

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

|   |   |   |  |  |
|---|---|---|--|--|
| <b>The C/OH Instruction Guide explains how to complete this form.</b>                               |   | <b>1</b> Filer ID<br>(Ethics Commission Filers)<br>00089850 | <b>2</b> Total pages filed:<br>10  |  |
| <b>3</b> CANDIDATE / OFFICEHOLDER NAME  | MS / MRS / MR<br>Ms.  | FIRST<br>Dominique M.                                       | MI   | <b>OFFICE USE ONLY</b><br><br>Date Received<br><b>ELECTRONICALLY FILED</b><br>02/17/2026 |
|   | NICKNAME  | LAST<br>Payton  | SUFFIX   |  |
| <b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE<br>5500 DeSoto St.<br>#1711<br>Houston, TX 77091  |   | Date Hand-delivered or Date Postmarked   |  |
|   |   |   | Receipt #  | Amount   |
|   |   |   | Date Processed   |  |
|   |   |   | Date Imaged  |  |
| <b>5</b> CAMPAIGN TREASURER NAME  | MS / MRS / MR<br>Ms.  | FIRST<br>Areshannaca  | MI   |  |
|   | NICKNAME  | LAST<br>Scott   | SUFFIX   |  |
| <b>6</b> CAMPAIGN TREASURER ADDRESS<br><br>(Residence or Business)                                  | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>2926 Mackey Ln.<br><br>Shreveport, LA 71118  |   |  |  |
|   |   |   |  |  |
| <b>7</b> CAMPAIGN TREASURER PHONE   | AREA CODE<br>(318)  | PHONE NUMBER<br>588-1787                                    | EXTENSION  |  |
| <b>8</b> REPORT TYPE  | <input checked="" 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 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)                         |   |  |  |
| <b>9</b> PERIOD COVERED   | Month    Day    Year<br>09/05/2025  | THROUGH   |  | Month    Day    Year<br>12/31/2025   |
| <b>10</b> ELECTION  | ELECTION DATE<br>Month    Day    Year<br>03/03/2026   |   | ELECTION TYPE<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special |  |
|   |   |   |  |  |
| <b>11</b> OFFICE  | OFFICE HELD (if any)<br>State Representative District Harrison Panola   |   | <b>12</b> OFFICE SOUGHT (if known)<br>State Representative District 139  |  |

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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|  |   |
|--|---|
| <b>13 C / OH NAME</b> Payton, Dominique M. (Ms.) | <b>14 Filer ID</b> (Ethics Commission Filers)<br>00089850 |
|--|---|

|  |  |                          |                                  |                          |                                   |  |  |   |  |  |  |
|--|--|--------------------------|----------------------------------|--------------------------|-----------------------------------|--|--|---|--|--|--|
| <b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b><br><br><input type="checkbox"/> Additional Pages  | 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. |                          |                                  |                          |                                   |  |  |   |  |  |  |
| <table border="1" style="width:100%"> <tr> <td style="width:25%;"><b>COMMITTEE TYPE</b></td> <td><b>COMMITTEE NAME</b></td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td rowspan="2"><b>COMMITTEE ADDRESS</b></td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> </tr> <tr> <td colspan="2"><b>COMMITTEE CAMPAIGN TREASURER NAME</b></td> </tr> <tr> <td colspan="2"><b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b></td> </tr> </table> | <b>COMMITTEE TYPE</b>  | <b>COMMITTEE NAME</b>    | <input type="checkbox"/> GENERAL | <b>COMMITTEE ADDRESS</b> | <input type="checkbox"/> SPECIFIC | <b>COMMITTEE CAMPAIGN TREASURER NAME</b> |  | <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b> |  |  |  |
|  | <b>COMMITTEE TYPE</b>  | <b>COMMITTEE NAME</b>    |                                  |                          |                                   |  |  |   |  |  |  |
|  | <input type="checkbox"/> GENERAL   | <b>COMMITTEE ADDRESS</b> |                                  |                          |                                   |  |  |   |  |  |  |
|  | <input type="checkbox"/> SPECIFIC  |                          |                                  |                          |                                   |  |  |   |  |  |  |
| <b>COMMITTEE CAMPAIGN TREASURER NAME</b>   |  |                          |                                  |                          |                                   |  |  |   |  |  |  |
| <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>  |  |                          |                                  |                          |                                   |  |  |   |  |  |  |

|                                |   |    |          |
|--------------------------------|---|----|----------|
| <b>16 CONTRIBUTION TOTALS</b>  | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 376.74   |
|                                | 2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)   | \$ | 771.69   |
| <b>EXPENDITURE TOTALS</b>      | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES  | \$ | 377.96   |
|                                | 4. <b>TOTAL POLITICAL EXPENDITURES</b>  | \$ | 1,127.96 |
| <b>CONTRIBUTION BALANCE</b>    | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD  | \$ | 235.89   |
| <b>OUTSTANDING LOAN TOTALS</b> | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD   | \$ | 0.00     |

