Check if Austin, TX, officeholder living expense		
	Stationary		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
experiorare to benefit C/O			
Date	Payee name		
06/17/2025	Mid-Cities Links		
Amount (\$)	Payee address; City; State; Zip Code		
\$400.00	P.O. Box 631866		
* *******			
	In time TV 75002		
	Irving , TX 75063		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.		
	Candidate/Officeholder/Political Committee		
	Herets for furfulaiser		
Commission ONLL V if discost	Constitute / Office helder mores Office accords		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
03/23/2025	New Mount Zion M.B.C		
Amount (\$)	Payee address; City; State; Zip Code		
\$79.00	9550 Shepherd Road		
	Dallas, TX 75243		
DUDDOCE			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.		
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	79th Anniversary Contribution		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OH		

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Legal Services

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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 3 Filer ID (Ethics Commission Filers)
	Sch: 13/23 Rpt: 42/63	Williams, Staci (The Honorable) 00069606
4	Date	5 Payee name
	01/29/2025	Ngozi's Fashio
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$54.11	3731 W. Camp Wisdom
		Dallas, TX 75237
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Gift for Volunteer
		Cite for Volunteer
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	03/23/2025	Office Depot #2220
_	Amount (\$)	Payee address; City; State; Zip Code
	\$47.02	8317 Westchester Drive
	Ψ11.02	OOT Westerlester Brive
		Dallas, TX 75225
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Supplies for fundraiser
		Саррио тол тапалано.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/02/2025	Office Max/Office Depot
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.64	4619 S Cooper St
	•	
		Arlington, TX 76017
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Paper for petitions
		Γαρεί 101 μειιιίοπο
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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 3 Filer ID (Ethics Commission Filers)
	Sch: 14/23 Rpt: 43/63	Williams, Staci (The Honorable) 00069606
4	Date	5 Payee name
	06/16/2025	Otis Hotel
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$329.44	1901
		Austin, TX 78705
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Hotel for UT LAW Seminar
		Hoteriol of LAW Seminal
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
H	Date	Payee name
	06/12/2025	Pei Wei Asian Kitchen
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.03	5715 Lemmon Ave.
	Ψ10.00	#3
		Dallas, TX 75204
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taxon Complete Schedule T
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Dinner
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/31/2025	Plains Capital Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$140.00	P.O. Box 271
		Lubbock, TX 79408
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Overdraft fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 15/23 Rpt: 44/63	Williams, Staci (The Honorable)	00069606
4	Date	5 Payee name	
	01/06/2025	Plains Capital Bank	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$5,000.00	P.O. Box 271	
		Lubbock, TX 79408	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	/ Accounting/Banking	outside of Texas. Complete Schedule T. TX, officeholder living expense
		Deposit Retur	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	Н	
F	Date	Payee name	
	01/06/2025	Plains Capital Bank	
H	Amount (\$)	Payee address; City; State; Zip Code	
	\$17.00	P.O. Box 271	
		Lubbock, TX 79408	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel of	outside of Texas. Complete Schedule T.
		,	TX, officeholder living expense to Deposit Return Item
		rees related	o Deposit Neturn item
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
F	Date	Payee name	
	01/13/2025	Plains Capital Bank	
H	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,000.00	P.O. Box 271	
		Lubbock, TX 79408	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel of	outside of Texas. Complete Schedule T.
		Check if Austin, Debit Memo F	TX, officeholder living expense
		Depit Memor	
-	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		-

