

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM JCOR-C/OH

1 Filer ID 00089671		2 Total pages filed: 27		OFFICE USE ONLY					
				Date Received ELECTRONICALLY FILED 02/02/2026					
3 CANDIDATE / OFFICEHOLDER NAME		FIRST Mrs. Norma A. NICKNAME Bazan		MI LAST SUFFIX					
4 ORIGINAL REPORT TYPE		<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify) _____					
		<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded modified reporting limit						
		<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)						
		<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final Report (Attach C/OH-FR)						
5 ORIGINAL PERIOD COVERED		Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year	THROUGH	Date Hand-delivered or Date Postmarked Receipt # _____ Amount _____
6 EXPLANATION OF CORRECTION		I am unclear as to what this means. I do not believe I corrected anything. I checked for errors and all was correct. I apologize but I do not know what was done incorrectly.							
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:							
		<input checked="" type="checkbox"/> 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.							
		<input type="checkbox"/> 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.							

Mrs. Norma A. Bazan

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) 00089671	2 Total pages filed: 27
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mrs. Norma A.			OFFICE USE ONLY
	NICKNAME LAST Bazan			Date Received ELECTRONICALLY FILED 02/02/2026
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 2824 N Beach Street			Date Hand-delivered or Date Postmarked
	Haltom City, TX 76111			Receipt # <input type="text"/> Amount <input type="text"/>
				Date Processed
				Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Gary L.			MI
	NICKNAME LAST Nickelson			SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 1200 Summit Avenue Suite 800 Fort Worth, TX 76102			APT / SUITE #; CITY; STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (817) 735-4000			
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 Day Year 07/01/2025		Month Day Year 12/31/2025	
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)		12 OFFICE SOUGHT (if known) Family District Court Judge Place tarrant District 231	

GO TO PAGE 2

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

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

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13 C / OH NAME	Bazan, Norma A. (Mrs.)		14 Filer ID 00089671	(Ethics Commission Filers)																				
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 colspan="3">COMMITTEE NAME</td> </tr> <tr> <td></td> <td><input type="checkbox"/> GENERAL</td> <td colspan="3">COMMITTEE ADDRESS</td> </tr> <tr> <td></td> <td><input type="checkbox"/> SPECIFIC</td> <td colspan="3">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td></td> <td colspan="3">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)			\$ 28,673.78																				
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$ 0.00																				
	4. TOTAL POLITICAL EXPENDITURES			\$ 9,633.07																				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 30,451.61																				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 0.00																				
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>Mrs. Norma A. Bazan _____ Signature of Candidate or Officeholder</p>																								
AFFIX NOTARY STAMP / SEAL ABOVE																								
<p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p>																								
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**

