

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM JCOR-C/OH

1 Filer ID 00068781		2 Total pages filed: 48		OFFICE USE ONLY				
3 CANDIDATE / OFFICEHOLDER NAME		FIRST The Honorable Stephanie N.		Date Received ELECTRONICALLY FILED 01/11/2026				
		NICKNAME Mitchell		Date Hand-delivered or Date Postmarked				
4 ORIGINAL REPORT TYPE		<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify) _____				
		<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> Exceeded modified reporting limit	Receipt # _____				
		<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)	Amount _____				
		<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final Report (Attach C/OH-FR)	Date Processed				
5 ORIGINAL PERIOD COVERED		Month 01/01/2025	Day	Year	Month 06/30/2025	Day	Year	Date Imaged
6 EXPLANATION OF CORRECTION I mistakenly put the amount total contributions on hand from the prior report on this report. So in the report totals it showed that I only had \$888.41 when it should have read \$41,752.79. I listed all of the contributions and expenditures correctly but the total page needed the correction I am now submitted. I would respectfully request a waiver of the late-filing penalty as this was a clerical error that did not change the overall substance of the report. I sincerely apologize for any inconvenience this may have caused. It will not happen again.								

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

Semiannual reports: I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

The Honorable Stephanie N. Mitchell

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

**JUDICIAL CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM JC/OH
COVER SHEET PG 1**

The JC/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers) 00068781	2 Total pages filed: 48		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST The Honorable Stephanie N.	MI	OFFICE USE ONLY		
	NICKNAME	LAST Mitchell	SUFFIX	Date Received ELECTRONICALLY FILED 01/11/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE			Date Hand-delivered or Date Postmarked		
	REDACTED PER 254.0313, GOVT CODE			Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Mr.	MI			
	NICKNAME	LAST Tre Black	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;	ZIP CODE
	REDACTED PER 254.0313, GOVT CODE					
7 CAMPAIGN TREASURER PHONE	AREA CODE (214)	PHONE NUMBER 926-6695	EXTENSION			
8 REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded modified reporting limit	<input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month 01/01/2025	Day	Year	Month 06/30/2025	Day	Year
10 ELECTION	ELECTION DATE Month 03/03/2026		Day	ELECTION TYPE		
			Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other
				<input type="checkbox"/> General	<input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) District Judge District 291 Dallas			12 OFFICE SOUGHT (if known) District Judge District 291		

GO TO PAGE 2

**JUDICIAL CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM JC/OH
COVER SHEET PG 2**

3 of 48

13 C / OH NAME	Mitchell, Stephanie N. (The Honorable)		14 Filer ID (Ethics Commission Filers) 00068781												
15 NOTICE FROM POLITICAL COMMITTEE(S)	<p>This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.</p> <table border="1"> <tr> <td><input type="checkbox"/> Additional Pages</td> <td>COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td></td> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td></td> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>			<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS		<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			COMMITTEE CAMPAIGN TREASURER ADDRESS
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME													
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS													
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME													
		COMMITTEE CAMPAIGN TREASURER ADDRESS													
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00												
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 49,583.58												
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 1,313.62												
	4. TOTAL POLITICAL EXPENDITURES		\$ 8,719.20												
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 41,752.79												
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 49.02												
17 AFFIDAVIT															
<p>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.</p> <p>The Honorable Stephanie N. Mitchell _____ Signature of Candidate or Officeholder</p>															
AFFIX NOTARY STAMP / SEAL ABOVE															
Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.															
Signature of officer administering oath		Printed name of officer administering oath													
		Title of officer administering oath													