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 16/23 Rpt: 45/63	Williams, Staci (The Honorable) 00069606	
4	Date	5 Payee name	
	01/31/2025	Plains Capital Bank	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$10.00	P.O. Box 271	
		Lubbock, TX 79408	
8	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Monthly Service Charge	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experialiture to beliefit C/OI	<u>'</u>	
	Date	Payee name	
	02/28/2025	Plains Capital Bank	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$40.00	P.O. Box 271	
		Lubbock, TX 79408	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
	LXI LINDITORE	Check if Austin, TX, officeholder living expense	
		Overdraft fees	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·	
_	Data		
	Date 01/30/2025	Payee name Plains Capital Bank	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$10.00	P.O. Box 271	
		Lubbock, TX 79408	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Monthly Service Charge	
		, , , , , , , , , , , , , , , , , , , ,	
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OH		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/23 Rpt: 46/63	Williams, Staci (The Honorable) 00069606
4	Date	5 Payee name
	01/21/2025	Southwest Media Marketing
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	204 E. Pleasant Run
		Lancaster, TX 75146
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Advertisement
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/02/2025	Southwest Media Marketing
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,000.00	204 E. Pleasant Run
		Lancaster, TX 75146
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Balance for advertising
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payso nama
	06/06/2025	Payee name Town Talk Foods
	Amount (\$) \$2.15	Payee address; City; State; Zip Code 2319 S. Collins
	Ψ2.10	2010 0. 0011110
		Arlington , TX 76014
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Coffee Cups
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientale to beliefft C/OI	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 18/23 Rpt: 47/63	Williams, Staci (The Honorable) 00069606
4	Date	5 Payee name
	06/26/2025	Trader Joes
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$29.20	7939 Walnut Hill
		Dallas, TX 75230
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Flowers for Wedding Celebrations 6/30
		1 lowers for Wedding Gelebrations 0/30
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash	Date	Dayso name
	01/14/2025	Payee name UPS Store #4031
	Amount (\$)	Payee address; City; State; Zip Code
	\$30.19	445 E FM
		Suite 3
		Cedar Hill, TX 75104
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Overnight Mail payment to vendor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
F	Date	Payee name
	03/24/2025	USPS
	Amount (\$)	Payee address; City; State; Zip Code
	\$43.80	401 Tom Landry HWY
		Dallas, TX 75260
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
	- -	Check if Austin, TX, officeholder living expense Stamps
		Stamps
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ertising Expense Event Expense Loan Repayment/Reimbu

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

Fees Office Ove Food/Beverage Expense Polling Ex Gift/Awards/Memorials Expense Printing Ex Legal Services Salaries/M

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	d Committee 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 3 Filer ID (Ethics Commission Filers)
L	Sch: 19/23 Rpt: 48/63	Williams, Staci (The Honorable) 00069606
4	Date	5 Payee name
	05/15/2025	USPS
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$14.60	401 Tom Landry HWY
		Dallas, TX 75260
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Stamps
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
⊨	Date	Davies same
	05/19/2025	Payee name USPS
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$29.20	401 Tom Landry HWY
		Dallas, TX 75260
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Check if Austin, TX, officeholder living expense
		Stamps Stamps
L	Commiste ONII V if diseast	Condidate/Officeholder neme
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	06/02/2025	USPS
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.48	401 Tom Landry HWY
l		
		Dallas, TX 75260
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Stamps
L		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L	experiulture to beliefft C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
tising Expense Event Expense Loan Repayment/Reimbu