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18 FILER NAME Bazan, Norma A. (Mrs.)	19 Filer ID (Ethics Commission Filers) 00089671
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A(J): MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) \$ 24,323.78	
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 4,350.00	
3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) \$	
4. <input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL) \$ 18,500.00	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 9,091.82	
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 \$ 541.25	
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 A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/17 Rpt: 5/27												
2 FILER NAME Bazan, Norma A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089671												
4 Date 09/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguillon, Jamie (Mr.) 6 Contributor address; City; State; Zip Code Fort Worth, TX 76110	7 Amount of Contribution (\$) \$50.00												
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired												
10 Contributor's employer/law firm Retired		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 09/17/2025 </td> <td> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguillon, Yolanda (Mrs.) Contributor address; City; State; Zip Code Fort Worth, TX 76110 </td> <td> Amount of Contribution (\$) \$50.00 </td> </tr> <tr> <td colspan="2"> Contributor's Principal Occupation Retired </td> <td> Contributor's Job Title Retired </td> </tr> <tr> <td colspan="2"> Contributor's employer/law firm Retired </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 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguillon, Yolanda (Mrs.) Contributor address; City; State; Zip Code Fort Worth, TX 76110	Amount of Contribution (\$) \$50.00	Contributor's Principal Occupation Retired		Contributor's Job Title Retired	Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguillon, Yolanda (Mrs.) Contributor address; City; State; Zip Code Fort Worth, TX 76110	Amount of Contribution (\$) \$50.00												
Contributor's Principal Occupation Retired		Contributor's Job Title Retired												
Contributor's employer/law firm Retired		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 09/02/2025 </td> <td> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bazan Jr., Jorge Luis Contributor address; City; State; Zip Code Cleburne, TX 76031 </td> <td> Amount of Contribution (\$) \$500.00 </td> </tr> <tr> <td colspan="2"> Contributor's Principal Occupation Telecommunications </td> <td> Contributor's Job Title Operations Manager </td> </tr> <tr> <td colspan="2"> Contributor's employer/law firm Major Communications </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 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bazan Jr., Jorge Luis Contributor address; City; State; Zip Code Cleburne, TX 76031	Amount of Contribution (\$) \$500.00	Contributor's Principal Occupation Telecommunications		Contributor's Job Title Operations Manager	Contributor's employer/law firm Major Communications		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bazan Jr., Jorge Luis Contributor address; City; State; Zip Code Cleburne, TX 76031	Amount of Contribution (\$) \$500.00												
Contributor's Principal Occupation Telecommunications		Contributor's Job Title Operations Manager												
Contributor's employer/law firm Major Communications		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: 2/17 Rpt: 6/27
2 FILER NAME Bazan, Norma A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089671
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bazan Sr., Jorge (Mr.)	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code River Oaks, TX 76114	
8 Contributor's Principal Occupation Contractor		9 Contributor's Job Title President
10 Contributor's employer/law firm Bazan Roofing Inc		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C.W. Martin Law Offices PLLC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76111	
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 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cano, Linda (Mrs.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Watauga, TX 76148	
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		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: 3/17 Rpt: 7/27
2 FILER NAME Bazan, Norma A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089671
4 Date 11/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cano, Linda (Mrs.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Watauga, TX 76148	
8 Contributor's Principal Occupation retired		9 Contributor's Job Title retired
10 Contributor's employer/law firm retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/17/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapa, Victor (Mr.) Contributor address; City; State; Zip Code Fort Worth, TX 76114		Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Teacher 9-12		Contributor's Job Title Teacher
Contributor's employer/law firm Fort Worth ISD		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/17/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christine, Mazurek (Mrs.) Contributor address; City; State; Zip Code River Oaks, TX 76114		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Christine L. Mazurek 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: 4/17 Rpt: 8/27
2 FILER NAME Bazan, Norma A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089671
4 Date 11/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crocker, Ali (Mrs.)	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Mansfield, TX 76063	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Crocker Russell & Associates		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/16/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deutscher, Rocky (Ms.)
		Contributor address; City; State; Zip Code Fort Worth, TX 76109
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/03/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornan, Mary (Mrs.)
		Contributor address; City; State; Zip Code Crowley, TX 76036
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		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: 5/17 Rpt: 9/27
2 FILER NAME Bazan, Norma A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089671
4 Date 07/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dutra, Cindy (Ms.)	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Henderson, NV 89052	
8 Contributor's Principal Occupation retired		9 Contributor's Job Title retired
10 Contributor's employer/law firm retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/02/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Escobedo, Oscar (Mr.)
Contributor address; City; State; Zip Code Fort Worth, TX 76244		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/17/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Escobedo, Sandra (Mrs.)
