#### 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) 00070992 34 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Emily A. NAME Date Received **ELECTRONICALLY FILED** 07/15/2025 NICKNAME LAST **SUFFIX** Miskel 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. Marlin J. NAME NICKNAME LAST **SUFFIX** lke Vanden Eykel **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** (214) 871-2727 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 01/01/2025 06/30/2025 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE Court Of Appeals, Justice Place 13 District 5

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GO TO PAGE 2
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Version V4.1.0.f10d0fd8

## JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM JC/OH COVER SHEET PG 2

2 of 34

13 C / OH NAME	Miskel, Emily A. (The	Honorable)		<b>14</b> Filer ID 00070992	(Ethics Cor	nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditure	ns accepted or political expenditures is may have been made without required to report this information	the candidate's or of	ficeholder's kr	nowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAI	ME			
ш -	GENERAL					
		COMMITTEE ADI	DRESS			
	SPECIFIC					
		COMMITTEE CAI	MPAIGN TREASURER NAME			
		COMMITTEE CAI	MPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS			CONTRIBUTIONS(OTHER THAN CONTRIBUTIONS MADE ELE		S, <b>\$</b>	0.00
		ICAL CONTRIBU		c)	\$	66,317.38
EXPENDITURE 3. TOTAL UNITEMIZED POLITI			S, OR GUARANTEES OF LOAN EXPENDITURES	5)	\$	0.00
TOTALS					<b>\$</b>	0.00
4. TOTAL POLITICAL EXPENDITURES					\$	7,794.21
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		NS MAINTAINED AS OF THE L	AST DAY OF THE	\$	77,060.66
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		ALL OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT						
			I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.	y of perjury, that the Il information require	accompanying d to be report	g report is ed by me
			The Hono	orable Emily A. Mis	skel	
			Signature of	Candidate or Office	holder	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
Sworn to and subs	cribed before me, by the s	aid		, this the		day
			s my hand and seal of office.			
Signature of office	cer administering oath	Printed name	e of officer administering oath	Title of offi	cer administe	ring oath

### **SUBTOTALS - JC/OH**

### FORM JC/OH **COVER SHEET PG 3**

					3 0f 34
	LER NAM iskel, Er	ME :: nily A. (The Honorable)	19 Filer ID 00070992	(Ethi	cs Commission Filers)
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	65,717.38
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	600.00
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$	7,794.21
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	NS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10	). 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS C	F C/OH	\$	
11	🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	NS	\$	
12	. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS R TO FILER	ETURNED	\$	950.00

	MONET	ARY POLITICAL (	CONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 1/15 Rpt: 4/34
2	FILER NAME Miskel, Emily	y A. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00070992
4	Date 01/29/2025				7 Amount of Contribution (\$) \$500.00
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	<u> </u>
10	O Contributor's employer/law firm  11 Law firm of contributor's sp			oouse (if any)	
12	If contributor is	s a child, law firm of parent(s) (if a	any)		
	Date O1/27/2025 Full name of contributor out-of-state PAC (ID#:) Albin, Todd Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$520.51	
		Frisco, TX 75034		T	
		Principal Occupation		Contributor's Job Title	
	Attorney  Contributor's 6	employer/law firm		Attorney  Law firm of contributor's sp	pouse (if any)
	Albin Oldner	• •			, ,,
	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 (\$)
	02/27/2025	Aldous/Walker LLP  Contributor address; City; Si  Dallas, TX 75219	ate; Zip Code		\$2,500.00
	Contributor's I	I Principal Occupation		Contributor's Job 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) (if a	any)	l	

