## DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT

## FORM DCE COVER SHEET PG 1

The DCE Instruction G	uide explains how to comp	lete this form.	1 Filer ID (Ethics Commission F 00090195	ilers)	2 Total pages file 14	
3 FILER NAME	MS / MRS / MR	FIRST		MI	OFFICE U	SE ONLY
	NICKNAME	LAST Jane's Due Pr	ocess	SUFFIX	Date Received ELECTRONICAI 10/27/2025	LLY FILED
4 FILER ADDRESS	ADDRESS / PO BOX; AF	PT / SUITE #; CIT	Y; STATE;	ZIP CODE	1	
	1401 Lavaca St PMB 41363				Date Hand-delivered or I	
E EUED BUONE	Austin, TX 78701		-VTFN010N		Receipt #	Amount
5 FILER PHONE	AREA CODE PHO (512) 945-7498	ONE NUMBER I	EXTENSION		Date Processed	1
6 REPORT TYPE	January 15	30	th day before election		Date Imaged	
	July 15	X 8t	h day before election			
		Ru	unoff			
7 PERIOD COVERED	Month Day Year 09/16/2025		HROUGH	Month Day 10/25/202	Year 5	
8 ELECTION	ELECTION DATE Month Day Year 11/04/2025		Primary Eeneral	ELECTION T Runoff Special	YPE Other	
9 FILER ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported				
(Attach lists on plain paper to complete this report if		B. Opposed				
necessary.)	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		aı	allot ID:Prop. 15 El mendment affirmin eir children"			
	Officeholders     Assisted  (Identify by name or, if					
	applicable, classify by party.)					
GO TO PAGE 2						

## DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT

## FORM DCE COVER SHEET PG 2

10 FILER NAME			11 Filer ID	(Ethics Commission Filers)
Jane's Due Process	3		00090195	
12 EXPENDITURE TOTALS	1. TOTAL UNITEM	MIZED POLITICAL EXPENDITURES	\$	0.00
	2. TOTAL POLIT	FICAL EXPENDITURES	\$	12,244.38
13 AFFIDAVIT	•		·	
		I swear, or affirm, under true and correct and incluunder Title 15, Election C	penalty of perjury, that the acudes all information required Code.	ecompanying report is to be reported by me
			Signature of Filer	
		Signature of indiv	or idual with authority to sign or	n behalf of entity
			(only if Filer is an entity)	
AFFIX NOTARY STA	AMP / SEAL ABOVE			
		aid		day
of	, 20, to ce	rtify which, witness my hand and seal of office	ce.	
Signature of office	er administering oath	Printed name of officer administering of	ath Title of office	er administering oath

### **SUBTOTALS - DCE**

## FORM DCE COVER SHEET PG 3 3 of 14

14 FILER NAME  Jane's Due Process	<b>15</b> Filer ID 00090195	(Ethics Commission Filers)
Jane's Due Flocess	00090193	
16 SCHEDULE SUBTOTALS  NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. X SCHEDULE F1: POLITICAL EXPENDITURES		\$ 4,540.43
2. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		<b>\$</b> 5,670.00
3. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 2,033.95