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 20/23 Rpt: 49/63	Williams, Staci (The Honorable) 00069606
4	Date	5 Payee name
	06/03/2025	USPS
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$43.80	401 Tom Landry HWY
		Dallas, TX 75260
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Stamps
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/09/2025	VONLANE
	Amount (\$)	Payee address; City; State; Zip Code
	\$270.00	6310 Lemmon Ave.
		Dallas, TX 75209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense Bus fare to U T LAW Seminar in Austin
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/12/2025	VONLANE
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	6310 Lemmon Ave.
		Dallas, TX 75209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Charge for Change time of trip to UT LAW CLE
		Charge to Charge time of the to of EAW CLE
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	d Committee 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 3 Filer ID (Ethics Commission Filers)
	Sch: 21/23 Rpt: 50/63	Williams, Staci (The Honorable) 00069606
4	Date	5 Payee name
	06/27/2025	WAL-MART
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$14.70	951 W. Belt Line Rd.
		DeSoto, TX 75115
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Ingredients for wedding punch
Ļ		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to benefit 6/6/	
	Date	Payee name
	01/27/2025	WPMaven
	Amount (\$)	Payee address; City; State; Zip Code
	\$490.00	1500 N. 19th Street
		Monroe, LA 71201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Website maintenance
		Website maintenance
L	Operation ONE V if dispert	Our fide to 10 ff as held
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	05/23/2025	WPMaven
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,190.00	1500 N. 19th Street
		Monroe, LA 71201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	LAFLINDITORL	Check if Austin, TX, officeholder living expense
		Website and social media updates
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientare to beliefft C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
	,
1 Total pages Schedule F1:	
Sch: 22/23 Rpt: 51/63	Williams, Staci (The Honorable) 00069606
4 Date	5 Payee name
06/04/2025	WPMaven
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$300.00	1500 N. 19th Street
Ψ000.00	1500 N. 15th Succt
	Monroe, LA 71201
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Creation of advertisements
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Oi	
Date	Payee name
01/23/2025	Wicked Butcher
Amount (\$)	Payee address; City; State; Zip Code
\$68.00	1717 Main Street
400.00	
	D. II TV 75004
	Dallas, TX 75201
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Lunch with supporter
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/21/2025	Women Who Steam
Amount (\$)	Payee address; City; State; Zip Code
\$537.00	P.O.Box 191003
	Dallas, TX 75219-1003
DUDDOCE	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Program contribution
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Committee	Food/Beverage Expense Gift/Awards/Memorials Expens Legal Services The Instruction Guide ex	Salaries	Expense /Wages/Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1:					3	Filer ID	(Ethics Commission Filers)
	Sch: 23/23 Rpt: 52/63	Williams,	Staci (The Honorable)				00069606	
4	Date	5 Payee nar						
	05/09/2025	ZOOM.U	S					
6	Amount (\$)	7 Payee add		State; Zip C	ode			
	\$170.50	55 Almad	len Boulevard					
		6th Floor						
		San Jose	, CA 95113					
8	PURPOSE OF	(a) Category	(See Categories listed at the top of	of this schedule)	(b) Description			
	EXPENDITURE	Office Ov	erhead/Rental Expense	Э			de of Texas. Com officeholder living	
					Subscription		onicendider living	ехрепас
9	Complete ONLY if direct expenditure to benefit C/Ol		Officeholder name	Office so	ught		Office he	eld

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E			Transportation Equipment & Travel in District Travel Out of District OTHER (enter a category no		
L			The Instruction Guide explains	how to co	omplete this form.				
1	Total pages Schedule G:	2 FILER NAME				3	Filer ID (Ethics Cor	mmission Filers)	
	Sch: 1/10 Rpt: 53/63	Williams, S	taci (The Honorable)				00069606		
4	Date	5 Payee name				•			
	02/03/2025	23rd Senat	orial Tejano Democratts						
6	Amount (\$)	7 Payee addre	ss; City; State	; Zip Co	ode				
	\$20.00	1414 N. Wa	ashington						
	Reimbursement from								
	X political contributions intended	Dallas, TX	75204						
8	PURPOSE	(a) Category (s	ee Categories listed at the top of this sch	nedule)	(b) Description	=	eck if travel outside of Texas	•	
	OF EXPENDITURE	Advertising	Expense		l L	Ch	eck if Austin, TX, officeholde	r living expense	
					Membership				
9	Complete <u>ONLY</u> if direct expenditure to benefit	Candidate/Office	holder name		Office sought		Office held	d	
	C/OH								
F	Date	Payee name							
	02/27/2025	Arts District							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$5.00								
	Reimbursement from								
	X political contributions intended	Dallas, TX	75201						
	PURPOSE	Category (s	ee Categories listed at the top of this sch	nedule)	Description	Ch	eck if travel outside of Texas	c. Complete Schedule T.	
	OF EXPENDITURE	Travel In Di	strict		[Ch	eck if Austin, TX, officeholde	r living expense	
					Parking				
	Complete ONLY if direct expenditure to benefit	Candidate/Office	holder name		Office sought		Office held	d	
	C/OH								
H	Date	Payee name							
	03/03/2025	1 -	ness Directory						
\vdash	Amount (\$)	Payee addre	-	; Zip Co	ode				
	\$1,000.00	P.O. Box 8		, 30	•				
	Reimbursement from								
	y political contributions intended	Richardson	, TX 75083						
	PURPOSE	Category (s	ee Categories listed at the top of this sch	nedule)	Description	Ch	eck if travel outside of Texas	s. Complete Schedule T.	
	OF EXPENDITURE	Advertising	Expense			_	eck if Austin, TX, officeholde	r living expense	
	-				Email Advertising	g			
	Complete ONLY if direct expenditure to benefit	Candidate/Office	holder name		Office sought		Office held	d	
L	C/OH								