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.		l pages Schedule A(J)1 : 2/15 Rpt: 5/34	:
2	FILER NAME Miskel, Emily	y A. (The Honorable)				ID (Ethics Commission 70992	on Filers)
4	Date 01/22/2025	Alexander, Jerry  6 Contributor address; City; State; Zip Code		<b>7</b> Amo	unt of Contribution (\$)	\$1,000.00	
		Dallas, TX 75270					
8		Principal Occupation		9 Contributor's Job Title			
_				Attorney			
10	.0 Contributor's employer/law firm  11 Law firm of contributor's sp			oouse (if a	any)		
Passman & Jones PC Polsinelli							
12	: II CONTINUTOR II	s a child, law firm of parent(s) (i	any)				
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amo	unt of Contribution (\$)	
	01/29/2025 Anziani, Andre  Contributor address; City; State; Zip Code						\$1,500.00
		Dallas, TX 75224					
	Contributor's Principal Occupation Contributor's Job Title						
	Attorney			Attorney			
		employer/law firm		Law firm of contributor's sp	oouse (if a	any)	
	Law Office o	f Andre Anziani, PLLC					
	If contributor is	s a child, law firm of parent(s) (i	fany)				
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amo	unt of Contribution (\$)	
	01/16/2025	Armstrong, Rebecca					\$520.51
		Contributor address; City; Plano, TX 75024	State; Zip Code				
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Attorney	molpai occupation		Attorney			
		employer/law firm		Law firm of contributor's sp	oouse (if a	any)	
		vivorce & Family Law PLLC				- 7,	
	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	ow to complete this	form.	I .	pages Schedule A(J) 3/15 Rpt: 6/34	L:
2	FILER NAME Miskel, Emily	y A. (The Honorable)			3 Filer II 0007	D (Ethics Commissi 0992	on Filers)
4	Date 01/22/2025	Full name of contributor     Bell Nunnally     Contributor address; City;	ress; City; State; Zip Code		<b>7</b> Amou	nt of Contribution (\$)	\$1,000.00
L	Contributorio I	Dallas, TX 75201		O Constributorio lob Titlo			
8	Contributors	Principal Occupation		9 Contributor's Job Title			
10	0 Contributor's employer/law firm 11 Law firm of contributor's sp			oouse (if ar	ny)		
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#:	)	Amou	nt of Contribution (\$)	
	02/26/2025 Blue, Lisa Contributor address; City; State; Zip Code					\$5,000.00	
	0	Dallas, TX 75205		O contributanta dala Titla			
	Contributor's Principal Occupation Contributor's Job Title Attorney Attorney			Attorney			
_		employer/law firm		Law firm of contributor's sp	nouse (if ar	nv)	
	Baron & Blue			Law min or contributor 5 of	ouse (ii ui	-37	
	If contributor is	s a child, law firm of parent(s) (i	f any)	<u> </u>			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amou	int of Contribution (\$)	
	01/28/2025	Bogdanowicz, Erin					\$500.00
		Contributor address; City; Plano, TX 75024	State; Zip Code				
	Contributor's F	I Principal Occupation		Contributor's Job Title			
	Attorney			Attorney			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if ar	ny)	
	Bogdanowic	z PLLC		Burke Bogdanowicz PL	LC		
	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: 4/15 Rpt: 7/34
2	FILER NAME Miskel, Emily	y A. (The Honorable)			1	Filer ID (Ethics Commission Filers) 00070992
4	Date 01/24/2025	Carter, Leon  6 Contributor address; City; State; Zip Code		7 /	Amount of Contribution (\$) \$5,000.00	
		Dallas, TX 75206				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	LO Contributor's employer/law firm  Carter Arnett PLLC  11 Law firm of contributor's sp			oouse	(if 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 (\$)
	01/13/2025	Castaneda, Kirsten  Contributor address; City;  Dallas, TX 75231	State; Zip Code			\$260.25
_	Contributor's	Principal Occupation		Contributor's Job Title		
	Attorney	этпісіраі Оссираціон		Attorney		
		employer/law firm		Law firm of contributor's sp	ouse	(if any)
		ubose Jefferson LLP				
	If contributor is	s a child, law firm of parent(s) (i	f any)	I		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	<i>-</i>	Amount of Contribution (\$)
	01/22/2025	Clark Hill	_			\$500.00
		Contributor address; City;  Dallas, TX 75202	State; Zip Code			
	Contributor's 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 C	ONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 5/15 Rpt: 8/34
2	FILER NAME Miskel, Emily	y A. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00070992
4	Date 01/13/2025				7 Amount of Contribution (\$) \$260.25
8	Contributor's Principal Occupation  9 Contributor's Job Title				
	Attorney				
10	O Contributor's employer/law firm  Duane Morris LLP  11 Law firm of contributor's specified by the contributor's specified b			oouse (if any)	
12	If contributor is	s a child, law firm of parent(s) (if ar	ny)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	01/24/2025 Cox, Trey  Contributor address; City; State; Zip Code  Dallas, TX 75201				\$1,041.02
	Contributor's F	Principal Occupation		Contributor's Job Title	
	Attorney	· ····o.pa. O coapation		Attorney	
		employer/law firm		Law firm of contributor's sp	oouse (if any)
	Gibson Duni	n & Crutcher LLP			
	If contributor is	s a child, law firm of parent(s) (if ar	ny)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	01/23/2025	Elrich, Katherine  Contributor address; City; Sta	tte; Zip Code		\$104.10
	Contributor's I	Principal Occupation		Contributor's Job Title	
	Attorney			Attorney	
		employer/law firm		Law firm of contributor's sp	oouse (if any)
		ez Woodward PLLC			
	If contributor is	s a child, law firm of parent(s) (if ar	ny)		