SUBTOTALS - JC/OH**FORM JC/OH
COVER SHEET PG 3**

4 of 48

18 FILER NAME	19 Filer ID (Ethics Commission Filers) 00068781
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A(J): MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) \$ 49,583.58	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$	
3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) \$	
4. <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL) \$	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 7,813.42	
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$	
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$	
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 905.78	
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$	
11. <input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 905.78	
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/27 Rpt: 5/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adler, Frank (Mr.) 6 Contributor address; City; State; Zip Code Dallas, TX 75214	7 Amount of Contribution (\$) \$257.94
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Frank Adler Law Firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/28/2025 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Michael (Mr.) 6 Contributor address; City; State; Zip Code Dallas, TX 75211		7 Amount of Contribution (\$) \$5,000.00
Contributor's Principal Occupation Real Estate Agent		Contributor's Job Title Real Estate Agent
Contributor's employer/law firm Serenity Estates, LLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Albert 6 Contributor address; City; State; Zip Code Dallas, TX 75203		7 Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation Owner On Target Solutions		Contributor's Job Title Owner
Contributor's employer/law firm On Target Solutions		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/27 Rpt: 6/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blacknall, Sharita 6 Contributor address; City; State; Zip Code Rockwall, TX 75087	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Law Offices of Sharita Blacknall		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Box, Phyllis Contributor address; City; State; Zip Code Dallas, TX 75214		Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Senior Analyst		Contributor's Job Title Consultant
Contributor's employer/law firm Aetna		Law firm of contributor's spouse (if any) Gray Reed
If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burrell, Karl Contributor address; City; State; Zip Code Mesquite, TX 75181		Amount of Contribution (\$) \$103.48
Contributor's Principal Occupation Insurance Agent		Contributor's Job Title Agent
Contributor's employer/law firm New York Life		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/27 Rpt: 7/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byrd-Webb, Christopher	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75219	
8 Contributor's Principal Occupation Felony Court Records Clerk		9 Contributor's Job Title Supervisor
10 Contributor's employer/law firm Dallas County District Clerk's Office		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COCHRAN LAW FIRM Contributor address; City; State; Zip Code DALLAS, TX 75204		Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/24/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROCKETT, ELEANOR (Ms.) Contributor address; City; State; Zip Code GARLAND, TX 75044		Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation RETIRED		Contributor's Job Title RETIRED
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/27 Rpt: 8/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ching, Chris 6 Contributor address; City; State; Zip Code Dallas, TX 75230	7 Amount of Contribution (\$) \$515.38
8 Contributor's Principal Occupation Business Consulting		9 Contributor's Job Title Consultant
10 Contributor's employer/law firm Chin Law Firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025 Contributor address; City; State; Zip Code Fort Worth, TX 76117-6209		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025 Contributor address; City; State; Zip Code Dallas, TX 75219		Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Thomas Cox		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/27 Rpt: 9/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Angela 6 Contributor address; City; State; Zip Code Dallas, TX 75201	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation Owner		9 Contributor's Job Title Owner
10 Contributor's employer/law firm Selfwell, PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curry, Janet (Ms.) Contributor address; City; State; Zip Code Waxahachie, TX 75167		Amount of Contribution (\$) \$257.94
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/18/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, CORWYN (Mr.) Contributor address; City; State; Zip Code DALLAS, TX 75204		Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY
Contributor's employer/law firm HD LEGAL GROUP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/27 Rpt: 10/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daredia, Shoib (Mr.) 6 Contributor address; City; State; Zip Code Frisco, TX 75033	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Law Office of Shoib Daredia		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/23/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTRADA, OLEGARIO (Mr.) Contributor address; City; State; Zip Code DALLAS, TX 75211		Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY
Contributor's employer/law firm LAW OFFICE OF OLEGARIO ESTRADA		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/17/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARMER, ANTHONY (Mr.) Contributor address; City; State; Zip Code DALLAS, TX 75202		Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY
Contributor's employer/law firm THE FARMER LAW GROUP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/27 Rpt: 11/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fargo, Stephanie	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Dallas, TX 74218	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Assistant District Attorney
10 Contributor's employer/law firm Dallas County, TX		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fastlane Pro Auto	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Kennedale, TX 76060	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glatstein, Joseph (Mr.)	Amount of Contribution (\$) \$515.38
	Contributor address; City; State; Zip Code Dallas, TX 75252	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Vartabedian Hester & Haynes		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/27 Rpt: 12/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Craig 6 Contributor address; City; State; Zip Code Dallas, TX 75229	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation Manager		9 Contributor's Job Title Manager
10 Contributor's employer/law firm Culinary Innovation		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Heath (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75249		Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Heath Harris		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hasty, Gary (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75219		Amount of Contribution (\$) \$2,000.00
Contributor's Principal Occupation Real Estate Broker		Contributor's Job Title Owner
Contributor's employer/law firm KARRINGTON REALTY		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/27 Rpt: 13/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Phillip (Mr.) 6 Contributor address; City; State; Zip Code Dallas, TX 75205	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Law Office of Phillip Hayes		11 Law firm of contributor's spouse (if any) Balekian Hayes, PLLC
