

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers) 00089974	2 Total pages filed: 14		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Courtney Leone	MI	OFFICE USE ONLY		
	NICKNAME	LAST Jones	SUFFIX	Date Received ELECTRONICALLY FILED 01/15/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; P.O. Box 150231  Austin, TX 78715			Date Hand-delivered or Date Postmarked		
				Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Courtney Leone	MI			
	NICKNAME	LAST Jones	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); PO Box 150231  Austin, TX 78715		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION (469) 877-0212					
8 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)					
9 PERIOD COVERED	Month 08/25/2025	Day	Year	Month 12/31/2025	Day	Year
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026		ELECTION TYPE <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) State Senator District 21 Austin			12 OFFICE SOUGHT (if known) State Senator District 21		

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

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

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13 C / OH NAME	Jones, Cortney Leone (Ms.)		14 Filer ID (Ethics Commission Filers) 00089974
15 NOTICE FROM POLITICAL COMMITTEE(S)	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.		
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		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)		\$ 10.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 4,006.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>		\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00
OUTSTANDING LOAN TOTALS	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. Cortney Leone Jones

\_\_\_\_\_  
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> Jones, Cortney Leone (Ms.)		<b>19 Filer ID</b> (Ethics Commission Filers) 00089974
<b>20 SCHEDULE SUBTOTALS</b>		
NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,006.00
2. <input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/>	SCHEDULE E: LOANS	\$
5. <input type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
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 type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
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 type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/11 Rpt: 4/14
<b>2</b> FILER NAME Jones, Cortney Leone (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089974
<b>4</b> Date 11/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aghayere, Janea ..... <b>6</b> Contributor address; City; State; Zip Code  Irving, TX 75063	<b>7</b> Amount of Contribution (\$) \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Nurse		<b>9</b> Employer (See Instructions) County
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avant, Timple ..... Contributor address; City; State; Zip Code  Nacogdoches, TX 75965	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buisson, Emmanuel ..... Contributor address; City; State; Zip Code  St Cloud, FL 34771	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) Regional Sales Director		Employer (See Instructions) Vector
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bunn, Kamilah ..... Contributor address; City; State; Zip Code  Frederick, MD 21704	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carmouche, Joyce ..... Contributor address; City; State; Zip Code  Lexington, KY 40515	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) No employment		Employer (See Instructions) N/A

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/11 Rpt: 5/14
<b>2</b> FILER NAME Jones, Cortney Leone (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089974
<b>4</b> Date 12/02/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler-Cole, Charity	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>6</b> Contributor address; City; State; Zip Code  Lakewood, CA 90712	
<b>8</b> Principal occupation / Job title (See Instructions) Executive Director		<b>9</b> Employer (See Instructions) LA Voice
<b>Date</b> 12/01/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Ryan	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Little Rock, AR 72202	
<b>Principal occupation / Job title (See Instructions)</b> Program Director		<b>Employer (See Instructions)</b> University of Arkansas at Little Rock
<b>Date</b> 12/04/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobbins, Nicole	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  silver Spring, MD 20910	
<b>Principal occupation / Job title (See Instructions)</b> Policy		<b>Employer (See Instructions)</b> Acf
<b>Date</b> 11/18/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewell, Milah	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Waldorf, MD 20603	
<b>Principal occupation / Job title (See Instructions)</b> Respiratory Therapist		<b>Employer (See Instructions)</b> INOVA Fairfax Hospital
<b>Date</b> 12/01/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Grace	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  North Bethesda, MD 20852	
<b>Principal occupation / Job title (See Instructions)</b> Founder & CEO		<b>Employer (See Instructions)</b> Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/11 Rpt: 6/14
<b>2</b> FILER NAME Jones, Cortney Leone (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089974
<b>4</b> Date 12/04/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gandhi, Dulari ..... <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78729	<b>7</b> Amount of Contribution (\$) \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) Dulari Gandhi
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hash, John ..... Contributor address; City; State; Zip Code  Austin, TX 78728	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Outreach Coordinator		Employer (See Instructions) Univ. Of Texas at Austin
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Home, Lewis ..... Contributor address; City; State; Zip Code  Pflugerville, TX 78660	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) Non profit		Employer (See Instructions) TACFS
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENNINGS, ANGELA ..... Contributor address; City; State; Zip Code  Austin, TX 78748	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) CPS Caseworker		Employer (See Instructions) Department of Family and Protective Service
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Antony ..... Contributor address; City; State; Zip Code  Pflugerville, TX 78660	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) We Can Now