	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: 6/15 Rpt: 9/34
2	FILER NAME Miskel, Emily	y A. (The Honorable)			1	Filer ID (Ethics Commission Filers) 00070992
4	Date 01/14/2025	D1/14/2025 Farish, Chris  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$1,000.00	
		Dallas, TX 75206		1		
8		Principal Occupation		9 Contributor's Job Title		
_	Attorney			Attorney		<i>(15.</i> )
10	<ul><li>O Contributor's employer/law firm</li><li>Quaid Farish LLC</li><li>11 Law firm of contributor's s</li></ul>			ouse	e (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#:	)	T ,	Amount of Contribution (\$)
	02/02/2025	Frank L. Branson PC  Contributor address; City;  Dallas, TX 75205	State; Zip Code			\$2,500.00
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Continuator 3 i	molpai Occupation		Contributor 3 300 True		
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse	e (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#:	)	Ι,	Amount of Contribution (\$)
	02/03/2025	Friedman, Lawrence  Contributor address; City;  Dallas, TX 75252	State; Zip Code			\$2,500.00
	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	ouse	e (if any)
	Friedman &	Feiger LLP				
	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	otal pages Schedule A(J)1 ch: 7/15 Rpt: 10/34	:
2	FILER NAME Miskel, Emily	y A. (The Honorable)			1	ler ID (Ethics Commissi 0070992	on Filers)
4	Date 01/15/2025	5 Full name of contributor Gruber, Mike 6 Contributor address; City;	out-of-state PAC (ID#:	)	<b>↓</b>	mount of Contribution (\$)	\$1,000.00
		Dallas, TX 75201					
8		Principal Occupation		9 Contributor's Job Title			
	Attorney			Attorney			
10	LO Contributor's employer/law firm  Greenberg Traurig  11 Law firm of contributor's s			11 Law firm of contributor's sp	oouse (	if any)	
12		s a child, law firm of parent(s) (i	f any)				
	. Il contributor i	s a crima, law iiiii or parcrii(s) (i	i arry)				
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Aı	mount of Contribution (\$)	
	01/29/2025 Hamilton, Christopher  Contributor address; City; State; Zip Code					\$5,000.00	
	Contributor's I	Dallas, TX 75214 Principal Occupation		Contributor's Job Title			
	Attorney			Attorney			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (	(if any)	
	Hamilton Wi	ngo LLP		Hamilton Wingo			
	If contributor is	s a child, law firm of parent(s) (i	f any)	•			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Aı	mount of Contribution (\$)	
	01/23/2025	Hammer, Stephen					\$100.00
		Contributor address; City;  Dallas, TX 75201	State; Zip Code				
	Contributor's F	Principal Occupation		Contributor's Job Title			
	Attorney	molpai occupation		Attorney			
_		employer/law firm		Law firm of contributor's sp	oouse (	(if any)	
		n & Crutcher LLP					
	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	ow to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 8/15 Rpt: 11/34
2	FILER NAME Miskel, Emily	y A. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00070992
4	Date 02/28/2025	5 Full name of contributor Hartnett Law Firm			7	Amount of Contribution (\$) \$1,000.00
		Dallas, TX 75201		1		
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
10	0 Contributor's 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)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	02/02/2025 Haynes & Boone LLP  Contributor address; City; State; Zip Code				\$2,500.00	
		Dallas, TX 75201				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Contributor's 6	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 (\$)
	01/28/2025	Johansen, Mark	_			\$520.51
Contributor address; City; State; Zip Code  Dallas, TX 75219						
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Egan Nelsor	1 LLP				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A(J)1		
	The Instru	ction Guide explains how to o	complete this f	orm.	1	ges Schedule A(J)1: L5 Rpt: 12/34		
2	FILER NAME Miskel, Emily	y A. (The Honorable)			3 Filer ID 000709	(Ethics Commissio	n Filers)	
4	Date 01/17/2025				7 Amount	of Contribution (\$)	\$100.00	
8	Contributor's Principal Occupation 9 Contributor's Job Title			1				
	Attorney							
10	Contributor's employer/law firm  11 Law firm of contributor's sp  Haynes Boone LLP			oouse (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 (\$)		
	01/13/2025 Kennedy, Stephen  Contributor address; City; State; Zip Code  Dallas, TX 75202						\$520.51	
	Contributor's F	I Principal Occupation		Contributor's Job Title				
	Attorney	•		Attorney				
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (if any)			
	Kennedy La	W						
	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 (\$)		
	01/13/2025	Kiernan, Elizabeth  Contributor address; City; State; z  Dallas, TX 75201	Zip Code				\$104.10	
	Contributor's F	Principal Occupation		Contributor's Job Title				
	Attorney			Attorney				
		employer/law firm		Law firm of contributor's sp	ouse (if any)			
		n & Crutcher LLP						
	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: 10/15 Rpt: 13/34
2	FILER NAME Miskel Emily	y A. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00070992
4	Date 01/14/2025	<ul> <li>5 Full name of contributor         Loewinsohn, Alan     </li> <li>6 Contributor address; City; S</li> </ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$) \$5,000.00
		Dallas, TX 75201		1		
8		Principal Occupation		9 Contributor's Job Title		
10	Attorney	and a conflored fines		Attorney		on (if any)
10	10 Contributor's employer/law firm  McKool Smith PC  11 Law firm of contributor's			11 Law firm of contributor's sp	ous	se (II arry)
12	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 (\$)
	01/29/2025 Macdonald Devin Madden Kenefick Harris PC  Contributor address; City; State; Zip Code  Dallas, TX 75251					\$500.00
Contributor's Principal Occupation Contributor's Job Title						
	Continuator S F	-ппстрат Оссирацоп		Contributor's 300 Title		
	Contributor's 6	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	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	01/21/2025 Mallers, Tony  Contributor address; City; State; Zip Code  Plano, TX 75093				•	\$520.51
	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)
	Cowles & Th	nompson PC				
	If contributor is	s a child, law firm of parent(s) (if	any)			