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

		g Expense Travel Out of District s/Wages/Contract Labor OTHER (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	
Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/10 Rpt: 54/63	Williams, Staci (The Honorable)	00069606
Date	5 Payee name	·
03/20/2025	Cates Legal Group	
Amount (\$)	7 Pavee address: City: State: 7in (Code
` ,		
	Lower Survey Survey	
X political contributions intended	San Antonio , TX 78259	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
-	Legal Services	Check if Austin, TX, officeholder living expense
EXPENDITORE		Legal Services
Complete ONLY if direct	Candidate/Officeholder name	Office sought Office held
expenditure to benefit C/OH		
Date	Payee name	
05/19/2025	Cates Legal Group	
Amount (\$)	Payee address; City; State; Zip 0	Code
\$1,500.00	20210 Silver Stream	
Reimbursement from		
X political contributions intended	San Antonio , TX 78259	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Legal Services	Check if Austin, TX, officeholder living expense
EXPENDITURE	-	Legal Services
Complete ONLY if direct	Candidate/Officeholder name	Office sought Office held
expenditure to benefit		
С/ОП		
Date	Payee name	
02/23/2025	Cates Legal Group	
Amount (\$)	Payee address; City; State; Zip (Code
\$1,500.00	20210 Silver Stream	
Reimbursement from		
X political contributions intended	San Antonio , TX 78259	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description
	Legal Services	Check if Austin, TX, officeholder living expense
		Legal Services
•	Candidate/Officeholder name	Office sought Office held
expenditure to benefit		
	Candidate/Officeholder/Political Credit Card Payment Total pages Schedule G: Sch: 2/10 Rpt: 54/63 Date 03/20/2025 Amount (\$) \$1,500.00 X Reimbursement from political contributions intended PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 05/19/2025 Amount (\$) \$1,500.00 X Reimbursement from political contributions intended PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 02/23/2025 Amount (\$) \$1,500.00 X Reimbursement from political contributions intended PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 02/23/2025 Amount (\$) \$1,500.00 X Reimbursement from political contributions intended PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee Credit Card Payment The Instruction Guide explains how to Total pages Schedule G: Sch: 2/10 Rpt: 54/63 Date Sch: 2/10 Rpt: 54/63 Payee name Cates Legal Group Amount (\$) Schizological contributions intended contributions intended contributions Schizological Contributions Schizological Contributions Schizological Contributions Schizological Contributions Schizological Contributions intended contributions contributions intended contributions intended contributions intended contributions intended contributions contributions intended contributions contr