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/30/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) High, Precious Contributor address; City; State; Zip Code Cedar Hill, TX 75104		Amount of Contribution (\$) \$50.00
Contributor's Principal Occupation Owner		Contributor's Job Title Owner-CEO
Contributor's employer/law firm Precious Transports LLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Durrand Contributor address; City; State; Zip Code Dallas, TX 75201		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Durrand Hill		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/27 Rpt: 14/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollingsworth, Jeanette (Ms.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75210-2925	
8 Contributor's Principal Occupation Coordinator		9 Contributor's Job Title Court Coordinator
10 Contributor's employer/law firm Dallas County		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins, Newt Contributor address; City; State; Zip Code Dallas, TX 75209		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Senior AML Analyst		Contributor's Job Title Senior AML Analyst
Contributor's employer/law firm CAMS		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/23/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoy, Natasha Contributor address; City; State; Zip Code Dallas, TX 75208		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Natasha Hoy		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 11/27 Rpt: 15/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEFFREY, TIM (Mr.)	7 Amount of Contribution (\$) \$515.38
	6 Contributor address; City; State; Zip Code DALLAS, TX 75219	
8 Contributor's Principal Occupation ATTORNEY		9 Contributor's Job Title ATTORNEY
10 Contributor's employer/law firm TIM JEFFREY ATTORNEY AT LAW		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones Herbert Campbell & Marsaw LLP Contributor address; City; State; Zip Code Dallas, TX 75201		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/16/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Dvaid Contributor address; City; State; Zip Code Dallas, TX 75247		
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner
Contributor's employer/law firm Law Office of David M. Jordan, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 12/27 Rpt: 16/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Kelly-Joubert, Shequitta (Judge)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code DeSoto, TX 75115	
8 Contributor's Principal Occupation Judge		9 Contributor's Job Title Judge
10 Contributor's employer/law firm Dallas County, TX		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/28/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Kreuger, Matthew Contributor address; City; State; Zip Code Dallas, TX 74218		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Project Manager		Contributor's Job Title Project Manager
Contributor's employer/law firm Wildwood Group		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/19/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: LINDBERG, ELLYCE (Ms.) Contributor address; City; State; Zip Code DALLAS, TX 75207		Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ASSISTANT DA
Contributor's employer/law firm DALLAS COUNTY DISTRICT ATTORNEY'S OFFICE		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 13/27 Rpt: 17/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Martin Lenoir 6 Contributor address; City; State; Zip Code Dallas, TX 75219	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/26/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lessing, Katherine Contributor address; City; State; Zip Code Dallas, TX 75206		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Figari + Davenport, LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/23/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADUKA, CHARLES (Mr.) Contributor address; City; State; Zip Code Arlington, TX 76017		
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY
Contributor's employer/law firm LAW OFFICE OF CHARLES MADUKA		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 14/27 Rpt: 18/48	
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781	
4 Date 05/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYS, STANLEY (Mr.)	7 Amount of Contribution (\$) \$1,000.00	
	6 Contributor address; City; State; Zip Code Dallas, TX 75201		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title ATTORNEY	
10 Contributor's employer/law firm BAILEY & MAYS LAW OFFICES		11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)			
Date 06/03/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MC Criminal Law Contributor address; City; State; Zip Code Dallas, TX 75240	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 05/29/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIntosh, Myra Contributor address; City; State; Zip Code Dallas, TX 75212	Amount of Contribution (\$) \$1,030.26
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney	
Contributor's employer/law firm McIntosh & Ward PLLC		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 15/27 Rpt: 19/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 06/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Michael (Mr.)	7 Amount of Contribution (\$) \$1,030.26
	6 Contributor address; City; State; Zip Code Dallas, TX 75231	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Rad Law Firm		11 Law firm of contributor's spouse (if any) Dallas County District Attorney's Office
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Vervice (Mr.)		Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code McKinney, TX 75071		
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nothin But a Tea Thang, LLC		Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Arlington, TX 76005		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 16/27 Rpt: 20/48	
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781	
4 Date 05/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogueri & Associates PC 6 Contributor address; City; State; Zip Code Dallas, TX 75243	7 Amount of Contribution (\$) \$500.00	
8 Contributor's Principal Occupation		9 Contributor's Job Title	
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)			
Date 05/21/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, SCOTT (Mr.) Contributor address; City; State; Zip Code ADDISON , TX 75001	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY	
Contributor's employer/law firm PALMER PERLSTEIN		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 05/30/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul James Johnson Attorney at Law Contributor address; City; State; Zip Code Dallas, TX 75202-4401	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 17/27 Rpt: 21/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phifer, Ron 6 Contributor address; City; State; Zip Code The Colony, TX 75056	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation Vice President		9 Contributor's Job Title Vice President
10 Contributor's employer/law firm Dreamscape Hospitality		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/30/2025 Contributor address; City; State; Zip Code Dallas, TX 75228		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Researcher		Contributor's Job Title Researcher
Contributor's employer/law firm Merck		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/19/2025 Contributor address; City; State; Zip Code DALLAS, TX 75201		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY
Contributor's employer/law firm REDMOND & EILAND PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 18/27 Rpt: 22/48												
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781												
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed Prospere Attorney-At-Law 6 Contributor address; City; State; Zip Code Dallas, TX 75225	7 Amount of Contribution (\$) \$150.00												
8 Contributor's Principal Occupation		9 Contributor's Job Title												
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)												
12 If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 05/26/2025</td> <td> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reno, Barry Contributor address; City; State; Zip Code Dallas, TX 75218 </td> <td>Amount of Contribution (\$) \$100.00</td> </tr> <tr> <td colspan="2"> Contributor's Principal Occupation Attorney </td> <td>Contributor's Job Title Owner</td> </tr> <tr> <td colspan="2"> Contributor's employer/law firm Barry Reno Law Office </td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3"> If contributor is a child, law firm of parent(s) (if any) </td> </tr> </table>			Date 05/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reno, Barry Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$100.00	Contributor's Principal Occupation Attorney		Contributor's Job Title Owner	Contributor's employer/law firm Barry Reno Law Office		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 05/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reno, Barry Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$100.00												
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner												
Contributor's employer/law firm Barry Reno Law Office		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 05/30/2025</td> <td> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roemer, Stara Contributor address; City; State; Zip Code Dallas, TX 75204 </td> <td>Amount of Contribution (\$) \$200.00</td> </tr> <tr> <td colspan="2"> Contributor's Principal Occupation Attorney </td> <td>Contributor's Job Title Attorney</td> </tr> <tr> <td colspan="2"> Contributor's employer/law firm Warren Healy Law Firm </td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3"> If contributor is a child, law firm of parent(s) (if any) </td> </tr> </table>			Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roemer, Stara Contributor address; City; State; Zip Code Dallas, TX 75204	Amount of Contribution (\$) \$200.00	Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney	Contributor's employer/law firm Warren Healy Law Firm		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roemer, Stara Contributor address; City; State; Zip Code Dallas, TX 75204	Amount of Contribution (\$) \$200.00												
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney												
Contributor's employer/law firm Warren Healy Law Firm		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 19/27 Rpt: 23/48												
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781												
4 Date 05/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell Wilson II Law Office 6 Contributor address; City; State; Zip Code Dallas, TX 75201	7 Amount of Contribution (\$) \$1,000.00												
8 Contributor's Principal Occupation		9 Contributor's Job Title												
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)												
12 If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 05/21/2025</td> <td>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUMMEY, BRANDI (Mrs.) Contributor address; City; State; Zip Code DALLAS, TX 75231</td> <td>Amount of Contribution (\$) \$500.00</td> </tr> <tr> <td colspan="2"> Contributor's Principal Occupation LAW </td> <td> Contributor's Job Title ATTORNEY </td> </tr> <tr> <td colspan="2"> Contributor's employer/law firm DALLAS COUNTY DISTRICT ATTORNEY'S OFFICE </td> <td> Law firm of contributor's spouse (if any) RAD LAW FIRM </td> </tr> <tr> <td colspan="3"> If contributor is a child, law firm of parent(s) (if any) </td> </tr> </table>			Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUMMEY, BRANDI (Mrs.) Contributor address; City; State; Zip Code DALLAS, TX 75231	Amount of Contribution (\$) \$500.00	Contributor's Principal Occupation LAW		Contributor's Job Title ATTORNEY	Contributor's employer/law firm DALLAS COUNTY DISTRICT ATTORNEY'S OFFICE		Law firm of contributor's spouse (if any) RAD LAW FIRM	If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUMMEY, BRANDI (Mrs.) Contributor address; City; State; Zip Code DALLAS, TX 75231	Amount of Contribution (\$) \$500.00												
Contributor's Principal Occupation LAW		Contributor's Job Title ATTORNEY												
Contributor's employer/law firm DALLAS COUNTY DISTRICT ATTORNEY'S OFFICE		Law firm of contributor's spouse (if any) RAD LAW FIRM												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 05/22/2025</td> <td>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTTON, VALERIE (Ms.) Contributor address; City; State; Zip Code ARLINGTON, TX 76017</td> <td>Amount of Contribution (\$) \$500.00</td> </tr> <tr> <td colspan="2"> Contributor's Principal Occupation ATTORNEY </td> <td> Contributor's Job Title ATTORNEY </td> </tr> <tr> <td colspan="2"> Contributor's employer/law firm BASTON LAW PC </td> <td> Law firm of contributor's spouse (if any) </td> </tr> <tr> <td colspan="3"> If contributor is a child, law firm of parent(s) (if any) </td> </tr> </table>			Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTTON, VALERIE (Ms.) Contributor address; City; State; Zip Code ARLINGTON, TX 76017	Amount of Contribution (\$) \$500.00	Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY	Contributor's employer/law firm BASTON LAW PC		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTTON, VALERIE (Ms.) Contributor address; City; State; Zip Code ARLINGTON, TX 76017	Amount of Contribution (\$) \$500.00												
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY												
Contributor's employer/law firm BASTON LAW PC		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 20/27 Rpt: 24/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, Debora 6 Contributor address; City; State; Zip Code Dallas, TX 75247	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Sanchez & Sanchez Law Firm		11 Law firm of contributor's spouse (if any) Sanchez & Sanchez Law Firm
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Segura-Muhammad, Pamela (Ms.) Contributor address; City; State; Zip Code Plano, TX 75074		Amount of Contribution (\$) \$103.48
Contributor's Principal Occupation Attorney		Contributor's Job Title Assistant Public Defender
Contributor's employer/law firm Dallas County, Texas		Law firm of contributor's spouse (if any) The Muhammad Law Firm
If contributor is a child, law firm of parent(s) (if any)		
Date 06/12/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Clayton Contributor address; City; State; Zip Code Dallas, TX 75219		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner
Contributor's employer/law firm Clayton Smith Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 21/27 Rpt: 25/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snipes, Michael (Judge)	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75241	
8 Contributor's Principal Occupation Judge		9 Contributor's Job Title Judge
10 Contributor's employer/law firm Dallas County		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/26/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sommers, Timothy (Judge)
		Contributor address; City; State; Zip Code Rowlett, TX 75088
Contributor's Principal Occupation Judge		Contributor's Job Title Chief Magistrate
Contributor's employer/law firm Dallas County		Law firm of contributor's spouse (if any) Ibex