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE	A(J)1
	The Instruction Guide explains how to complete this form.				pages Schedule A(J)1 11/15 Rpt: 14/34	:	
2	FILER NAME Miskel, Emily	y A. (The Honorable)			3 Filer II 00070	O (Ethics Commission)	on Filers)
4	Date  5 Full name of contributor out-of-state PAC (ID#:)  Modjarrad & Associates PC  6 Contributor address; City; State; Zip Code		<b>7</b> Amoui	nt of Contribution (\$)	\$1,000.00		
8	Contributor's I	Richardson, TX 75081 Principal Occupation		9 Contributor's Job Title			
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	ouse (if an	y)	
12	12 If contributor is a child, law firm of parent(s) (if any)						
	Date	Full name of contributor out-of-st	ate PAC (ID#:_	)	Amoui	nt of Contribution (\$)	
	01/30/2025 Mullen & Mullen Law Firm  Contributor address; City; State; Zip Code						\$5,000.00
Dallas, TX 75207  Contributor's Principal Occupation  Contributor's Job Title			Contributor's Job Title				
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (if an	y)	
	If contributor i	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor  ut-of-st	ate PAC (ID#:_	)	Amoui	nt of Contribution (\$)	
01/24/2025 Nickelson, Chris  Contributor address; City; State; Zip Code  Dallas, TX 75206					\$500.00		
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Attorney			Attorney			
		employer/law firm		Law firm of contributor's sp	ouse (if an	y)	
	Goranson B						
	If contributor i	s a child, law firm of parent(s) (if any)					

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A(J)1: Sch: 12/15 Rpt: 15/34
2	FILER NAME Miskel, Emily	y A. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00070992
4	Date 01/17/2025	<ul> <li>Full name of contributor  out-of-state PAC (Northrup, Mike</li> <li>Contributor address; City; State; Zip Code</li> <li>Dallas, TX 75202</li> </ul>	(ID#:_	)	7	Amount of Contribution (\$) \$500.00
8	Contributor's I	I Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	Contributor's 6	employer/law firm nompson PC		11 Law firm of contributor's sp	ous	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 (\$)
	02/28/2025 Norton Rose Fulbright LLP  Contributor address; City; State; Zip Code				\$2,500.00	
Houston, TX 77010			Constributorio Joh Titlo			
	Contributors	Principal Occupation		Contributor's Job Title		
Contributor's employer/law firm  Law firm of contributor			Law firm of contributor's sp	ous	se (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 (\$)
03/05/2025 Palencia, Brina  Contributor address; City; State; Zip Code  Dallas, TX 75208					\$5,000.00	
	Contributor's F	Principal Occupation		Contributor's Job Title	_	
Actress Actress						
Contributor's employer/law firm Law firm of contributor's sp			ous	se (if any)		
Self Hamilton Wingo						
	If contributor is	s a child, law firm of parent(s) (if any)				

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A(J)1		
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 13/15 Rpt: 16/34		
2	FILER NAME Miskel, Emily A. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00070992			
4			7	Amount of Contribution (\$) \$260.25				
		Dallas, TX 75251						
8		Principal Occupation		9 Contributor's Job Title				
	Attorney			Attorney				
10		employer/law firm Devin Madden Kenefick & Ha	arris, P.C.	11 Law firm of contributor's sp	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 (\$)		
	01/13/2025 Sanders, Jody  Contributor address; City; State; Zip Code			\$104.10				
	Fort Worth, TX 76102							
		Principal Occupation		Contributor's Job Title				
	Attorney	employer/law firm		Attorney  Law firm of contributor's sp	2011	on (if any)		
	Kelly Hart Ha	, ,		Law littl of contributors sp	Jou:	se (II arry)		
-		s a child, law firm of parent(s) (if	any)					
		, ,,,						
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Π	Amount of Contribution (\$)		
	01/13/2025	Taylor, Ben	<del>_</del>			\$260.25		
	Contributor address; City; State; Zip Code  Mesquite, TX 75150			•				
	Contributor's F	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 B. Lyon	Assoc. PC						
	If contributor is	s a child, law firm of parent(s) (if	any)					

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A(J)1		
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A(J)1: Sch: 14/15 Rpt: 17/34		
2	FILER NAME Mickel Emily A (The Honorable)			3	Filer ID (Ethics Commission Filers) 00070992			
4	Miskel, Emily A. (The Honorable)  5 Full name of contributor out-of-state PAC (ID#:)  Thompson Coe Cousins & Irons LLP  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$1,000.00				
		Dallas, TX 75201		T				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title				
10	Contributor's 6	employer/law firm		11 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#:	)	Т	Amount of Contribution (\$)		
	03/05/2025 Tillotson, Jeffrey M  Contributor address; City; State; Zip Code			\$2,500.00				
		Dallas, TX 75209			l			
	Contributor's F	Principal Occupation		Contributor's Job Title				
	Attorney			Attorney				
		employer/law firm		Law firm of contributor's sp	oou	se (if any)		
	Tillotson Joh	nson & Patton						
	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 (\$)		
	02/07/2025	Vinson & Elkins Texas P	AC		l	\$2,500.00		
	Contributor address; City; State; Zip Code  Houston, TX 77002							
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>			
Contributor's 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)					