Contributor address; City; State; Zip Code Fort Worth, TX 76108		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Education		Contributor's Job Title Assistant Director Early Childhood Education
Contributor's employer/law firm Childcare Associates		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: 6/17 Rpt: 10/27
2 FILER NAME Bazan, Norma A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089671
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Jonathan (Mr.)	7 Amount of Contribution (\$) \$96.06
	6 Contributor address; City; State; Zip Code Lewisville, TX 75067	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Law Office of Jonathan Fox PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/17/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Norma (Mrs.)
		Contributor address; City; State; Zip Code River Oaks, TX 76114
Contributor's Principal Occupation Certified Tax Accountant		Contributor's Job Title Owner
Contributor's employer/law firm Exacto Tax		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Rafaela (Mrs.)
		Contributor address; City; State; Zip Code Everman, TX 76140
Contributor's Principal Occupation Director for FWISD		Contributor's Job Title Director of Substitute Services
Contributor's employer/law firm Fort Worth ISD		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: 7/17 Rpt: 11/27
2 FILER NAME Bazan, Norma A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089671
4 Date 08/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez Smith, Olivia (Mrs.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76134	
8 Contributor's Principal Occupation Financial		9 Contributor's Job Title Vendor Manager
10 Contributor's employer/law firm Santander Consumer		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez Smith, Olivia (Mrs.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76134	
Contributor's Principal Occupation Financial Company		Contributor's Job Title Vendor Manager
Contributor's employer/law firm Santander Consumer		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwin, Rhonda (Mrs.)	Amount of Contribution (\$) \$960.60
	Contributor address; City; State; Zip Code Richland Hills, TX 76118	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Silverman Goodwin LLP		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: 8/17 Rpt: 12/27
2 FILER NAME Bazan, Norma A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089671
4 Date 09/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwin, Rhonda (Mrs.)	7 Amount of Contribution (\$) \$1,500.00
	6 Contributor address; City; State; Zip Code Richland Hills, TX 76118	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Silverman Goodwin LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guitierrez, Jose (Dr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Nevada, TX 75173	
Contributor's Principal Occupation Doctor		Contributor's Job Title Doctor
Contributor's employer/law firm Wylie ER & Red River ER		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Kiera (Mrs.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Northlake, TX 76247	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Legal Aid of NW Texas		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: 9/17 Rpt: 13/27	
2 FILER NAME Bazan, Norma A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089671	
4 Date 11/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinojosa, Patricia (Mrs.)	7 Amount of Contribution (\$) \$250.00	
	6 Contributor address; City; State; Zip Code North Richland Hills, TX 76180		
8 Contributor's Principal Occupation retired		9 Contributor's Job Title retired	
10 Contributor's employer/law firm retired		11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)			
Date 11/05/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Travis and Sandra Contributor address; City; State; Zip Code Hurst, TX 76054	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Appraiser		Contributor's Job Title Appraiser	
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 09/17/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Antonia (Mrs.) Contributor address; City; State; Zip Code Fort Worth, TX 76114	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Insurance		Contributor's Job Title Senior Claims Operations Assistant	
Contributor's employer/law firm Core Specialty Ins. Co.		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: 10/17 Rpt: 14/27
2 FILER NAME Bazan, Norma A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089671
4 Date 09/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimbriel, Debbie (Mrs.)	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76244	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Supervising Attorney
10 Contributor's employer/law firm Legal Aid of NW Texas		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loveless, James (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Fort worth, TX 76110	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Webb Family Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark Lane Law Office, PC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76107	
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: 11/17 Rpt: 15/27
2 FILER NAME Bazan, Norma A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089671
4 Date 11/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marvin, Barbara (Mrs.) 6 Contributor address; City; State; Zip Code Fort Worth, TX 76126	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation retired		9 Contributor's Job Title retired
10 Contributor's employer/law firm retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/10/2025		
Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Courtney (Mrs.) Contributor address; City; State; Zip Code North Richland Hills, TX 76182		Amount of Contribution (\$) \$50.00
Contributor's Principal Occupation Property Management		
Contributor's Job Title Appraiser		
Contributor's employer/law firm Self Employed		
Law firm of contributor's spouse (if any)		
If contributor is a child, law firm of parent(s) (if any)		
Date 09/17/2025		
Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medina, Rosie Contributor address; City; State; Zip Code Fort Worth, TX 76123		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Retired		
Contributor's Job Title Retired		
Contributor's employer/law firm Retired		
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: 12/17 Rpt: 16/27
2 FILER NAME Bazan, Norma A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089671
4 Date 07/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medina, Rosie (Mrs.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76123	
8 Contributor's Principal Occupation retired		9 Contributor's Job Title retired
10 Contributor's employer/law firm retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medina, Rosie (Mrs.)
		Contributor address; City; State; Zip Code Fort worth, TX 76123
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/14/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medina, Rosie (Mrs.)