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E			Travel in District Travel Out of Di	
	Credit Card F dyment		The Instruction Guide explains	how to co	omplete this form.			
1	Total pages Schedule G:	2 FILER NAMI	Ē			3	Filer ID (E	Ethics Commission Filers)
	Sch: 3/10 Rpt: 55/63	Williams, S	taci (The Honorable)				00069606	
4	Date	5 Payee name	·					
•	04/15/2025	Cates Lega						
6	Amount (\$)	7 Payee addre	ess; City; State;	Zip Co	ode			
	\$1,500.00	20210 Silve	er Stream					
	Reimbursement from							
	X political contributions intended	San Antoni	o , TX 78259					
8	PURPOSE	(a) Category (s	see Categories listed at the top of this sch	edule)	(b) Description	Che	eck if travel outs	ide of Texas. Complete Schedule T.
	OF EXPENDITURE	Legal Servi	ices			Che	eck if Austin, TX	, officeholder living expense
	EXPENDITORE				Legal Services			
9	Complete ONLY if direct expenditure to benefit	L Candidate/Office	holder name		Office sought		(Office held
	C/OH							
	Date	Payee name	<u> </u>					
	02/13/2025	Costco 063						
_	Amount (\$)	Payee addre	ess; City; State;	Zip Co	nde			
	\$85.24	250 HWY 6	•	Zip Ct	oue			
	Ф05.24	250 HWY C) (
	Reimbursement from political contributions							
	intended	Duncanville	e, TX 75137					
	PURPOSE	Category (S	see Categories listed at the top of this sch	edule)	Description	=		ide of Texas. Complete Schedule T.
	OF EXPENDITURE	Food/Beve	rage Expense		l L			, officeholder living expense
					Food Beverage f	for W	Vedding Ev	rent
	Complete ONLY if direct	Candidate/Office	holder name		Office sought		C	Office held
	expenditure to benefit C/OH							
	Date	Payee name						
	06/26/2025	Costco 063	36					
	Amount (\$)	Payee addre	ess; City; State;	Zip Co	ode			
	\$70.05	250 HWY 6	67					
	Reimbursement from							
	X political contributions intended	Duncanville	e, TX 75137					
	PURPOSE	Category (S	see Categories listed at the top of this sch	edule)	Description	Che	eck if travel outs	ide of Texas. Complete Schedule T.
	OF EXPENDITURE	Food/Beve	rage Expense			Che	eck if Austin, TX	, officeholder living expense
	LAFENDITORE				Food for Weddin	ıg Εν	vent	
	Complete ONLY if direct	Candidate/Office	holder name		Office sought			Office held
	expenditure to benefit				-			
	C/OH							

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		ravel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G: Sch: 4/10 Rpt: 56/63	FILER NAME Williams, Staci (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069606
4	Date	5 Payee name	<u> </u>
	02/25/2025	Dallas Chapter of Jack & Jill Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$150.00	216 Sewrary Lane	
	Reimbursement from political contributions intended	Sunnyvale, TX 75182	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
		Tic	ket for Beautillion
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	Date	Payee name	
	04/04/2025	Dallas County Democratic Party	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	1414 N. Washington	
	Reimbursement from political contributions intended	Dallas, TX 75202	
	PURPOSE OF	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
		Sp	onsorship
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	Date	Payee name	
	02/20/2025	Delta Sigma Theta	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$350.00	2525 MLK, Jr.	
	X Reimbursement from political contributions intended	Dallas, TX 75215	
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
		Ad	vertisement for Scholarship Jabberwocky
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