N	IONET	ARY POLITICAL CONTRIBUTION	DNS	SCHEDULE A(J)1
TI	he Instru	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 15/15 Rpt: 18/34	
	FILER NAME Miskel, Emily A. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00070992
<b>4</b> Da				7 Amount of Contribution (\$) \$520.51
		Dallas, TX 75201		
<b>8</b> Co	ontributor's I	Principal Occupation	9 Contributor's Job Title	
At	torney		Attorney	
<b>10</b> Co	ontributor's (	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
W	ebb Famil	y Law Firm		
<b>12</b> If (	contributor i	s a child, law firm of parent(s) (if any)		
Da	ate	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
02	2/06/2025	Wright Close & Barger LLP	·	\$1,000.00
Contributor address; City; State; Zip Code  Houston, TX 77056				
Co	ontributor's I	Principal Occupation	Contributor's Job Title	
Co	ontributor's (	employer/law firm	Law firm of contributor's sp	oouse (if any)
lf (	contributor i	s a child, law firm of parent(s) (if any)		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

### SCHEDULE A2

The Inches	ration Cuido avalaina havuta aamulata thia f	1 Total pages Schedule A2:					
i ne instru	iction Guide explains how to complete this f	Sch: 1/1 Rpt: 19/34					
2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
Miskel, Emi	ly A. (The Honorable)		00070992				
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$				
<b>5</b> Date	6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution				
02/04/2025	Dykema Gossett PLLC		contribution (\$) description				
	7 Contributor address; City; State; Zip Code		\$300.00   Food, beverage, and   parking for fundraising				
			reception				
	Dallas, TX 75201		Check if travel outside of Texas. Complete Schedule T.				
10 Principal occ	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)				
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)				
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)				
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	ı					
Date	Full name of contributor	\	Amount of In-kind contribution				
01/22/2025		)	contribution (\$) description				
01/22/2020			\$300.00 Food, beverage, and				
Contributor address; City; State; Zip Code			parking for fundraising reception				
			l I				
	Dallas, TX 75201		Check if travel outside of Texas. Complete Schedule T.				
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)					
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	•					

### 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: 1/14 Rpt: 20/34	2 FILER NAME Miskel, Emily A. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00070992
4	Date 05/06/2025	5 Payee name 5th Court of Appeals Employee Fund
6	Amount (\$) \$245.00	7 Payee address; City; State; Zip Code 600 Commerce St. Suite 200 Dallas, TX 75202
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation to employee kitchen fund
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/23/2025	Arts District Mansion
	Amount (\$) \$5.00	Payee address; City; State; Zip Code 2101 Ross Ave.  Dallas, TX 75201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Parking for Federalist Society lunch meeting
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 02/05/2025	Payee name Arts District Mansion
	Amount (\$) \$5.00	Payee address; City; State; Zip Code 2101 Ross Ave.  Dallas, TX 75201
	PURPOSE	
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Parking for investiture
	Complete ONLY 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 Committee

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
•	Sch: 2/14 Rpt: 21/34	Miskel, Emily A. (The Honorable)
4	Date	5 Payee name
	06/11/2025	Arts District Mansion
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$23.01	2101 Ross Ave.
		Dallas, TX 75201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Lunch and parking for Family Law Section meeting
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
_	Data	
	Date	Payee name
	06/12/2025	Arts District Mansion
	Amount (\$)	Payee address; City; State; Zip Code
	\$23.01	2101 Ross Ave.
		Dallas, TX 75201
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Lunch and parking for Appellate Section meeting
		Zarion and parking for 7 ppointed documenting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		
	Date	Payee name
	04/17/2025	Carbonite
	Amount (\$)	Payee address; City; State; Zip Code
	\$102.33	385 Interlocken Crescent
		Suite 800
		Broomfield, CO 80021
	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
		Computer backup service
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>1</del>

### 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 (order a category pet 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: 3/14 Rpt: 22/34	Miskel, Emily A. (The Honorable) 00070992
4	Date	5 Payee name
	01/30/2025	Catbird
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$962.76	1401 Elm St.
		Dallas, TX 75201
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.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Fundraising event
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/26/2025	Chimalma
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.08	701 Commerce St.
		Suite 120
		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
		Court planning lunch
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	<u> </u>	
	Date 01/27/2025	Payee name
		Collin County Bench Bar Foundation
	Amount (\$)	Payee address; City; State; Zip Code
	\$950.00	5700 W. Plano Pkwy.
		Suite 2200
		Plano, TX 75093
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Conference registration
		Conference registration
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<b>y</b>