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/11 Rpt: 7/14
<b>2</b> FILER NAME Jones, Cortney Leone (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089974
<b>4</b> Date 12/02/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jerome, Janice ..... <b>6</b> Contributor address; City; State; Zip Code  Macon, GA 31201	<b>7</b> Amount of Contribution (\$) \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) N/A
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Alphalisha ..... Contributor address; City; State; Zip Code  Schertz, TX 78154	Amount of Contribution (\$) \$185.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Judson ISD
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Marlon ..... Contributor address; City; State; Zip Code  Austin, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Dean of Community Life		Employer (See Instructions) Seminary of the Southwest
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Jeremy ..... Contributor address; City; State; Zip Code  Elgin, TX 78621	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self Employment		Employer (See Instructions) N/A
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan, Ali ..... Contributor address; City; State; Zip Code  Little Rock, AR 72211	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) Baptist hospital

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/11 Rpt: 8/14
<b>2</b> FILER NAME Jones, Cortney Leone (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089974
<b>4</b> Date 12/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landry, Mishon	<b>7</b> Amount of Contribution (\$) \$21.00
	<b>6</b> Contributor address; City; State; Zip Code  North Richland Hills, TX 76182	
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Mishon Landry
Date 11/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Michael	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code  Lockhart, TX 78644	
Principal occupation / Job title (See Instructions) Account Executive		Employer (See Instructions) WalkMe
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGee, Selena	Amount of Contribution (\$) \$21.00
	Contributor address; City; State; Zip Code  Arlington, TX 76006	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moffett, Jenell	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions) Economic Development		Employer (See Instructions) Downtown Austin Alliance
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myers, Amnoni	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Tulsa, OH 74119	
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Launch Ahead