SCHEDULE G

Solicitation/Fundraising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Polling Ex se Printing Ex		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
	Credit Card Payment	The Instruction Guide e	xplains how to co	mplete this form.				
1	Total pages Schedule G:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
	Sch: 5/10 Rpt: 57/63	Williams, Staci (The Honorable)			00069606			
4	Date	5 Payee name						
	03/20/2025	Design Expediting Service						
6	Amount (\$)	7 Payee address; City;	State; Zip Co	de				
	\$1,483.04	4535 Simonton Road						
١.	Reimbursement from							
l	x political contributions intended	Farmers Branch, TX 75244						
8	PURPOSE	(a) Category (See Categories listed at the top of	of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	Office Overhead/Rental Expense	е		Check if Austin, TX, officeholder living expense			
					and storage of office furniture due to nd delayed repairs			
9	Complete ONLY if direct	Candidate/Officeholder name		Office sought	Office held			
	expenditure to benefit C/OH							
	Date	Payee name						
	03/17/2025	Fancy Hat Tea						
	Amount (\$)	Payee address; City;	State; Zip Co	de				
	\$44.52							
		200 L. Carr Lane						
	X Reimbursement from political contributions							
,	intended	Duncanville, TX 75116						
	PURPOSE OF	Category (See Categories listed at the top of	of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Advertising Expense			Check if Austin, TX, officeholder living expense			
				Ticket for event				
	Complete <u>ONLY</u> if direct expenditure to benefit	Candidate/Officeholder name		Office sought	Office held			
	C/OH							
	D-t-							
	Date	Payee name						
	05/13/2025	Gloria's Latin Cuisine						
	Amount (\$)	Payee address; City;	State; Zip Co	de				
	\$52.00	320 W. Las colinas Blvd.						
١,	Reimbursement from							
	x political contributions intended	Irving, TX 75039						
	PURPOSE	Category (See Categories listed at the top of	of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	Food/Beverage Expense			Check if Austin, TX, officeholder living expense			
	·			Campaign Dinner	Meeting			
L								
		Candidate/Officeholder name		Office sought	Office held			
	expenditure to benefit C/OH							

SCHEDULE **G**

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees . Food/Beverage Expense Gift/Awards/Memorials Expense	Office Over Polling Ex Printing E: Salaries/V	xpense Vages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 6/10 Rpt: 58/63		Williams, Staci (The Honorable)				00069606
4	Date	5	Payee name				
	04/28/2025		Hilton Anatole Parking				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	ode		
	\$16.00		2201 N. Stemmons Fwy				
	Reimbursement from political contributions intended		Dallas, TX 75207				
8	PURPOSE	(a)	Category (See Categories listed at the top of this sched	dule)	(b) Description	CI	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	``	Travel In District			CI	neck if Austin, TX, officeholder living expense
	EXPENDITURE				Parking		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held
	Date		Payee name				
	05/14/2025		Irving Convention Center				
	Amount (\$)	┢	Payee address; City; State;	Zip Co	ode		
	\$7.80		500 W.Las Colinas Road	p 00			
	X Reimbursement from political contributions intended		Irving , TX 75039				
	PURPOSE		Category (See Categories listed at the top of this sched	dule)	Description	CI	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Travel In District			CI	neck if Austin, TX, officeholder living expense
	EXI ENDITORE				Parking		
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held
	Date		Payee name				
	03/21/2025		Michael's 3765				
_	Amount (\$)	┢		Zip Co	nde		
	\$31.79		751 HWY 67	p 00			
			7017777 07				
	X Reimbursement from political contributions intended		Cedar Hill, TX 75104				
	PURPOSE		Category (See Categories listed at the top of this sched	dule)	Description	=	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Solicitation/Fundraising Expense		L	CI	neck if Austin, TX, officeholder living expense
					Stationary		
L							
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought		Office held

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Travel in Distr te Travel Out of 6/Contract Labor OTHER (ente