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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	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: 4/14 Rpt: 23/34	Miskel, Emily A. (The Honorable) 00070992
4	Date	5 Payee name
	02/18/2025	Collin County Bench Bar Foundation
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$350.00	5700 W. Plano Pkwy.
		Suite 2200
		Plano, TX 75093
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense
		Check if Austin, TX, officeholder living expense
		Conference registration
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/29/2025	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$53.30	1601 Trapelo 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  Email marketing service
		Email marketing service
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>-</del>
	Date	Payee name
	01/06/2025	CubeSmart
	Amount (\$)	Payee address; City; State; Zip Code
	\$86.00	525 N Ave.
		Plano, TX 75074
	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  Storage for signs, campaign supplies, and equipment
		Storage for signs, campaign supplies, and equipment
	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

Advertising Expense Accounting/Banking Consulting 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/Political Credit Card Payment	Gift/Awards/Memorials Expense Printing Expense Travel Out of District OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:		١
Sch: 5/14 Rpt: 24/34	Miskel, Emily A. (The Honorable)  Genius Commission Filers)  00070992	,
4 Date	5 Payee name	
02/03/2025	CubeSmart	
6 Amount (\$) \$86.00	7 Payee address; City; State; Zip Code 525 N Ave. Plano, TX 75074	
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  Storage for signs, campaign supplies, and equipm	nent
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
03/03/2025	CubeSmart	
Amount (\$) \$86.00	Payee address; City; State; Zip Code 525 N Ave.  Plano, TX 75074	
DUDDOS-		
PURPOSE OF EXPENDITURE	(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.  Check if Austin, TX, officeholder living expense  Storage for signs, campaign supplies, and equipm	nent
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
04/03/2025	CubeSmart	
Amount (\$)	Payee address; City; State; Zip Code	
\$86.00	525 N Ave.	
	Plano, TX 75074	
PURPOSE OF EXPENDITURE	(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.  Check if Austin, TX, officeholder living expense  Storage for signs, campaign supplies, and equipm	nent
Complete ONLY if direct expenditure to benefit C/OF	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 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 co	mple	ete this form.
1	Total pages Schedule F1: Sch: 6/14 Rpt: 25/34	FILER NAME     Miskel, Emily A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00070992	
4	Date 05/03/2025	5 Payee name CubeSmart		·
6	Amount (\$) \$86.00	7 Payee address; City; State; Zip Co 525 N Ave. Plano, TX 75074	ode	
8	PURPOSE OF EXPENDITURE	(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.  Check if Austin, TX, officeholder living expense  Storage for signs, campaign supplies, and equipment
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ight	Office held
	Date 06/03/2025	Payee name CubeSmart		
	Amount (\$) \$86.00	Payee address; City; State; Zip Co 525 N Ave. Plano, TX 75074	ode	
	PURPOSE OF EXPENDITURE	(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.  Check if Austin, TX, officeholder living expense  Storage for signs, campaign supplies, and equipment
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ight	Office held
	Date 02/07/2025	Payee name Dallas County Council of Republican Women		
	Amount (\$) \$50.00	Payee address; City; State; Zip Co 1 Gettysburg Ln	ode	
		Richardson, TX 75080		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense	(b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Sponsorship of leadership event
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ight	Office held

### 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		mmittee Leg	Awards/Memorials Ex al Services • Instruction Guid	S		ages/	Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)	
Ļ		-		s action Gala	C CAPIGITIS IIU		pie	to the loub.	_		(=u : a : : : ::	
1	Total pages Schedule F1: Sch: 7/14 Rpt: 26/34	2	FILER NAME Miskel, Emily A	(The Honoral	ble)				3	Filer ID 00070992	(Ethics Commission File	ers)
4	Date	5	Payee name									
	06/09/2025		DreamHost									
6	Amount (\$)	7	Payee address;	City;	State; 2	Zip Cod	de					
	\$39.98		417 Associated	l Rd								
			PMB #257									
			Brea, CA 9282	1								
8	PURPOSE	(a)	Category (See Ca	tegories listed at the t	op of this schedu	ule)	(b)	Description				
	OF EXPENDITURE		Office Overhea	d/Rental Expe	nse			<u> </u>		de of Texas. Com		
								Website dom		officeholder living	expense	
								Website dom	anı	names		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeh	older name	Offi	ice soug	ght			Office he	eld	
	experialitare to benefit e/or											
	Date		Payee name									
	03/03/2025		Google GSuite									
	Amount (\$)		Payee address;	City;	State; 2	Zip Cod	de					
	\$76.75		1600 Amphithe	atre Pkwy.								
			Mountain View	CA 94043								
	PURPOSE OF	(a)	Category (See Ca			ule)	(b)	Description		d4.T O	odete Celevida T	
	EXPENDITURE		Office Overhea	d/Rental Expe	nse			<b>-</b>		de of Texas. Com officeholder living		
								Email and off				
	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Officeh	older name	Offi	ice soug	ght			Office he	eld	
	Date		Payee name									
	01/23/2025		Harwood 14									
	Amount (\$)		Payee address;	City;	State; 2	Zip Cod	de					
	\$6.50		2801 N. Harwo	od St.								
			Dallas, TX 752	01								
	PURPOSE OF	(a)	Category (See Ca		op of this schedu	ule)	(b)	Description				
	EXPENDITURE		Event Expense							de of Texas. Com officeholder living		
								Parking for fu			Гехрепас	
								<b>3</b> - 1				
	Complete ONLY if direct		Candidate/Officeh	older name	Offi	ice soug	ght			Office he	eld	
	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 Commiss	ion Filers)
	Sch: 8/14 Rpt: 27/34	Miskel, Emily A. (The Honorable) 00070992	
4	Date	5 Payee name	
	01/09/2025	International Academy of Family Lawyers	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$80.00	7201 Wisconsin Ave.	
		Suite 675	
		Bethesda, MD 20814	ĺ
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITORL	Check if Austin, TX, officeholder living expense	
		Membership dues	
Ļ	0 1: 0 1: 0		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held  OH	
	· 		
	Date	Payee name	
	02/24/2025	Lyft	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$43.38	548 Market St.	
		PO Box 68514	
		San Francisco, CA 94104	ĺ
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Transportation for DBA Family Law Bench	Por
		Conference	Dai
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
_	Date	Payee name	
	04/24/2025	National Center for State Courts	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	300 Newport Ave.	
		Williamsburg, VA 23185	
	PURPOSE	T	
	OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
		NCSC board pledge	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	ЭН	