		Contributor address; City; State; Zip Code Fort Worth, TX 76123
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		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: 13/17 Rpt: 17/27	
2 FILER NAME Bazan, Norma A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089671	
4 Date 10/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Charla (Mrs.) 6 Contributor address; City; State; Zip Code Arlington, TX 76001	7 Amount of Contribution (\$) \$500.00	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney	
10 Contributor's employer/law firm Moore Family 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 11/17/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murillo, Manuel (Mr.) Contributor address; City; State; Zip Code Fort Worth, TX 76123	Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation Interpreter		Contributor's Job Title Court Interpreter	
Contributor's employer/law firm Manuel Murillo Court Interpreter		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 07/18/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nickerson, Gary (Mr.) Contributor address; City; State; Zip Code Fort Worth, TX 76109	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney	
Contributor's employer/law firm Goranson Bain Ausley 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: 14/17 Rpt: 18/27
2 FILER NAME Bazan, Norma A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089671
4 Date 09/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patino, Erika (Ms.)	7 Amount of Contribution (\$) \$1,500.00
	6 Contributor address; City; State; Zip Code Arlington, TX 76013	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Erika V. Patino & Associates PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patino, Erika (Ms.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Arlington, TX 76013	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Erika V. Patino & Associates PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramires, Raul (Mr.)	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Arlington, TX 76006	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Garcia & Ramires, 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: 15/17 Rpt: 19/27
2 FILER NAME Bazan, Norma A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089671
4 Date 10/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera, Aleed (Mrs.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76179	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm MHMR of Tarrant County		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Lorraine (Ms.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code North Richland Hills, TX 76180	
Contributor's Principal Occupation Coordinator		Contributor's Job Title Court Coordinator
Contributor's employer/law firm Tarrant County - IVD Court		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Marvina (Mrs.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Mansfield, TX 76063	
Contributor's Principal Occupation Attorney		Contributor's Job Title Assistance District Atty -Chief of PO Unit
Contributor's employer/law firm TCDA		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: 16/17 Rpt: 20/27
2 FILER NAME Bazan, Norma A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089671
4 Date 12/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowell, James (Mr.) 6 Contributor address; City; State; Zip Code Keller, TX 76248	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation Food product and Alcohol Dist		9 Contributor's Job Title VP
10 Contributor's employer/law firm Ben E Keith		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/24/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Short, Ross (Mr.) Contributor address; City; State; Zip Code Azle, TX 76020		Amount of Contribution (\$) \$5,000.00
Contributor's Principal Occupation Land Services		Contributor's Job Title Co-CEO
Contributor's employer/law firm Norfleet Land Services, LLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/31/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silverberg, Kal (Mr.) Contributor address; City; State; Zip Code Fort Worth, TX 76109		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Consultant		Contributor's Job Title Attorney
Contributor's employer/law firm One Track Mind Consulting LLC		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: 17/17 Rpt: 21/27
2 FILER NAME Bazan, Norma A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089671
4 Date 11/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Carolyn (Mrs.) 6 Contributor address; City; State; Zip Code Arlington, TX 76006	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation Court Reporter		9 Contributor's Job Title Court Reporter
10 Contributor's employer/law firm Tarrant County		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/18/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tijerina, Dorys (Mrs.) Contributor address; City; State; Zip Code Arlington, TX 76001		Amount of Contribution (\$) \$192.12
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Juan Tijerina		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/17/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, David (Mr.) Contributor address; City; State; Zip Code Keller, TX 76248		Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Medical Sales		Contributor's Job Title Executive IDN Director
Contributor's employer/law firm Medline Industries, Inc.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>			
<p>2 FILER NAME Bazan, Norma A. (Mrs.)</p>			
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$</p>			
<p>5 Date 12/26/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, C. W. (Mr.)</p>	<p>8 Amount of contribution (\$) \$350.00</p>	<p>9 In-kind contribution description yard signs</p>
<p>7 Contributor address; City; State; Zip Code Fort Worth, TX 76107</p>			
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>			
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p>	
<p>12 Contributor's principal occupation (FOR JUDICIAL) Attorney</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions) Attorney</p>	
<p>14 Contributor's employer/law firm (FOR JUDICIAL) C.W. Martin Law Office, PLLC</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>	
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>			
<p>Date 09/17/2025</p>			
<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patino, Erika (Ms.)</p>		<p>Amount of contribution (\$) \$4,000.00</p>	<p>In-kind contribution description</p>
<p>Contributor address; City; State; Zip Code Arlington, TX 76013</p>		<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>	
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>	
<p>Contributor's principal occupation (FOR JUDICIAL) Attorney</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions) Attorney</p>	
<p>Contributor's employer/law firm (FOR JUDICIAL) Erika V. Patino & Associates, PLLC</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>	
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>			