### **POLITICAL EXPENDITURES**

### SCHEDULE F1

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

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services	Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
-	The Instruction Guide explains h	ow to complete this form.	<u></u>
1 Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)
Sch: 1/3 Rpt: 4/14	Jane's Due Process		00090195
4 Date	5 Payee name		
10/22/2025	Bading, Sarah		
6 Amount (\$)	7 Payee address; City; State;	Zip Code	
\$400.00	103 Roadrunner Trail		
X Expenditure from corporate funds	Boerne, TX 78006		
8 PURPOSE	(a) Category (See Categories listed at the top of this scher	dule) (b) Description	
OF EXPENDITURE	Event Expense	· · · · · ·	outside of Texas. Complete Schedule T.
EXPENDITORL		Llived on outs	
			ertainment at educational event on oppose Prop 15.
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		ffice sought	Office held
Date	Payee name		
10/23/2025	Holiday Inn Express Laredo		
Amount (\$)	Payee address; City; State;	Zip Code	
\$425.22	7223 Bob Bullock Lp		
Expenditure from corporate funds	Laredo, TX 78041		
PURPOSE	(a) Category (See Categories listed at the top of this scheme	dule) (b) Description	
OF EXPENDITURE	Event Expense		outside of Texas. Complete Schedule T.
		Hotel for pan	elist speaking at event on 10.25.2025
		opposing Pro	
Complete ONLY if direct		ffice sought	Office held
expenditure to benefit C/O	<u> </u>		
Date	Payee name		
10/23/2025	Holiday Inn Express Laredo		
Amount (\$)	Payee address; City; State;	Zip Code	
\$425.22	7223 Bob Bullock Lp		
X Expenditure from corporate funds	Laredo, TX 78041		
PURPOSE	(a) Category (See Categories listed at the top of this scheme	dule) (b) Description	
OF EXPENDITURE	Event Expense	Check if travel	outside of Texas. Complete Schedule T.
		Hotel for pan- opposing Pro	elist speaking at event on 10.25.2025 oposition 15.
Complete ONLY if direct expenditure to benefit C/O		ffice sought	Office held

### **POLITICAL EXPENDITURES**

#### 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

	Consuling Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Ex Legal Services  The Instruction Guid	pense Pri Sa		se s/Contract Labor	Travel Out of Dis OTHER (enter a	
1	Total pages Schedule F1:	2 FILER NAM	E				3 Filer ID	(Ethics Commission Filers)
	Sch: 2/3 Rpt: 5/14	Jane's Due	e Process				00090195	
4	Date	5 Payee name	е					
	10/23/2025	Holiday Inr	n Express Laredo					
6	Amount (\$)	7 Payee addr	ess; City;	State; Z	ip Code			
	\$425.22	7223 Bob	Bullock Lp					
X	Expenditure from corporate funds	Laredo, T>	〈 78041		_			
8	PURPOSE	(a) Category (	See Categories listed at the	top of this schedule	e) <b>(b</b> )	Description		
	OF EXPENDITURE	Event Exp	ense			Check if travel of	outside of Texas. Com	plete Schedule T.
						Hotel for pane opposing Pro		at event on 10.25.2025
9	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Offic	ce sought		Office he	eld
	Date	Payee name	9					
	10/24/2025	Interpretati	va LLP Cinco Rios	Multilingual	Initiative	es		
	Amount (\$)	Payee addr	ess; City;	State; Z	ip Code			
	\$1,100.00	2702 Mora	les St					
X	Expenditure from corporate funds	San Anton	io, TX 78207					
	PURPOSE	(a) Category (	See Categories listed at the	top of this schedule	e) <b>(b</b> )	Description		
	OF EXPENDITURE	Event Exp	ense			Check if travel of	outside of Texas. Com	plete Schedule T.
						Language into	erpretation for	event on 10/22/2025
	Complete ONLY if direct expenditure to benefit C/OF		ficeholder name	Offic	ce sought		Office he	eld
	Date	Payee name	9					
	10/22/2025	La Boujee						
	Amount (\$)	Payee addr	ess; City;	State; Z	ip Code			
	\$849.77	10200 McI	Kenzie rd					
	T Expenditure from							
Х	corporate funds	Austin, TX	78719					
	PURPOSE OF		See Categories listed at the	top of this schedule	e) <b>(b</b> )	Description		
	EXPENDITURE	Food/Beve	rage Expense			Check if travel of	outside of Texas. Com	plete Schedule T.
						Food for ever	nt on 10/22/202	25 opposing Prop. 15
	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Offic	ce sought		Office he	eld