If contributor is a child, law firm of parent(s) (if any)		
Date 06/21/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sommers, Timothy (Judge)
		Contributor address; City; State; Zip Code Rowlett, TX 75088
Contributor's Principal Occupation Judge		Contributor's Job Title Chief Magistrate Judge
Contributor's employer/law firm Dallas County		Law firm of contributor's spouse (if any) Ibex
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 22/27 Rpt: 26/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoner, Courtney	7 Amount of Contribution (\$) \$2,000.00
	6 Contributor address; City; State; Zip Code Atlanta, GA 30339	
8 Contributor's Principal Occupation Finance Shared Services		9 Contributor's Job Title Associate
10 Contributor's employer/law firm Iron Mountain		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/19/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, DREW (Mr.) Contributor address; City; State; Zip Code DALLAS, TX 75247		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY
Contributor's employer/law firm LAW OFFICE OF DREW A. TAYLOR		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/22/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THE LAW OFFICE OF RANDEL CROSS Contributor address; City; State; Zip Code DALLAS, TX 75219		Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 23/27 Rpt: 27/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tabb, Charla 6 Contributor address; City; State; Zip Code McKinney, TX 75071	7 Amount of Contribution (\$) \$257.94
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Federal Transit Administration		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/23/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor R. Johnson Attorney at Law Contributor address; City; State; Zip Code Dallas, TX 75202-4401		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Garrett Law Office, PLLC Contributor address; City; State; Zip Code Arlington, TX 76016-1886		Amount of Contribution (\$) \$300.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 24/27 Rpt: 28/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Garrett Law Office, PLLC 6 Contributor address; City; State; Zip Code Arlington, TX 76016-1886	7 Amount of Contribution (\$) \$300.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Willis Group-Moving Forward, LLC Contributor address; City; State; Zip Code Rockwall, TX 75087		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Hunter Law Group Contributor address; City; State; Zip Code Irving, TX 75062		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 25/27 Rpt: 29/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALLOT, AARON 6 Contributor address; City; State; Zip Code LEWISVILLE, TX 75056	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation WORKFORCE AND COMMUNITY ENGAGEMENT		9 Contributor's Job Title MANAGER
10 Contributor's employer/law firm MCCARTHY BUILDING COMPANIES		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward Law Group PLLC Contributor address; City; State; Zip Code Dallas, TX 75247		Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Monique Contributor address; City; State; Zip Code DeSoto, TX 75115		Amount of Contribution (\$) \$750.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm McIntosh & Ward PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 26/27 Rpt: 30/48
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washington, Tulani 6 Contributor address; City; State; Zip Code Dallas, TX 75146	7 Amount of Contribution (\$) \$772.82
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm TR Washington Law Office PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/28/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weatherspoon, Kenneth (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75201		Amount of Contribution (\$) \$257.94
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Kenneth Weatherspoon		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/30/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Carmen (Judge) Contributor address; City; State; Zip Code Rowlett, TX 75030		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Judge		Contributor's Job Title Judge
Contributor's employer/law firm Dallas County, TX		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 27/27 Rpt: 31/48												
2 FILER NAME Mitchell, Stephanie N. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00068781												
4 Date 05/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William D Cox III Law Offices 6 Contributor address; City; State; Zip Code Dallas, TX 75201-3871	7 Amount of Contribution (\$) \$1,000.00												
8 Contributor's Principal Occupation		9 Contributor's Job Title												
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)												
12 If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 05/29/2025</td> <td> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winters, Kmeal Contributor address; City; State; Zip Code Dallas, TX 75201 </td> <td>Amount of Contribution (\$) \$200.00</td> </tr> <tr> <td colspan="2"> Contributor's Principal Occupation Vice President </td> <td>Contributor's Job Title Vice President </td> </tr> <tr> <td colspan="2"> Contributor's employer/law firm STAG Industrial, Inc. </td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3"> If contributor is a child, law firm of parent(s) (if any) </td> </tr> </table>			Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winters, Kmeal Contributor address; City; State; Zip Code Dallas, TX 75201	Amount of Contribution (\$) \$200.00	Contributor's Principal Occupation Vice President		Contributor's Job Title Vice President	Contributor's employer/law firm STAG Industrial, Inc.		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winters, Kmeal Contributor address; City; State; Zip Code Dallas, TX 75201	Amount of Contribution (\$) \$200.00												
Contributor's Principal Occupation Vice President		Contributor's Job Title Vice President												
Contributor's employer/law firm STAG Industrial, Inc.		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 05/30/2025</td> <td> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Younger, Hilari Contributor address; City; State; Zip Code DeSoto, TX 75115 </td> <td>Amount of Contribution (\$) \$500.00</td> </tr> <tr> <td colspan="2"> Contributor's Principal Occupation Owner </td> <td>Contributor's Job Title Interior Stylist </td> </tr> <tr> <td colspan="2"> Contributor's employer/law firm Ufunkshen LLC </td> <td>Law firm of contributor's spouse (if any) Sheppard Mullin Richter & Hampton LLP </td> </tr> <tr> <td colspan="3"> If contributor is a child, law firm of parent(s) (if any) </td> </tr> </table>			Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Younger, Hilari Contributor address; City; State; Zip Code DeSoto, TX 75115	Amount of Contribution (\$) \$500.00	Contributor's Principal Occupation Owner		Contributor's Job Title Interior Stylist	Contributor's employer/law firm Ufunkshen LLC		Law firm of contributor's spouse (if any) Sheppard Mullin Richter & Hampton LLP	If contributor is a child, law firm of parent(s) (if any)		
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Younger, Hilari Contributor address; City; State; Zip Code DeSoto, TX 75115	Amount of Contribution (\$) \$500.00												
Contributor's Principal Occupation Owner		Contributor's Job Title Interior Stylist												
Contributor's employer/law firm Ufunkshen LLC		Law firm of contributor's spouse (if any) Sheppard Mullin Richter & Hampton LLP												
If contributor is a child, law firm of parent(s) (if any)														