**17 AFFIDAVIT**

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

\_\_\_\_\_  
 Ms. Dominique M. Payton  
 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

\_\_\_\_\_  
Printed name of officer administering

\_\_\_\_\_  
Title of officer administering oath

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

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|  |  |                                |                            |
|--|--|--------------------------------|----------------------------|
| <b>18 FILER NAME</b><br>Payton, Dominique M. (Ms.) |  | <b>19 Filer ID</b><br>00089850 | (Ethics Commission Filers) |
| <b>20 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE   |  | SUBTOTAL AMOUNT                |                            |
| 1.   | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                      | \$                             | 771.69                     |
| 2.   | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                        | \$                             | 0.00                       |
| 3.   | <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS  | \$                             | 0.00                       |
| 4.   | <input type="checkbox"/> SCHEDULE E: LOANS   | \$                             |                            |
| 5.   | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                   | \$                             | 1,127.96                   |
| 6.   | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   | \$                             | 0.00                       |
| 7.   | <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                  | \$                             | 0.00                       |
| 8.   | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                      | \$                             | 0.00                       |
| 9.   | <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                             | \$                             | 0.00                       |
| 10.  | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH                        | \$                             |                            |
| 11.  | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                           | \$                             |                            |
| 12.  | <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$                             | 0.21                       |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |  |
|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>                |  | <b>1</b> Total pages Schedule A1:<br>Sch: 1/4 Rpt: 4/10  |
| <b>2</b> FILER NAME<br>Payton, Dominique M. (Ms.)                               |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089850 |
| <b>4</b> Date<br>12/15/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Brooks, Stacy | <b>7</b> Amount of Contribution (\$) \$40.00             |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Shreveport, LA 71118 |  |  |
| <b>8</b> Principal occupation / Job title (See Instructions)                    |  | <b>9</b> Employer (See Instructions)                     |
| Date<br>12/22/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Dowthard, Jay          | Amount of Contribution (\$) \$30.00                      |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77007             |  |  |
| Principal occupation / Job title (See Instructions)<br>Trucker                  |  | Employer (See Instructions)                              |
| Date<br>12/05/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Edwards, Christina     | Amount of Contribution (\$) \$5.00                       |
| Contributor address; City; State; Zip Code<br><br>Greenwood, LA 71033           |  |  |
| Principal occupation / Job title (See Instructions)<br>Insurance Representative |  | Employer (See Instructions)                              |
| Date<br>12/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Harris , Lacey         | Amount of Contribution (\$) \$13.90                      |
| Contributor address; City; State; Zip Code<br><br>Missouri City, TX 77459       |  |  |
| Principal occupation / Job title (See Instructions)<br>Pretrial Officer         |  | Employer (See Instructions)                              |
| Date<br>11/05/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hearne, Sarah          | Amount of Contribution (\$) \$10.00                      |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77054             |  |  |
| Principal occupation / Job title (See Instructions)                             |  | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 2/4 Rpt: 5/10  |
| <b>2</b> FILER NAME<br>Payton, Dominique M. (Ms.)                            |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089850 |
| <b>4</b> Date<br>11/05/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kelley, Bryan | <b>7</b> Amount of Contribution (\$) \$20.00             |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77092 |   |  |
| <b>8</b> Principal occupation / Job title (See Instructions)                 |   | <b>9</b> Employer (See Instructions)                     |
| Date<br>12/20/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Mosley, Constance      | Amount of Contribution (\$) \$23.23                      |
| Contributor address; City; State; Zip Code<br><br>Avinger, TX 75630          |   |  |
| Principal occupation / Job title (See Instructions)                          |   | Employer (See Instructions)                              |
| Date<br>11/05/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Motley, Tammica        | Amount of Contribution (\$) \$20.00                      |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77014          |   |  |
| Principal occupation / Job title (See Instructions)                          |   | Employer (See Instructions)                              |
| Date<br>11/20/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rudd, Ja Quanzah       | Amount of Contribution (\$) \$20.00                      |
| Contributor address; City; State; Zip Code<br><br>Marshall, TX 75670         |   |  |
| Principal occupation / Job title (See Instructions)                          |   | Employer (See Instructions)                              |
| Date<br>11/05/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sampson, Terrance      | Amount of Contribution (\$) \$20.56                      |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77011          |   |  |
| Principal occupation / Job title (See Instructions)                          |   | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b> |  | <b>1</b> Total pages Schedule A1:<br>Sch: 3/4 Rpt: 6/10  |
| <b>2</b> FILER NAME<br>Payton, Dominique M. (Ms.)                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089850 |
| <b>4</b> Date<br>12/15/2025                                      | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Tillis, Portia<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>McKinney, TX 75070 | <b>7</b> Amount of Contribution (\$)<br><br>\$40.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)     |  | <b>9</b> Employer (See Instructions)                     |
| Date<br>11/07/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Trammell, Mia<br><hr/> Contributor address; City; State; Zip Code<br><br>Longview, TX 75604                    | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                              |
| Date<br>12/14/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Vasquez, Jessica<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77014                  | Amount of Contribution (\$)<br><br>\$5.00                |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                              |
| Date<br>12/03/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Vasquez, Jessica<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77014                  | Amount of Contribution (\$)<br><br>\$2.00                |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                              |
| Date<br>12/17/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Williams, Herbert<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77014                 | Amount of Contribution (\$)<br><br>\$50.00               |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b> |   | <b>1</b> Total pages Schedule A1:<br>Sch: 4/4 Rpt: 7/10  |
| <b>2</b> FILER NAME<br>Payton, Dominique M. (Ms.)                |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089850 |
| <b>4</b> Date<br>11/05/2025                                      | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Williams, Herbert<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77014 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)     |   | <b>9</b> Employer (See Instructions)                     |
| Date<br>12/15/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Williams, Samantha<br>Contributor address; City; State; Zip Code<br><br>Kilgore, TX 75662                  | Amount of Contribution (\$)<br><br>\$20.26               |
| Principal occupation / Job title (See Instructions)              |   | Employer (See Instructions)                              |