### **POLITICAL EXPENDITURES**

## 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

	oense Donations Made B Officeholder/Politica		Gift/A Legal	Beverage Expense wards/Memorials Explanation Services		Polling Exp Printing Ex Salaries/W	ense pens ages	e /Contract Labor		Travel in Distri	ict District	ry not listed above)	
			Ine	Instruction Guide	e expiains n	low to con	npie	te this form.					
1 Total pages Sch: 3/3	Schedule F1: Rpt: 6/14	1	R NAME 's Due Prod	cess					3	Filer ID 00090195	,	cs Commission Filers)	
4 Date		5 Paye	name						<u> </u>				_
10/22/2025	5	1	, Cherokee	<b>:</b>									
6 Amount (\$)		<b>7</b> Paye	e address;	City;	State;	Zip Cod	de						
	\$350.00	1300	0 Meadowl	heath Cove									
X Expenditure corporate fu		Austi	n, TX 7872	29									
8 PURPOS	SE	(a) Categ	JOry (See Cat	egories listed at the t	op of this sche	edule)	(b)	Description					
OF EXPENDIT	URE	1	t Expense					Check if travel	outsi	ide of Texas. Co	mplete So	chedule T.	
								Entertainmer	nt fo	or educatio	nal eve	ent on 10.22.2025	
9 Complete Ol expenditure	NLY if direct to benefit C/O		late/Officeho	older name	Of	ffice souç	ght			Office	held		
Date		Paye	e name										
10/17/2025	5	Ortiz	, Amanda										
Amount (\$)		Paye	e address;	City;	State;	Zip Cod	de						
	\$325.00	5417	Baythorne	. Dr									
		Unit	Α										
X Expenditure corporate fu			n, TX 7974	17									
PURPOS	SE	(a) Categ	ory (See Cat	egories listed at the t	top of this sche	edule)	(b)	Description					
OF EXPENDIT	URE	1	t Expense					Check if travel	outsi	ide of Texas. Co	mplete So	chedule T.	
												as entertainment to oppose P 15	or
Complete <u>Ol</u> expenditure	NLY if direct to benefit C/O		late/Officeho	older name	Ot	ffice souç	ght			Office	held		
Date		Pave	e name										_
10/25/2025	i .		)ragHaus										
Amount (\$)		Paye	e address;	City;	State;	Zip Cod	de						
	\$240.00												
X Expenditure corporate fu		Lared	do, TX 780	40									
PURPOS	SE	(a) Categ	Jory (See Cat	egories listed at the t	op of this sche	edule)	(b)	Description					
OF EXPENDIT	URE	Even	t Expense					Check if travel	outsi	ide of Texas. Co	mplete So	chedule T.	
								Entertainmer Prop 15	nt fo	or event on	10.25	.2025 opposing	
Complete <u>Ol</u> expenditure	NLY if direct to benefit C/O		late/Officeho	older name	Of	ffice soug	ght			Office	held		
													$\dashv$