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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
Credit Card Payment	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: 1/13 Rpt: 32/48	2 FILER NAME Mitchell, Stephanie N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/19/2025	5 Payee name BARDWELL, LAKEISHA (Mrs.)	
6 Amount (\$) \$200.00	7 Payee address; City; 402 OLD YORK RD COPPELL, TX 75019	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense KICKOFF DECORATIONS
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 05/28/2025	Payee name BARDWELL, LAKEISHA (Mrs.)	
Amount (\$) \$115.00	Payee address; City; 402 OLD YORK RD COPPELL, TX 75019	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Kickoff Decorations
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 05/18/2025	Payee name CULTURESHERE	
Amount (\$) \$312.50	Payee address; City; 11314 DONNELLY AVE KANSAS CITY, MO 64134	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE UPDATES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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
Credit Card Payment	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: 2/13 Rpt: 33/48	2 FILER NAME Mitchell, Stephanie N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/30/2025	5 Payee name Clayborne, Otis	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 3918 Le May Ave Dallas, TX 75216	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Kickoff Photographer
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 06/17/2025	Payee name Dallas County Democratic Party	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1414 N Washington Ave Dallas, TX 75204	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Burger Bash Sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 05/22/2025	Payee name ETSY	
Amount (\$) \$158.55	Payee address; City; State; Zip Code 117 Adams St Brooklyn, NY 11201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN KICKOFF SUPPLIES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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
Credit Card Payment	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: 3/13 Rpt: 34/48	2 FILER NAME Mitchell, Stephanie N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/22/2025	5 Payee name ETSY	
6 Amount (\$) \$81.08	7 Payee address; City; State; Zip Code 117 Adams St Brooklyn, NY 11201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN KICKOFF ITEMS
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 05/26/2025	Payee name PayPal.com	
Amount (\$) \$3.38	Payee address; City; State; Zip Code P O Box 45950 Omaha, NE 68145	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Paypal Service Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 05/28/2025	Payee name PayPal.com	
Amount (\$) \$29.39	Payee address; City; State; Zip Code P O Box 45950 Omaha, NE 68145	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Paypal Service Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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
Credit Card Payment	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: 4/13 Rpt: 35/48	2 FILER NAME Mitchell, Stephanie N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/29/2025	5 Payee name PayPal.com	
6 Amount (\$) \$72.74	7 Payee address; City; State; Zip Code P O Box 45950 Omaha, NE 68145	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Paypal Service Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 05/29/2025	Payee name PayPal.com	
Amount (\$) \$3.38	Payee address; City; State; Zip Code P O Box 45950 Omaha, NE 68145	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Paypal Service Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 05/29/2025	Payee name PayPal.com	
Amount (\$) \$22.17	Payee address; City; State; Zip Code P O Box 45950 Omaha, NE 68145	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Paypal Service Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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
Credit Card Payment	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: 5/13 Rpt: 36/48	2 FILER NAME Mitchell, Stephanie N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/30/2025	5 Payee name PayPal.com	
6 Amount (\$) \$6.27	7 Payee address; City; P O Box 45950 Omaha, NE 68145	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Paypal Service Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 06/16/2025	Payee name PayPal.com	
Amount (\$) \$9.16	Payee address; City; P O Box 45950 Omaha, NE 68145	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Donation fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 06/12/2025	Payee name PayPal.com	
Amount (\$) \$3.38	Payee address; City; P O Box 45950 Omaha, NE 68145	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Donation fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	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
Credit Card Payment	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: 6/13 Rpt: 37/48	2 FILER NAME Mitchell, Stephanie N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00068781
4 Date 06/05/2025	5 Payee name PayPal.com	
6 Amount (\$) \$30.26	7 Payee address; City; P O Box 45950 Omaha, NE 68145	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Donation fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 06/02/2025	Payee name PayPal.com	
Amount (\$) \$3.38	Payee address; City; P O Box 45950 Omaha, NE 68145	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Donation fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 05/18/2025	Payee name PayPal.com	
Amount (\$) \$7.72	Payee address; City; P O Box 45950 Omaha, NE 68145	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Donation fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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