# PLEGGED CONTRIBUTIONS

# SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:  
Sch: 1/1 Rpt: 8/10

2 FILER NAME  
Payton, Dominique M. (Ms.)

3 Filer ID (Ethics Commission Filers)  
00089850

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor  out-of-state PAC (ID#: \_\_\_\_\_)

8 Amount of  
pledge (\$)

9 In-kind description  
(If applicable)

7 Pledgor Address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 1/1 Rpt: 9/10             | <b>2</b> FILER NAME<br>Payton, Dominique M. (Ms.)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089850  |
| <b>4</b> Date<br>12/04/2025   | <b>5</b> Payee name<br>Harris County Democratic Party                                       |   |
| <b>6</b> Amount (\$)<br>\$750.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>3302 Canal Street<br><br>Houston, TX 77003 |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees             | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Fee paid to get on ballot |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought   |
|   |   | Office held   |

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

**SCHEDULE K**

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b> |  | <b>1</b> Total pages Schedule K:<br>Sch: 1/1 Rpt: 10/10  |
| <b>2</b> FILER NAME<br>Payton, Dominique M. (Ms.)                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089850 |
| <b>4</b> Date<br>10/26/2025                                      | <b>5</b> Name of person from whom amount is received<br>Paypal<br><hr/> <b>6</b> Address of person from whom amount is received; City; State; Zip Code<br><br>San Jose, CA 95131 | <b>8</b> Amount (\$)<br><br>\$0.15                       |
|  | <b>7</b> Purpose for which amount is received<br>Cash Back Bonus <input type="checkbox"/> Check if political contribution returned to filer                                      |  |
| Date<br>09/07/2025   | Name of person from whom amount is received<br>Paypal<br><hr/> Address of person from whom amount is received; City; State; Zip Code<br><br>San Jose, CA 95131                   | Amount (\$)<br><br>\$0.02                                |
|  | Purpose for which amount is received<br>Cash Back Bonus <input type="checkbox"/> Check if political contribution returned to filer   |  |
| Date<br>10/12/2025   | Name of person from whom amount is received<br>Paypal<br><hr/> Address of person from whom amount is received; City; State; Zip Code<br><br>San Jose, CA 95131                   | Amount (\$)<br><br>\$0.02                                |
|  | Purpose for which amount is received<br>Cash Back Bonus <input type="checkbox"/> Check if political contribution returned to filer   |  |
| Date<br>09/21/2025   | Name of person from whom amount is received<br>Paypal<br><hr/> Address of person from whom amount is received; City; State; Zip Code<br><br>San Jose, CA 95131                   | Amount (\$)<br><br>\$0.02                                |
|  | Purpose for which amount is received<br>Cash Back Bonus <input type="checkbox"/> Check if political contribution returned to filer   |  |