DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT

FORM DCE
COVER SHEET PG 1

The DCE Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers): 00090195

2 Total pages filed: 14

3 FILER NAME

MS / MRS / MR | FIRST | MI

NICKNAME | LAST | SUFFIX

Jane's Due Process

4 FILER ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

1401 Lavaca St
PMB 41363
Austin, TX 78701

5 FILER PHONE

AREA CODE | PHONE NUMBER | EXTENSION

(512) 945-7498

6 REPORT TYPE

- [ ] January 15
- [ ] July 15
- [ ] 30th day before election
- [X] 8th day before election
- [ ] Runoff

7 PERIOD COVERED

Month Day Year: 09/16/2025 THROUGH Month Day Year: 10/25/2025

8 ELECTION

ELECTION DATE: Month Day Year: 11/04/2025

ELECTION TYPE

- [ ] Primary
- [ ] Runoff
- [ ] Other
- [X] General
- [ ] Special

9 FILER ACTIVITY

(Attach lists on plain paper to complete this report if necessary.)

1. Candidates
(Identify by name or, if applicable, classify by party.)
   - A. Supported
   - B. Opposed

2. Measures
(Describe by date and location of election and nature of issue.)
   - A. Supported
   - B. Opposed: Ballot ID:Prop. 15 Election Date:2025-11-04 Desc:"Constitutional amendment affirming that parents are the primary decision makers for their children"

3. Officeholders Assisted
(Identify by name or, if applicable, classify by party.)

OFFICE USE ONLY

Date Received: ELECTRONICALLY FILED 10/27/2025

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

GO TO PAGE 2

DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT

FORM DCE
COVER SHEET PG 2

10 FILER NAME Jane's Due Process		**11** Filer ID (Ethics Commission Filers) 00090195	
12 EXPENDITURE TOTALS	1. TOTAL UNITEMIZED POLITICAL EXPENDITURES	**$**	0.00
	2. TOTAL POLITICAL EXPENDITURES	**$**	12,244.38

13 AFFIDAVIT

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

Signature of Filer
or
Signature of individual with authority to sign on behalf of entity

(only if Filer is an entity)

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of_____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

SUBTOTALS - DCE

FORM DCE

COVER SHEET PG 3

14 FILER NAME	**15** Filer ID (Ethics Commission Filers)
Jane's Due Process	00090195

16 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. [X] SCHEDULE F1: POLITICAL EXPENDITURES	**$** 4,540.43
2. [X] SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	**$** 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	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 OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	[ ] Check if travel outside of Texas. Complete Schedule T. Hired as entertainment at educational event on 10/22/2025 to oppose Prop 15.

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office 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
[X] Expenditure from corporate funds	Laredo, TX 78041

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	[ ] Check if travel outside of Texas. Complete Schedule T. Hotel for panelist speaking at event on 10.25.2025 opposing Proposition 15.

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office 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
[X] Expenditure from corporate funds	Laredo, TX 78041

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	[ ] Check if travel outside of Texas. Complete Schedule T. Hotel for panelist speaking at event on 10.25.2025 opposing Proposition 15.

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/3 Rpt: 5/14	Jane's Due Process	00090195

4 Date	5 Payee name
10/23/2025	Holiday Inn Express Laredo

6 Amount ($)	7 Payee address; City; State; Zip Code
$425.22	7223 Bob Bullock Lp
[X] Expenditure from corporate funds	Laredo, TX 78041

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	[ ] Check if travel outside of Texas. Complete Schedule T. Hotel for panelist speaking at event on 10.25.2025 opposing Proposition 15.

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
10/24/2025	Interpretativa LLP Cinco Rios Multilingual Initiatives

Amount ($)	Payee address; City; State; Zip Code
$1,100.00	2702 Morales St
[X] Expenditure from corporate funds	San Antonio, TX 78207

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	[ ] Check if travel outside of Texas. Complete Schedule T. Language interpretation for event on 10/22/2025

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
10/22/2025	La Boujee

Amount ($)	Payee address; City; State; Zip Code
$849.77	10200 McKenzie rd
[X] Expenditure from corporate funds	Austin, TX 78719

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Food/Beverage Expense	[ ] Check if travel outside of Texas. Complete Schedule T. Food for event on 10/22/2025 opposing Prop. 15

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 3/3 Rpt: 6/14	Jane's Due Process	00090195