Credit Card Payment	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: 7/13 Rpt: 38/48	2 FILER NAME Mitchell, Stephanie N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/19/2025	5 Payee name PayPal.com	
6 Amount (\$) \$15.38	7 Payee address; City; P O Box 45950 Omaha, NE 68145	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Donation fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 06/02/2025	Payee name PayPal.com	
Amount (\$) \$3.38	Payee address; City; P O Box 45950 Omaha, NE 68145	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online donation fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 06/21/2025	Payee name PayPal.com	
Amount (\$) \$14.94	Payee address; City; P O Box 45950 Omaha, NE 68145	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online donation fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	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
Credit Card Payment	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: 8/13 Rpt: 39/48	2 FILER NAME Mitchell, Stephanie N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00068781
4 Date 06/23/2025	5 Payee name PayPal.com	
6 Amount (\$) \$14.94	7 Payee address; City; P O Box 45950 Omaha, NE 68145	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online donation fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 05/23/2025	Payee name PayPal.com	
Amount (\$) \$15.38	Payee address; City; P O Box 45950 Omaha, NE 68145	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online donation fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 05/26/2025	Payee name PayPal.com	
Amount (\$) \$15.38	Payee address; City; P O Box 45950 Omaha, NE 68145	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online donation fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	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
Credit Card Payment	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: 9/13 Rpt: 40/48	2 FILER NAME Mitchell, Stephanie N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/28/2025	5 Payee name PayPal.com	
6 Amount (\$) \$7.94	7 Payee address; City; P O Box 45950 Omaha, NE 68145	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online donation fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name PayPal.com	Office sought Office held
Date 05/29/2025	Payee name PayPal.com	
Amount (\$) \$7.94	Payee address; City; P O Box 45950 Omaha, NE 68145	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online donation fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name PayPal.com	Office sought Office held
Date 05/29/2025	Payee name PayPal.com	
Amount (\$) \$7.94	Payee address; City; P O Box 45950 Omaha, NE 68145	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online donation fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name PayPal.com	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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
Credit Card Payment	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: 10/13 Rpt: 41/48	2 FILER NAME Mitchell, Stephanie N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/29/2025	5 Payee name PayPal.com	
6 Amount (\$) \$3.48	7 Payee address; City; P O Box 45950 Omaha, NE 68145	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online donation fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 05/29/2025	Payee name PayPal.com	
Amount (\$) \$15.38	Payee address; City; P O Box 45950 Omaha, NE 68145	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online donation fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 05/29/2025	Payee name PayPal.com	
Amount (\$) \$7.94	Payee address; City; P O Box 45950 Omaha, NE 68145	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online donation fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	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
Credit Card Payment	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: 11/13 Rpt: 42/48	2 FILER NAME Mitchell, Stephanie N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/29/2025	5 Payee name PayPal.com	
6 Amount (\$) \$3.48	7 Payee address; City; P O Box 45950 Omaha, NE 68145	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online donation fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 05/29/2025	Payee name PayPal.com	
Amount (\$) \$30.26	Payee address; City; P O Box 45950 Omaha, NE 68145	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online donation fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 05/29/2025	Payee name PayPal.com	
Amount (\$) \$22.82	Payee address; City; P O Box 45950 Omaha, NE 68145	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online donation fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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
Credit Card Payment	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: 12/13 Rpt: 43/48	2 FILER NAME Mitchell, Stephanie N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/22/2025	5 Payee name STICKERS BANNERS	
6 Amount (\$) \$129.60	7 Payee address; City; 2502 Camp Ave Carrollton, TX 75006	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN KICKOFF BANNER
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 05/23/2025	Payee name STICKERS BANNERS	
Amount (\$) \$240.84	Payee address; City; 2502 Camp Ave Carrollton, TX 75006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN KICKOFF BANNER WITH FRAME
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 05/30/2025	Payee name TIMES TEN CELLARS	
Amount (\$) \$3,764.42	Payee address; City; 6324 PROSPECT AVE DALLAS, TX 75214	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Kickoff food and beverages