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.		OTHER (enter a category not listed above)
1	Total pages Schedule G:	Priler Name	3	Filer ID (Ethics Commission Filers)
	Sch: 7/10 Rpt: 59/63	Williams, Staci (The Honorable)		00069606
4	Date	Payee name		
	05/08/2025	Michael's 3765		
6	Amount (\$)	Payee address; City; State; Zip Code		
	\$24.33	751 HWY 67		
	Reimbursement from			
	X political contributions intended	Cedar Hill, TX 75104		
8	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description	Che	eck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Solicitation/Fundraising Expense	Che	eck if Austin, TX, officeholder living expense
		Stationary		
9	Complete ONLY if direct expenditure to benefit	andidate/Officeholder name Office sought		Office held
	C/OH			
	Date	Davida nama		
	02/07/2025	Payee name South Dallas & Professional Women's Club		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$650.00	P.O. Box 764587		
	Reimbursement from political contributions			
	intended	Dallas, TX 75376		
	PURPOSE OF	Category (See Categories listed at the top of this schedule) Description		eck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense	ш	eck if Austin, TX, officeholder living expense
		Advertisement a	and to	ckets for luncheon
	Complete <u>ONLY</u> if direct expenditure to benefit	andidate/Officeholder name Office sought		Office held
	C/OH			
	Date	Payee name		
	01/17/2025	Texas Center for the Judiciary		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$75.00	1210 San Antonio Street		
	Reimbursement from			
	x political contributions intended	Austin, TX 78701		
	PURPOSE	Category (See Categories listed at the top of this schedule) Description	Che	eck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Office Overhead/Rental Expense	Che	eck if Austin, TX, officeholder living expense
	LAFENDITURE	Cost for court c	oordir	nator
	Complete ONLY if direct expenditure to benefit C/OH	andidate/Officeholder name Office sought		Office held

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E			Travel in D Travel Out			
	Credit Card Payment		The Instruction Guide explains	how to co	mplete this form.					
1	Total pages Schedule G:	2 FILER NAME				3	Filer ID	(Ethics Commission Filers)		
	Sch: 8/10 Rpt: 60/63	Williams, S	taci (The Honorable)				000696	606		
4	Date	5 Payee name)							
	05/14/2025	Texas Cent	ter for the Judiciary							
6	Amount (\$)	7 Payee addre	ess; City; State;	Zip Co	de					
	\$75.00	1210 San <i>A</i>	Antonio Street							
	Reimbursement from									
	X political contributions intended	Austin, TX	78701							
8	PURPOSE	(a) Category (s	See Categories listed at the top of this sche	edule)	(b) Description	Ch	eck if travel	l outside of Texas. Complete Schedule	Г.	
	OF EXPENDITURE	Office Over	rhead/Rental Expense			Ch	eck if Austir	n, TX, officeholder living expense		
	LA LIBITORE				Registration for 3	Judg	Judge's training			
9	Complete ONLY if direct expenditure to benefit	Candidate/Office	holder name		Office sought			Office held		
	C/OH									
	Date	Payee name							=	
	02/03/2025	The People								
	Amount (\$)	Payee addre		Zip Co	ide.				_	
	\$200.00									
	Reimbursement from	001 11.00	igolia Lario							
	political contributions intended	Desoto, TX	75115							
_	PURPOSE		Gee Categories listed at the top of this sche	edule)	Description	☐ Ch	eck if travel	I outside of Texas. Complete Schedule	Г.	
	OF		ns/Donations Made By	cuaicj		=		n, TX, officeholder living expense		
	EXPENDITURE		Officeholder/Political Comm	ittee	Tickets					
		Candidate/Office	holder name		Office sought			Office held		
	expenditure to benefit C/OH									
	Data								=	
	Date 02/10/2025	Payee name Towne Parl								
				7:n Ca	da				_	
	Amount (\$) \$38.97	Payee addre 12720 Meri		Zip Co	ae					
		12720 Men	t Di.							
	X Reimbursement from political contributions intended	Dallas, TX	75251							
	PURPOSE	Category (s	See Categories listed at the top of this sch	edule)	Description	Ch	eck if travel	l outside of Texas. Complete Schedule	г.	
	OF EXPENDITURE	Travel In Di	istrict			_	eck if Austir	n, TX, officeholder living expense		
					Parking for even	t				
		<u></u>	 							
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	holder name		Office sought			Office held		