#### SCHEDULE F2

Advertising Expense Accounting/Banking	Event Expense Fees	Office Ove	ayment/Reimbursement erhead/Rental Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense	
Consulting Expense Contributions/ Donations Made By	Food/Beverage Expense y - Gift/Awards/Memorials Expens		kpense	Travel in District Travel Out of District	
Candidate/Officeholder/Politica	l Committee Legal Services  The Instruction Guide ex		/ages/Contract Labor mplete this form.	OTHER (enter a category not listed above)	
1 Total pages Schedule F2:		•	·	3 Filer ID (Ethics Commission Filer	rs)
Sch: 1/6 Rpt: 7/14	Jane's Due Process			00090195	
4 TOTAL OF UNITEMIZ	ZED UNPAID INCURRED OBLIG	GATIONS		\$	
5 Date 10/22/2025	6 Payee name Arzu, Serena				
7 Amount (\$)	8 Payee address; City;	State; Zip Co	de		
\$150.00	1111 Post Oak Blvd				
Expenditure from	Apt 430				
corporate funds	Houston, TX 77056				
9 TYPE OF EXPENDITURE	Political	Non-Pol	tical Not Ap	olicable for Form DCE	
10 PURPOSE OF	(a) Category (See Categories listed at the top of	of this schedule)	(b) Description	autoido of Taura Consulato Cabadula T	
EXPENDITURE	Event Expense		Check if travel	outside of Texas. Complete Schedule T.	
			Panelist for 6	event on 10/22/2025 opposing Prop	15.
11 Complete ONLY if direct	Candidate/Officeholder name	Office sou	ght	Office held	
expenditure to benefit C/OI	<b>-</b>				
Date	Payee name				
10/25/2025	Bernal, Leann				
Amount (\$)	Payee address; City;	State; Zip Co	de		
Amount (\$) \$150.00	Payee address; City;	State; Zip Co	de		
\$150.00  X Expenditure from corporate funds	Laredo, TX 78040	State; Zip Co	de		
\$150.00		State; Zip Co		plicable for Form DCE	
\$150.00  X Expenditure from corporate funds  TYPE OF EXPENDITURE  PURPOSE	Laredo, TX 78040  Political  (a) Category (See Categories listed at the top of	Non-Poli	tical Not Ap		
\$150.00  X Expenditure from corporate funds  TYPE OF EXPENDITURE	Laredo, TX 78040	Non-Poli	tical Not Ap	Dlicable for Form DCE outside of Texas. Complete Schedule T.	
\$150.00    X   Expenditure from corporate funds    TYPE OF EXPENDITURE	Laredo, TX 78040  Political  (a) Category (See Categories listed at the top of	Non-Poli	tical Not Ap  (b) Description  Check if travel		15.
\$150.00    X   Expenditure from corporate funds    TYPE OF EXPENDITURE	Laredo, TX 78040  Political  (a) Category (See Categories listed at the top of	Non-Poli	tical Not Ap  (b) Description  Check if travel	outside of Texas. Complete Schedule T.	15.
\$150.00    X   Expenditure from corporate funds    TYPE OF EXPENDITURE	Laredo, TX 78040  Political  (a) Category (See Categories listed at the top of Event Expense  Candidate/Officeholder name	Non-Poli	tical Not App  (b) Description Check if travel  Panelist for 6	outside of Texas. Complete Schedule T.	15.
\$150.00  Expenditure from corporate funds  TYPE OF EXPENDITURE  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Laredo, TX 78040  Political  (a) Category (See Categories listed at the top of Event Expense  Candidate/Officeholder name	Non-Poli	tical Not App  (b) Description Check if travel  Panelist for 6	outside of Texas. Complete Schedule T. event on 10.25.2025 opposing Prop	15.
\$150.00  Expenditure from corporate funds  TYPE OF EXPENDITURE  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Laredo, TX 78040  Political  (a) Category (See Categories listed at the top of Event Expense  Candidate/Officeholder name	Non-Poli	tical Not App  (b) Description Check if travel  Panelist for 6	outside of Texas. Complete Schedule T. event on 10.25.2025 opposing Prop	15.
\$150.00  Expenditure from corporate funds  TYPE OF EXPENDITURE  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Laredo, TX 78040  Political  (a) Category (See Categories listed at the top of Event Expense  Candidate/Officeholder name	Non-Poli	tical Not App  (b) Description Check if travel  Panelist for 6	outside of Texas. Complete Schedule T. event on 10.25.2025 opposing Prop	15.
\$150.00  Expenditure from corporate funds  TYPE OF EXPENDITURE  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Laredo, TX 78040  Political  (a) Category (See Categories listed at the top of Event Expense  Candidate/Officeholder name	Non-Poli	tical Not App  (b) Description Check if travel  Panelist for 6	outside of Texas. Complete Schedule T. event on 10.25.2025 opposing Prop	15.
\$150.00  Expenditure from corporate funds  TYPE OF EXPENDITURE  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Laredo, TX 78040  Political  (a) Category (See Categories listed at the top of Event Expense  Candidate/Officeholder name	Non-Poli	tical Not App  (b) Description Check if travel  Panelist for 6	outside of Texas. Complete Schedule T. event on 10.25.2025 opposing Prop	15.
\$150.00  Expenditure from corporate funds  TYPE OF EXPENDITURE  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Laredo, TX 78040  Political  (a) Category (See Categories listed at the top of Event Expense  Candidate/Officeholder name	Non-Poli	tical Not App  (b) Description Check if travel  Panelist for 6	outside of Texas. Complete Schedule T. event on 10.25.2025 opposing Prop	15.
\$150.00  Expenditure from corporate funds  TYPE OF EXPENDITURE  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Laredo, TX 78040  Political  (a) Category (See Categories listed at the top of Event Expense  Candidate/Officeholder name	Non-Poli	tical Not App  (b) Description Check if travel  Panelist for 6	outside of Texas. Complete Schedule T. event on 10.25.2025 opposing Prop	15.
\$150.00  Expenditure from corporate funds  TYPE OF EXPENDITURE  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Laredo, TX 78040  Political  (a) Category (See Categories listed at the top of Event Expense  Candidate/Officeholder name	Non-Poli	tical Not App  (b) Description Check if travel  Panelist for 6	outside of Texas. Complete Schedule T. event on 10.25.2025 opposing Prop	15.
\$150.00  Expenditure from corporate funds  TYPE OF EXPENDITURE  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Laredo, TX 78040  Political  (a) Category (See Categories listed at the top of Event Expense  Candidate/Officeholder name	Non-Poli	tical Not App  (b) Description Check if travel  Panelist for 6	outside of Texas. Complete Schedule T. event on 10.25.2025 opposing Prop	15.
\$150.00  Expenditure from corporate funds  TYPE OF EXPENDITURE  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Laredo, TX 78040  Political  (a) Category (See Categories listed at the top of Event Expense  Candidate/Officeholder name	Non-Poli	tical Not App  (b) Description Check if travel  Panelist for 6	outside of Texas. Complete Schedule T. event on 10.25.2025 opposing Prop	15.