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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
Credit Card Payment	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: 13/13 Rpt: 44/48	2 FILER NAME Mitchell, Stephanie N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00068781
4 Date 06/06/2025	5 Payee name TIMES TEN CELLARS	
6 Amount (\$) \$120.00	7 Payee address; City; 6324 PROSPECT AVE DALLAS, TX 75214	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Petition signing party event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 06/09/2025	Payee name The Jeniro Agency	
Amount (\$) \$250.00	Payee address; City; 2924 Lucas Drive Dallas, TX 75219	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic design work
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 G: Sch: 1/3 Rpt: 45/48	2 FILER NAME Mitchell, Stephanie N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00068781	
4 Date 05/02/2025	5 Payee name CULTURESPHERE		
6 Amount (\$) \$187.50 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 11314 DONNELLY AVE KANSAS CITY, MO 64134		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE UPDATES	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 05/05/2025	Payee name GODADDY.COM		
Amount (\$) \$42.16 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 14455 N. Hayden Rd., Ste. 226 Scottsdale, AZ 85260		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE AND DOMAIN RENEWALS	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 05/19/2025	Payee name LAKEWOOD MEDALLION		
Amount (\$) \$49.77 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 5748 LIVE OAK ST DALLAS, TX 75214		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ALPHA PHI ALPHA FRATERNITY GIFT	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(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
Credit Card Payment	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 G: Sch: 2/3 Rpt: 46/48	2 FILER NAME Mitchell, Stephanie N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00068781	
4 Date 05/17/2025	5 Payee name MAILCHIMP		
6 Amount (\$) \$13.86	7 Payee address; City; State; Zip Code 405 N ANGIER AVE, NE ATLANTA, GA 30308		
<input checked="" type="checkbox"/> Reimbursement from political contributions intended	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MASS EMAIL ACCOUNT	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 06/17/2025	Payee name MAILCHIMP		
Amount (\$) \$13.86	Payee address; City; State; Zip Code 405 N ANGIER AVE, NE ATLANTA, GA 30308		
<input checked="" type="checkbox"/> Reimbursement from political contributions intended	PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Blast Account	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 05/05/2025	Payee name MICROSOFT OFFICE		
Amount (\$) \$10.81	Payee address; City; State; Zip Code 1 MICROSOFT WAY REDMOND, WA 98052-6399		
<input checked="" type="checkbox"/> Reimbursement from political contributions intended	PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MICROSOFT OFFICE SOFTWARE	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(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
Credit Card Payment	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 G: Sch: 3/3 Rpt: 47/48	2 FILER NAME Mitchell, Stephanie N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00068781	
4 Date 04/30/2025	5 Payee name TIMES TEN CELLARS		
6 Amount (\$) \$275.00	7 Payee address; City; State; Zip Code 6324 PROSPECT AVE DALLAS, TX 75214		
<input checked="" type="checkbox"/> Reimbursement from political contributions intended	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DEPOSIT FOR KICKOFF VENUE	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 05/01/2025	Payee name TOTAL WINE		
Amount (\$) \$102.82	Payee address; City; State; Zip Code 3810 CONGRESS AVE DALLAS, TX 75219		
<input checked="" type="checkbox"/> Reimbursement from political contributions intended	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense KAPPA ALPHA PSI AND OMEGA PSI PHI GIFTS
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 04/04/2025	Payee name USPS		
Amount (\$) \$210.00	Payee address; City; State; Zip Code 2825 Oak Lawn Ave Dallas, TX 75204		
<input checked="" type="checkbox"/> Reimbursement from political contributions intended	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PO BOX RENEWAL
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

**NON-POLITICAL EXPENDITURES
MADE FROM POLITICAL CONTRIBUTIONS**

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/1 Rpt:	2 FILER NAME Mitchell, Stephanie N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00068781
4 Date 05/20/2025	5 Payee name Huff, Stephanie (Judge)	
6 Amount (\$) 681.92	7 Payee Address; City; State; Zip REDACTED PER 254.0313, GOVT CODE	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Loan Repayment/Reimbursement	(b) Description (See instructions regarding type of information required.) Reimbursement for political expenditures from personal funds
Date 06/19/2025	Payee name Huff, Stephanie (Judge)	
Amount (\$) 13.86	Payee Address; City; State; Zip REDACTED PER 254.0313, GOVT CODE	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Loan Repayment/Reimbursement	(b) Description (See instructions regarding type of information required.) Reimbursement for political expenditures from personal funds
Date 04/04/2025	Payee name Huff, Stephanie (Judge)	
Amount (\$) 210.00	Payee Address; City; State; Zip REDACTED PER 254.0313, GOVT CODE	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Loan Repayment/Reimbursement	(b) Description (See instructions regarding type of information required.) Reimbursement for political expenditures from personal funds