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ -	rees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E			Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
L	o.our our raymon		The Instruction Guide explains	how to co	omplete this form.	_	
1	Total pages Schedule G:	2 FILER NAME				l	Filer ID (Ethics Commission Filers)
	Sch: 9/10 Rpt: 61/63	Williams, Sta	aci (The Honorable)				00069606
4	Date	5 Payee name					
	02/24/2025	Trinity Chapter The Links, Inc.					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$430.52	P.O. Box 82	20034				
	X Reimbursement from political contributions intended	Dallas, TX 75382					
8	PURPOSE OF	1	e Categories listed at the top of this sch	edule)	(b) Description	=	neck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense					
					Tickets for wome	≓II V	viio Steam Luncheon
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name			Office sought		Office held
H		T _					
	Date 05/13/2025	Payee name	nologies Inc				
	Amount (\$)	UBER Technologies, Inc. Payee address; City; State; Zip Code					
	\$23.95						
	Reimbursement from 4th Floor						
	x political contributions intended		co, CA 94103				
H	PURPOSE	Category (Se	e Categories listed at the top of this sch	edule)	Description	Ch	neck if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Travel In Dis	strict			_	eck if Austin, TX, officeholder living expense
					Uber to campaigi	n m	eeting
	Complete ONLY if direct expenditure to benefit	Candidate/Officeh	older name		Office sought		Office held
	C/OH						
	Date	Payee name					
	06/13/2025		nologies, Inc.				
	Amount (\$) Payee address; City; State; Zip Code						
\$11.54		1455 Market	t Street				
	Reimbursement from political contributions	4th Floor					
	intended	San Francis	co, CA 94103				
	PURPOSE OF		e Categories listed at the top of this sch	edule)	Description	=	neck if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Travel Out of District			Uber from hotel to	_	eck if Austin, TX, officeholder living expense
						.U V	ONLAINE
	Complete ONLY if direct expenditure to benefit C/OH	I Candidate/Officeh	older name		Office sought		Office held

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica		Expense Travel Out of District 5/Wages/Contract Labor OTHER (enter a category not listed above)					
	Credit Card Payment	The Instruction Guide explains how to						
1	Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 10/10 Rpt: 62/63	Williams, Staci (The Honorable)	00069606					
4	Date	5 Payee name						
	05/08/2025	USPS						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$29.20							
		101 10111 Earlary 111111						
	X Reimbursement from political contributions intended	Dallas, TX 75260						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T.					
	OF EXPENDITURE	Solicitation/Fundraising Expense	Check if Austin, TX, officeholder living expense					
	EXPENDITURE	Stamps for notices						
9	Complete ONLY if direct	L Candidate/Officeholder name	Office sought Office held					
	expenditure to benefit C/OH							
	Date	Payee name						
06/13/2025		VONLANE						
Amount (\$)		Payee address; City; State; Zip Code						
\$30.00		6310 Lemmon Ave.						
		0010 Lenimon Ave.						
Reimbursement from political contributions		Dallag TV 75000						
intended		Dallas, TX 75209						
PURPOSE OF		Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.					
EXPENDITURE		Travel Out of District	Check if Austin, TX, officeholder living expense					
			For UTLAW CLE- Change in departure times					
Complete <u>ONLY</u> if direct expenditure to benefit		Candidate/Officeholder name	Office sought Office held					
	C/OH							
	Data							
Date 05/13/2025		Payee name Westin Inving Las Colinas						
` ' '		Payee address; City; State; Zip Code						
\$418.00		400 W. Las Colinas Blvd,						
	Reimbursement from political contributions							
	X political contributions intended	Irving , TX 75039						
		Category (See Categories listed at the top of this schedule)	Description					
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if Austin, TX, officeholder living expense					
	LAFLINDITORE		Hotel for Judicial Conference					
	Complete ONLY if direct	Candidate/Officeholder name	Office sought Office held					
	expenditure to benefit C/OH							

TEXT ANNOTATION							
	Sch: 1/1 Rpt: 63/63						
FILER NAME Williams, Staci (The Honorable)	Filer ID (Ethics Commission Filers) 00069606						
Schedule A(J)1							
Information entered by filer as a memo: was a candidate for the Court of Appeals in November 2024, the last day to accept contributions for that race was March 6, 2025.							