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1: Sch: 6/11 Rpt: 9/14
<b>2</b> FILER NAME Jones, Cortney Leone (Ms.)			<b>3</b> Filer ID (Ethics Commission Filers) 00089974
<b>4</b> Date 12/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myles, David	<b>7</b> Amount of Contribution (\$) \$50.00	
	<b>6</b> Contributor address; City; State; Zip Code  Dayton, ME 55327-2000		
<b>8</b> Principal occupation / Job title (See Instructions) Keynote Speaker		<b>9</b> Employer (See Instructions) David Myles Group Inc	
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neal, Adam	Amount of Contribution (\$) \$50.00	
	Contributor address; City; State; Zip Code  Austin, TX 78714		
Principal occupation / Job title (See Instructions) Multimedia Production		Employer (See Instructions) Reroute Productions	
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nobles, Aspen	Amount of Contribution (\$) \$20.00	
	Contributor address; City; State; Zip Code  Round Rock , TX 78665		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) N/A	
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norton, Christine	Amount of Contribution (\$) \$21.00	
	Contributor address; City; State; Zip Code  Kyle, TX 78640		
Principal occupation / Job title (See Instructions) Profesor		Employer (See Instructions) Texas State	
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Reilly, Kesha	Amount of Contribution (\$) \$150.00	
	Contributor address; City; State; Zip Code  Flower Mound, TX 75022		
Principal occupation / Job title (See Instructions) Medical Affairs Strategist		Employer (See Instructions) Gilead Sciences	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1: Sch: 7/11 Rpt: 10/14
<b>2</b> FILER NAME Jones, Cortney Leone (Ms.)			<b>3</b> Filer ID (Ethics Commission Filers) 00089974
<b>4</b> Date 12/14/2025	<b>5</b> Full name of contributor Oliver, Toni	<b>6</b> Contributor address; City; State; Zip Code  College Park, GA 30349	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>8</b> Principal occupation / Job title (See Instructions) consultant		
<b>9</b> Employer (See Instructions) N/A	<b>8</b> Principal occupation / Job title (See Instructions) consultant		
	<b>9</b> Employer (See Instructions) N/A		
<b>4</b> Date 12/01/2025	<b>5</b> Full name of contributor Peterson, Eshawn	<b>6</b> Contributor address; City; State; Zip Code  Phoenix, AZ 85353	<b>7</b> Amount of Contribution (\$) \$21.00
	<b>8</b> Principal occupation / Job title (See Instructions) owner		
<b>9</b> Employer (See Instructions) Onward Hope	<b>8</b> Principal occupation / Job title (See Instructions) owner		
	<b>9</b> Employer (See Instructions) Onward Hope		
<b>4</b> Date 12/28/2025	<b>5</b> Full name of contributor Quinn, Denisha	<b>6</b> Contributor address; City; State; Zip Code  Arlington, TX 76001	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>8</b> Principal occupation / Job title (See Instructions) Social Worker		
<b>9</b> Employer (See Instructions) N/A	<b>8</b> Principal occupation / Job title (See Instructions) Social Worker		
	<b>9</b> Employer (See Instructions) N/A		
<b>4</b> Date 11/18/2025	<b>5</b> Full name of contributor Radcliff, Lanecia	<b>6</b> Contributor address; City; State; Zip Code  Fort Lauderdale, FL 33312	<b>7</b> Amount of Contribution (\$) \$21.00
	<b>8</b> Principal occupation / Job title (See Instructions) Director		
<b>9</b> Employer (See Instructions) NAA	<b>8</b> Principal occupation / Job title (See Instructions) Director		
	<b>9</b> Employer (See Instructions) NAA		
<b>4</b> Date 12/01/2025	<b>5</b> Full name of contributor Rollins, Latroya	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78749	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>8</b> Principal occupation / Job title (See Instructions) Wellness Coach		
<b>9</b> Employer (See Instructions) Bungalow 7 Wellness Collection	<b>8</b> Principal occupation / Job title (See Instructions) Wellness Coach		
	<b>9</b> Employer (See Instructions) Bungalow 7 Wellness Collection		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/11 Rpt: 11/14
<b>2</b> FILER NAME Jones, Cortney Leone (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089974
<b>4</b> Date 12/02/2025	<b>5</b> Full name of contributor Rose, Sasha	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78728	
<b>8</b> Principal occupation / Job title (See Instructions) Self Employment		<b>9</b> Employer (See Instructions) N/A
Date 12/02/2025	Full name of contributor Rowe, Isaac	Amount of Contribution (\$) \$21.00
	Contributor address; City; State; Zip Code  Manor, TX 78653	
Principal occupation / Job title (See Instructions) Engineering		Employer (See Instructions) S&L
Date 12/08/2025	Full name of contributor Sarkar, Nicole	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  austin, TX 78757	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/01/2025	Full name of contributor Shoemaker, Edwyn	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code  BOSTON, MA 02122	
Principal occupation / Job title (See Instructions) Ranked Choice Boston		Employer (See Instructions) Ranked Choice Boston
Date 12/01/2025	Full name of contributor Sparks, Andrea	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Austin, TX 78746	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Buckner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/11 Rpt: 12/14
<b>2</b> FILER NAME Jones, Cortney Leone (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089974
<b>4</b> Date 12/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Barbara	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75229	
<b>8</b> Principal occupation / Job title (See Instructions) Realtor		<b>9</b> Employer (See Instructions) The Michael Group
<b>Date</b> 12/02/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) T, Nakeenya	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Hutto, TX 78634	
<b>Principal occupation / Job title (See Instructions)</b> Consultant		<b>Employer (See Instructions)</b> Adroit Consultancy
<b>Date</b> 12/01/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Tammy, Colvin	<b>Amount of Contribution (\$)</b> \$21.00
	<b>Contributor address; City; State; Zip Code</b>  Warren, AR 71671	
<b>Principal occupation / Job title (See Instructions)</b> Tax Consultant		<b>Employer (See Instructions)</b> Avfuel Corporation
<b>Date</b> 12/01/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Jacqueline	<b>Amount of Contribution (\$)</b> \$21.00
	<b>Contributor address; City; State; Zip Code</b>  Marion, AR 72364	
<b>Principal occupation / Job title (See Instructions)</b> Case manager		<b>Employer (See Instructions)</b> KFF
<b>Date</b> 12/02/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Kenneth	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Austin, TX 78753	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> N/A

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/11 Rpt: 13/14
<b>2</b> FILER NAME Jones, Cortney Leone (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089974
<b>4</b> Date 12/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tineo, Jasmary ..... <b>6</b> Contributor address; City; State; Zip Code  Chester, VA 23836	<b>7</b> Amount of Contribution (\$) \$900.00
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) Hidden Roots Mental Health Texas
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toy, Ayeshia ..... Contributor address; City; State; Zip Code  Austin, TX 78726	Amount of Contribution (\$) \$121.00
Principal occupation / Job title (See Instructions) Lead Release Train Engineer		Employer (See Instructions) USAA
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Bill ..... Contributor address; City; State; Zip Code  Tyler, TX 75701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nonprofit		Employer (See Instructions) Nonprofit
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woody, Roy ..... Contributor address; City; State; Zip Code  Austin, TX 78744	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Amd
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woody, Roy ..... Contributor address; City; State; Zip Code  Austin, TX 78744	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Amd

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/11 Rpt: 14/14
<b>2</b> FILER NAME Jones, Cortney Leone (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089974
<b>4</b> Date 12/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) alston, kellye ..... <b>6</b> Contributor address; City; State; Zip Code  Virginia Beach, VA 23464	<b>7</b> Amount of Contribution (\$) \$21.00
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions) Norfolk Public Schools