#### SCHEDULE F2

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

Advertising Expense Accounting/Banking Consulting Expense	Fees Office ( Food/Beverage Expense Polling	epayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Expense Travel in District
Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services Salarie	j Expense Travel Out of District s/Wages/Contract Labor OTHER (enter a category not listed above)
4 7 1 0 1 1 50	The Instruction Guide explains how to	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F2: Sch: 2/6 Rpt: 8/14	Jane's Due Process	3 Filer ID (Ethics Commission Filers) 00090195
4	ZED UNPAID INCURRED OBLIGATIONS	\$
5 Date	6 Payee name	
10/16/2025	Democrasexy, LLC	
7 Amount (\$) \$250.00	8 Payee address; City; State; Zip ( 1409 Newton Street	Code
X Expenditure from corporate funds	Austin, TX 78704	
9 TYPE OF EXPENDITURE	Political Non-P	olitical Not Applicable for Form DCE
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense	(b) Description  Check if travel outside of Texas. Complete Schedule T.
		Paid influencer to make video and post to social media opposing Prop. 15.
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	ought Office held
Date	Payee name	
10/22/2025	Giles, Mandy	
Amount (\$) \$150.00	Payee address; City; State; Zip (	Code
X Expenditure from corporate funds	Houston, TX 77006	
TYPE OF EXPENDITURE	Political Non-P	olitical Not Applicable for Form DCE
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.
		Panelist for educational event on 10/22/2025 opposing prop 15.
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	ought Office held

## SCHEDULE F2

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee 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)
	·	ins how to complete this form.	
1 Total pages Schedule F2:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 3/6 Rpt: 9/14	Jane's Due Process		00090195
4 TOTAL OF UNITEMIZ	ZED UNPAID INCURRED OBLIGA	TIONS	\$
5 Date	6 Payee name		
10/22/2025	Jay Visuals Media		
7 Amount (\$)	8 Payee address; City; St	tate; Zip Code	
\$3,165.00	3441 McCrae Crossing		
Expenditure from			
X Expenditure from corporate funds	San Antonio, TX 78264		
9 TYPE OF EXPENDITURE	Political	Non-Political Not App	olicable for Form DCE
10 PURPOSE	(a) Category (See Categories listed at the top of this	s schedule) (b) Description	
OF EXPENDITURE	Event Expense	Check if travel	outside of Texas. Complete Schedule T.
EXI ENDITORE		Divisional	and all and the standards for a second
			and other visual media for event on pposing Proposition 15.
44. Occupate ONLY if alice at	Open distanta (Office de al de autoria		
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
10/23/2025	Longoria, Ricardo		
Amount (\$)	Payee address; City; St	tate; Zip Code	
\$800.00	901 S. CR. 101		
Evpanditura from			
X Expenditure from corporate funds	Falfurrias, TX 78355		
TYPE OF EXPENDITURE	Political	Non-Political Not App	olicable for Form DCE
PURPOSE	(a) Category (See Categories listed at the top of this	s schedule) (b) Description	
OF EXPENDITURE	Advertising Expense	Check if travel	outside of Texas. Complete Schedule T.
LXI LINDITORE		5	
		Paid influence media oppos	er to make video and post to social ing Prop. 15.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held
l			