#### 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

	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: Sch: 9/14 Rpt: 28/34	2 FILER NAME Miskel, Emily A. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00070992	
4	Date 06/07/2025	5 Payee name NordVPN	
6	Amount (\$) \$149.88	7 Payee address; City; State; Zip Code PH F&F Tower, 50th St. & 56th St. Suite #32-D, Floor 32 Panama City Panama	
8	PURPOSE OF EXPENDITURE	(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.  Check if Austin, TX, officeholder living expense  Secure internet VPN service for remote work	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	05/13/2025	Pavilion Parking	
	Amount (\$) \$4.33	Payee address; City; State; Zip Code 316 W. Las Colinas Blvd.  Irving, TX 75039	
	PURPOSE		_
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Parking at TJC Regional Judicial Conference	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	03/06/2025	Prosperity Bank	
	Amount (\$) \$12.00	Payee address; City; State; Zip Code 1201 14th St	
		Plano, TX 75074	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Returned check fee	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

### 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 Commit

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

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

	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: 10/14 Rpt: 29/34	Miskel, Emily A. (The Honorable) 00070992
4	Date	5 Payee name
	03/11/2025	Starbucks
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	1405 E. Renner Rd.
		Richardson, TX 75082
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
		Staff appreciation gifts
		Starr appreciation gitte
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	Payee name
	06/18/2025	Texas Academy of Family Law Specialists
	Amount (\$)	Payee address; City; State; Zip Code
	\$400.00	640 Taylor St.
		Suite 2200
		Fort Worth, TX 76102
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		TAFLS Banquet
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experiulture to beliefit C/Or	
	Date	Payee name
	04/20/2025	Texas Board of Legal Specialization
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	505 E. Huntland Dr.
		Suite 400-LB 28
		Austin, TX 78752
	BUBBOOF	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Application fee
	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	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: 11/14 Rpt: 30/34	Miskel, Emily A. (The Honorable) 00070992
4	Date	5 Payee name
	01/08/2025	Texas Spice
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$107.85	555 S. Lamar
		Dallas, TX 75202
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Staff lunch
		Stati tarion
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
$\vdash$	Data	
	Date	Payee name
	01/30/2025	Thompson Hotel
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.97	205 N. Akard St.
		Dallas, TX 75201
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Parking for fundraiser
		T artiful (aloo)
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$	Data	Davies same
	Date	Payee name
	05/16/2025	USPS
	Amount (\$)	Payee address; City; State; Zip Code
	\$420.00	550 N. Central Expy.
		McKinney, TX 75070
	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.
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		PO Box rental
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	onponditure to belieff 0/01	•

### 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		mmittee Leç	/Awards/Memorials Ex al Services e Instruction Guid	S		ages/	/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed ab	ove)
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1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commiss	ıon ⊢ılers)
	Sch: 12/14 Rpt: 31/34		Miskel, Emily	A. (The Honora	ıble)					00070992		
4	Date	5	Payee name									
L	05/24/2025		Wayfair									
6	Amount (\$)	7	Payee address;	City;	State; 2	Zip Cod	de					
	\$1,028.34		4 Copley Pl.									
			Boston, MA 02	2116								
8	PURPOSE	(a)	Category (See C		ton of this schodu	ula)	(b)	Description				
	OF	``	Office Overhea			ile)	,		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE			aarromai Expe	71100			Check if Austin,	, TX,	officeholder living	j expense	
								Furnishings for	or c	chambers of	fice	
9	Complete ONLY if direct		Candidate/Office	nolder name	Offi	ice soug	ght			Office he	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	01/21/2025		WinRed									
	Amount (\$)		Payee address;	City;	State; 2	Zip Cod	de					
	\$355.77		4250 Fairfax D	r.								
			Suite 600									
			Arlington, VA	22203								
$\vdash$	PURPOSE	(a)					(h)	Description				
	OF	(۳)	Category (See C		top of this schedu	ne)	(··/	_ `	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		Accounting/Da	irining				<b></b>		officeholder living		
								Credit card p	roc	essing fees		
	Complete ONLY if direct		Candidate/Office	nolder name	Offi	ice soug	ght			Office he	eld	
	expenditure to benefit C/O	Н										
	Date		Payee name									
	01/27/2025		WinRed									
	Amount (\$)		Payee address;	City;	State; 2	Zip Cod	de					
	\$62.44		4250 Fairfax D	r.								
			Suite 600									
			Arlington, VA	22203								
	PURPOSE	(a)	Category (See C		ton of this caba	ulo)	(b)	Description				
	OF	`_,	Accounting/Ba		top or this schedu	ne)	·- <i>)</i>		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE			·····•				ш		officeholder living	j expense	
								Credit card pr	roc	essing fees		
	Complete ONLY if direct		Candidate/Officel	nolder name	Offi	ice soug	ght			Office he	eld	
	expenditure to benefit C/OI	1										