4 Date	5 Payee name
10/22/2025	Lake, Cherokee

6 Amount ($)	7 Payee address; City; State; Zip Code
$350.00	13000 Meadowheath Cove
[X] Expenditure from corporate funds	Austin, TX 78729

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	[ ] Check if travel outside of Texas. Complete Schedule T. Entertainment for educational event on 10.22.2025

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
10/17/2025	Ortiz, Amanda

Amount ($)	Payee address; City; State; Zip Code
$325.00	5417 Baythorne Dr Unit A
[X] Expenditure from corporate funds	Austin, TX 79747

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	[ ] Check if travel outside of Texas. Complete Schedule T. Hired to host pen decorating bar as entertainment for educational event on 10/22/2025 to oppose P 15

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
10/25/2025	TheDragHaus

Amount ($)	Payee address; City; State; Zip Code
$240.00	
[X] Expenditure from corporate funds	Laredo, TX 78040

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	[ ] Check if travel outside of Texas. Complete Schedule T. Entertainment for event on 10.25.2025 opposing Prop 15

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

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 F2:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/6 Rpt: 7/14	Jane's Due Process	00090195

4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS — **$**

5 Date: 10/22/2025

6 Payee name: Arzu, Serena

7 Amount ($): $150.00

[X] Expenditure from corporate funds

8 Payee address; City; State; Zip Code:
1111 Post Oak Blvd
Apt 430
Houston, TX 77056

9 TYPE OF EXPENDITURE

[ ] Political [ ] Non-Political Not 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 travel outside of Texas. Complete Schedule T.

Panelist for event on 10/22/2025 opposing Prop 15.

11 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

---

Date: 10/25/2025

Payee name: Bernal, Leann

Amount ($): $150.00

[X] Expenditure from corporate funds

Payee address; City; State; Zip Code:
Laredo, TX 78040

TYPE OF EXPENDITURE

[ ] Political [ ] Non-Political 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 event on 10.25.2025 opposing Prop 15.

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F2:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/6 Rpt: 8/14	Jane's Due Process	00090195

4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	$

5 Date	6 Payee name
10/16/2025	Democrasexy, LLC

7 Amount ($)	8 Payee address; City; State; Zip Code
$250.00	1409 Newton Street
[X] Expenditure from corporate funds	Austin, TX 78704

9 TYPE OF EXPENDITURE	[ ] Political	[ ] Non-Political	Not Applicable for Form DCE

10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Advertising Expense	[ ] 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/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
10/22/2025	Giles, Mandy

Amount ($)	Payee address; City; State; Zip Code
$150.00	
[X] Expenditure from corporate funds	Houston, TX 77006

TYPE OF EXPENDITURE	[ ] Political	[ ] Non-Political	Not Applicable for Form DCE

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	[ ] Check if travel outside of Texas. Complete Schedule T. Panelist for educational event on 10/22/2025 opposing prop 15.

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F2:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 3/6 Rpt: 9/14	Jane's Due Process	00090195

4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	$

5 Date	6 Payee name
10/22/2025	Jay Visuals Media

7 Amount ($)	8 Payee address; City; State; Zip Code
$3,165.00	3441 McCrae Crossing
[X] Expenditure from corporate funds	San Antonio, TX 78264

9 TYPE OF EXPENDITURE	[ ] Political	[ ] Non-Political	Not Applicable for Form DCE

10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	[ ] Check if travel outside of Texas. Complete Schedule T. Photography and other visual media for event on 10/22/2025 opposing Proposition 15.

11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
10/23/2025	Longoria, Ricardo

Amount ($)	Payee address; City; State; Zip Code
$800.00	901 S. CR. 101
[X] Expenditure from corporate funds	Falfurrias, TX 78355

TYPE OF EXPENDITURE	[ ] Political	[ ] Non-Political	Not Applicable for Form DCE

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Advertising Expense	[ ] Check if travel outside of Texas. Complete Schedule T. Paid influencer to make video and post to social media opposing Prop. 15.