#### SCHEDULE F2

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Office Overher Food/Beverage Expense Polling Expens y- Gift/Awards/Memorials Expense Printing Expen	ent/Reimbursement Solicitation/Fundraising Expense ad/Rental Expense Transportation Equipment & Related Expense Travel in District
	The Instruction Guide explains how to compl	lete this form.
1 Total pages Schedule F2:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/6 Rpt: 10/14	Jane's Due Process	00090195
4 TOTAL OF UNITEMIX	ZED UNPAID INCURRED OBLIGATIONS	\$
5 Date	6 Payee name	
10/25/2025	Padron , Mary Jane	
7 Amount (\$) \$150.00	8 Payee address; City; State; Zip Code	
X Expenditure from corporate funds	Brownsville, TX	
9 TYPE OF EXPENDITURE	Political Non-Politica	Not Applicable for Form DCE
10 PURPOSE OF		Description
EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
		Panelist for event on 10.25.2025 opposing Prop 15.
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held
Date	Payee name	
10/25/2025	Ramírez , Carolina	
Amount (\$) \$150.00	Payee address; City; State; Zip Code	
X Expenditure from corporate funds	Laredo, TX 78040	
TYPE OF EXPENDITURE	Political Non-Politica	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense	Description  Check if travel outside of Texas. Complete Schedule T.
		Panelist for event on 10.25.2025 opposing Prop 15.
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

#### SCHEDULE F2

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	The Instruction Guide explain	s how to complete this form.	
1 Total pages Schedule F2: Sch: 5/6 Rpt: 11/14	2 FILER NAME Jane's Due Process		3 Filer ID (Ethics Commission Filers) 00090195
4 TOTAL OF UNITEMIZ	ZED UNPAID INCURRED OBLIGATI	ONS	\$
5 Date 10/25/2025	6 Payee name Renteria, Reanna		
7 Amount (\$) \$150.00	8 Payee address; City; Stat	re; Zip Code	
X Expenditure from corporate funds	Laredo, TX 78041		
9 TYPE OF EXPENDITURE	Political	Non-Political Not App	plicable for Form DCE
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this s Event Expense	Check if travel	outside of Texas. Complete Schedule T.  event opposing Prop 15 on 10.25.2025
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/22/2025	Payee name Sanchez, Joslynn		
Amount (\$) \$150.00	Payee address; City; Stat	e; Zip Code	
X Expenditure from corporate funds	Austin, TX		
TYPE OF EXPENDITURE	Political	Non-Political Not App	plicable for Form DCE
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this s Event Expense	Check if travel	outside of Texas. Complete Schedule T. event on 10/22/2025 opposing Prop 15.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name H	Office sought	Office held