#### 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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	mmittee	Gift/Awards/Memo	·		/ages	/Contract Labor		Travel Out of OTHER (en		trict category not listed above)
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1	Total pages Schedule F1:	2							3	Filer ID		(Ethics Commission Filers)
	Sch: 13/14 Rpt: 32/34		Miskel, Emi	y A. (The Ho	onorable)					0007099	92	
4	Date	5	Payee name									
	02/03/2025		WinRed									
6	Amount (\$)	7	Payee addres	ss; City;	Stat	te; Zip Co	de					
	\$338.95		4250 Fairfa	CDr.								
			Suite 600									
			Arlington, V	A 22203								
8	PURPOSE	(a)			at the top of this s	chedule)	(b)	Description				
	OF	`~	Accounting/		i at tile top θi tills S	onicuule)	,	_ `	outsi	de of Texas.	Comp	olete Schedule T.
	EXPENDITURE			····································				Check if Austin				expense
								Credit card p	roc	essing fe	es	
L												
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offi	ceholder name	e	Office sou	ght			Offic	e he	eld
	expenditure to benefit C/Of	1										
	Date		Payee name									
	02/08/2025		WinRed									
	Amount (\$)		Payee addres	ss; City;	Stat	te; Zip Co	de					
	\$98.50		4250 Fairfa	CDr.								
			Suite 600									
			Arlington, V	A 22203								
	PURPOSE	(a)	Category (Se	e Categories listed	I at the top of this s	schedule)	(b)	Description				
	OF EXPENDITURE		Accounting/		•			<b>-</b>				olete Schedule T.
								Credit cord n				expense
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L	Complete ONLY if direct	Ц	Candidate/Offi	caholdor nome		Office	ah+			Offic	o ho	ald
	Complete ONLY if direct expenditure to benefit C/OH		Janundle/UIII	Jenoiuel Hame	=	Office sou	yııı			Onic	e ne	au .
H	Date	<u> </u>	Doves ware									
	03/03/2025		Payee name WinRed									
		_		O''		- 7 C	.1.					
	Amount (\$)		Payee addres		Stat	te; Zip Co	ae					
	\$205.08		4250 Fairfa	CDr.								
			Suite 600									
L		L	Arlington, V	A 22203								
	PURPOSE	(a)			at the top of this s	schedule)	(b)	Description				
	OF EXPENDITURE		Accounting/	Banking				ш				olete Schedule T.
								Credit card p				expense
								orean cara pi	. 00	coomig ic		
	Complete ONLY if direct	Щ	Candidate/Offi	ceholder name	<u>,</u>	Office sou	aht			Offic	e he	eld
	expenditure to benefit C/O		Janaidato/OIII	Jonaldor Haille	-	5.1100 30u	ar			Onic	5 110	··•

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense

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/Political Credit Card Payment		/ - al Co	mmittee	Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor					Travel in Distric	
l	Credit Card Payment			The Instruction Guide	explains h	now to compl	ete this form.			
1	Total pages Schedule F1:	2	FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
l	Sch: 14/14 Rpt: 33/34		Miskel, Em	ily A. (The Honorab	le)			1	00070992	
4	Date	5	Payee name							
	03/10/2025		WinRed	•						
Ļ		ļ_		City II	Ctata	7in Cada				
6	Amount (\$)	'	Payee addre		State;	Zip Code				
l	\$197.00		4250 Fairfa	ax Dr.						
l			Suite 600							
l			Arlington, \	/A 22203						
8	PURPOSE	(a)	Category (s	See Categories listed at the to	p of this sche	edule) (b)	Description			
l	OF EXPENDITURE		Accounting			,				nplete Schedule T.
l	LAFLINDITORL						_		, officeholder livin	
l							Credit card p	roc	essing fees	
9	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Of	ficeholder name	0	ffice sought			Office h	eld
	experialitate to beliefit 6/01	'								
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# INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 34/34 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Miskel, Emily A. (The Honorable) 00070992 5 Name of person from whom amount is received 8 Amount (\$) Date 05/23/2025 \$950.00 Collin County Bench Bar Foundation 6 Address of person from whom amount is received; City; State; Zip Code Plano, TX 75093 Purpose for which amount is received Check if political contribution returned to filer Conference registration reimbursement