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F2:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/6 Rpt: 10/14	Jane's Due Process	00090195

4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS — **$**

5 Date: 10/25/2025

6 Payee name: Padron , Mary Jane

7 Amount ($): $150.00

[X] Expenditure from corporate funds

8 Payee address; City; State; Zip Code: Brownsville, TX

9 TYPE OF EXPENDITURE: [ ] Political [ ] Non-Political — Not 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 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/OH — Candidate/Officeholder name — Office sought — Office held

---

Date: 10/25/2025

Payee name: Ramírez , Carolina

Amount ($): $150.00

[X] Expenditure from corporate funds

Payee address; City; State; Zip Code: Laredo, TX 78040

TYPE OF EXPENDITURE: [ ] Political [ ] Non-Political — 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 event on 10.25.2025 opposing Prop 15.

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F2:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 5/6 Rpt: 11/14	Jane's Due Process	00090195

4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	$

5 Date	6 Payee name
10/25/2025	Renteria, Reanna

7 Amount ($)	8 Payee address; City; State; Zip Code
$150.00	Laredo, TX 78041
[X] Expenditure from corporate funds	

9 TYPE OF EXPENDITURE	[ ] Political	[ ] Non-Political	Not Applicable for Form DCE

10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	[ ] Check if travel outside of Texas. Complete Schedule T. Panelist for 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	Payee name
10/22/2025	Sanchez, Joslynn

Amount ($)	Payee address; City; State; Zip Code
$150.00	Austin, TX
[X] Expenditure from corporate funds	

TYPE OF EXPENDITURE	[ ] Political	[ ] Non-Political	Not Applicable for Form DCE

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	[ ] Check if travel outside of Texas. Complete Schedule T. Panelist for event on 10/22/2025 opposing Prop 15.

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F2:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 6/6 Rpt: 12/14	Jane's Due Process	00090195

4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	$

5 Date	6 Payee name
10/25/2025	TheDragHaus

7 Amount ($)	8 Payee address; City; State; Zip Code
$240.00	Laredo, TX 78040
☐ Expenditure from corporate funds	

9 TYPE OF EXPENDITURE	☐ Political ☐ Non-Political	Not Applicable for Form DCE

10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Event Expense	☐ Check if travel outside of Texas. Complete Schedule T. Entertainment for event on 10.25.2025 opposing Prop 15.

11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
10/17/2025	Tracy Leigh Graphic Design, LLC

Amount ($)	Payee address; City; State; Zip Code
$165.00	PO Box 1095
☒ Expenditure from corporate funds	Tabernash, CO 80478

TYPE OF EXPENDITURE	☐ Political ☐ Non-Political	Not Applicable for Form DCE

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Printing Expense	☐ Check if travel outside of Texas. Complete Schedule T. Graphic designer designed signs for events opposing Proposition 15 on 10.22.2025 and

Complete ONLY if direct expenditure to benefit C/OH	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		00090195
4 CREDIT CARD ISSUER	Name of financial institution: Sutton Bank	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**

6 PAYMENT [X] Expenditure from corporate funds	(a) Amount Charged: $64.95	(b) Date of Charge: 10/20/2025	(c) Date(s) Credit Card Issuer Paid:
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 [ ] Non-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.
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT [X] Expenditure from corporate funds	(a) Amount Charged: $735.00	(b) Date of Charge: 09/18/2025	(c) Date(s) Credit Card Issuer Paid: 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 [ ] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule): Event Expense		(b) Description: Reserve rental of event space for event on 10/22/2025 to oppose Prop 15.
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

PAYMENT [ ] Expenditure from corporate funds	(a) Amount Charged: $485.00	(b) Date of Charge: 09/16/2025	(c) Date(s) Credit Card Issuer Paid: 09/19/2025 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 [ ] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule): Event Expense		(b) Description: Reserve event space rental for event on 10/22/2025 to oppose Prop. 15.
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F4: Sch: 2/2 Rpt: 14/14	**2** FILER NAME Jane's Due Process		**3** Filer ID (Ethics Commission Filers) 00090195
4 CREDIT CARD ISSUER	Name of financial institution see previous	**5** TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	**$**
6 PAYMENT [X] Expenditure from corporate funds	(a) Amount Charged $749.00 / (b) Date of Charge 10/24/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE	(a) Payee name Meson Wheels	(b) Payee address; City, State, Zip Code 819 Iturbide St Laredo, TX 78040	
8 PURPOSE OF EXPENDITURE [ ] Political [ ] Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Food and beverage for event on 10.25.2025 opposing Prop. 15.	
	(c) [ ] Check if travel outside of Texas. Complete Schedule T.		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held