## SCHEDULE F2

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

Advertising Expense Accounting/Banking Consulting Expense	Event Expense Loan Repayment/Reimburser Fees Office Overhead/Rental Exper Food/Beverage Expense Polling Expense	
Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awards/Memorials Expense Printing Expense	Travel Out of District
	The Instruction Guide explains how to complete this forn	, , , , , , , , , , , , , , , , , , , ,
1 Total pages Schedule F2:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 6/6 Rpt: 12/14	Jane's Due Process	00090195
4 TOTAL OF UNITEMIZ	ZED UNPAID INCURRED OBLIGATIONS	\$
<b>5</b> Date 10/25/2025	6 Payee name TheDragHaus	
7 Amount (\$) \$240.00	8 Payee address; City; State; Zip Code	
Expenditure from corporate funds	Laredo, TX 78040	
9 TYPE OF EXPENDITURE	Political Non-Political Non-Political	t Applicable for Form DCE
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if	1 travel outside of Texas. Complete Schedule T.
EM EMBRIONE	Entertain Prop 15.	nment for event on 10.25.2025 opposing
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held
Date	Payee name	
10/17/2025	Tracy Leigh Graphic Design, LLC	
Amount (\$) \$165.00	Payee address; City; State; Zip Code PO Box 1095	
X Expenditure from corporate funds	Tabernash, CO 80478	
TYPE OF EXPENDITURE	Political Non-Political Non-Political	t Applicable for Form DCE
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Printing Expense  (b) Description  Check if	Travel outside of Texas. Complete Schedule T.
		designer designed signs for events g Proposition 15 on 10.22.2025 and
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

#### **EXPENDITURES MADE BY CREDIT CARD**

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
Sch: 1/2 Rpt: 13/14	Jane's Due Process	S		00090195				
4 CREDIT CARD ISSUER	Name of financial institution Sutton Bank		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
X Expenditure from corporate funds	\$64.95	10/20/2025						
7 PAYEE	(a) Payee name  Big G Graphics		(b) Payee address;	City, State, Zip Code				
			3330 Falcon Grove Dr					
			San Antonio, TX 78247					
8 PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description Signs for events on 10/22/2025 and 10/25/2025 opposing Proposition 15.					
Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.							
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	ce sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
X Expenditure from corporate funds	\$735.00	09/18/2025	10/19/2025 10/19/2025					
PAYEE	(a) Payee name  Vice Events		(b) Payee address;	City, State, Zip Code				
			215 Coca-Cola Pl #311					
			San Antonio, TX 78219					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Description  Reserve rental of event space for event on 10/22/2025 to					
Political	Event Expense		oppose Prop 15.					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.						
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	ce sought	Office held				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
Expenditure from corporate funds	\$485.00	09/16/2025	09/19/2025 10/19/2025					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
No. 5		215 Coca-Cola Pl						
Vice Events		#311						
		San Antonio, TX 78219						
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)		(b) Description					
EXPENDITURE	Event Expense	of this scriedule)	Reserve event space rental for event on 10/22/2025 to oppose Prop. 15.					
Political	cal (c) Check if travel outside of Texas. Complete Schedule T.							
Non-Political								
Complete ONLY if direct expenditure to benefit C/OH  Candidate/Officeholder name Office sought Office held								
i								

#### **EXPENDITURES MADE BY CREDIT CARD**

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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	r - Gift/Award: Il Committee Legal Serv		Printing Expense T	ravel in District ravel Out of District ITHER (enter a category not listed above)	
_	Total manage Cabadula E4		Tuotion Guide explains i	non to complete this form	2 Files ID (Ethics Commission Files)	
	Total pages Schedule F4:				3 Filer ID (Ethics Commission Filers)	
	Sch: 2/2 Rpt: 14/14	Jane's Due Process			00090195	
4	CREDIT CARD	Name of financial institution		5 TOTAL OF UNITEMIZED		
	ISSUER	see pi	revious	EXPENDITURES CHARGED TO A CREDIT	- \$	
				CARD		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid	
	χ Expenditure from	\$749.00	10/24/2025			
	corporate funds	Φ749.00	10/24/2025			
7	PAYEE	(a) Dayon nama		(b) Payee address;	City State Zin Code	
<b>'</b>	FAILL	(a) Payee name			City, State, Zip Code	
		Meson Wheels		819 Iturbide St		
				Laredo, TX 78040		
8	PURPOSE OF	(a) Category (See Categories listed at the top	of this schedule)	(b) Description		
	EXPENDITURE	Food/Beverage Expe	•		Food and beverage for event on 10.25.2025 opposing Prop.	
	Political	F000/beverage Expense		15.		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	Э T.		
9	Complete ONLY if direct	Candidate/Officeholder	name C	Office sought	Office held	
	xpenditure to benefit C/OH					