LOANS (JUDICIAL)

SCHEDULE E(J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): Sch: 1/2 Rpt: 23/27
2 FILER NAME Bazan, Norma A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089671
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 08/12/2025	7 Name of lender Bazan Sr., Jorge (Mr.)	8 <input type="checkbox"/> out-of-state PAC (ID#:)
6 Is lender a financial institution? No	9 Loan Amount (\$) \$15,000.00	10 Interest Rate
		11 Maturity Date 11/15/2026
12 Lender's Principal Occupation Roofing Company		13 Lender's Job Title President
14 Lender's Employer/Law Firm		15 Law Firm of lender's spouse (if any)
16 If lender is child, law firm of parent(s) (if any)		
17 Description of Collateral <input checked="" type="checkbox"/> None		18 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
19 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	20 Name of guarantor	22 Amount Guaranteed (\$)
21 Guarantor address; City; State; Zip Code		
23 Guarantor's Principal Occupation		24 Guarantor's Job Title
25 Guarantor's Employer/Law Firm		26 Law Firm of guarantor's spouse (if any)
27 If guarantor is child, law firm of parent(s) (if any)		

LOANS (JUDICIAL)

SCHEDULE E(J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): Sch: 2/2 Rpt: 24/27	
2 FILER NAME Bazan, Norma A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089671	
4 TOTAL OF UNITEMIZED LOANS		\$	
5 Date of loan 12/31/2025	7 Name of lender Bazan Sr., Jorge (Mr.)	8 out-of-state PAC (ID#: _____)	9 Loan Amount (\$) \$3,500.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code River Oaks, TX 76114		10 Interest Rate
12 Lender's Principal Occupation		13 Lender's Job Title	
14 Lender's Employer/Law Firm		15 Law Firm of lender's spouse (if any)	
16 If lender is child, law firm of parent(s) (if any)			
17 Description of Collateral <input checked="" type="checkbox"/> None		18 Check if personal funds were deposited into political account <input type="checkbox"/> (See Instructions)	
19 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	20 Name of guarantor _____	21 Guarantor address; City; State; Zip Code	22 Amount Guaranteed (\$)
23 Guarantor's Principal Occupation		24 Guarantor's Job Title	
25 Guarantor's Employer/Law Firm		26 Law Firm of guarantor's spouse (if any)	
27 If guarantor is 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: 1/2 Rpt: 25/27	2 FILER NAME Bazan, Norma A. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00089671	
4 Date 08/26/2025	5 Payee name Edgerton Strategies		
6 Amount (\$) \$1,250.00	7 Payee address; City; 1540 Keller Parkway #108-402 Keller, TX 76248	State; Zip Code	
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 Digital consulting services	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/09/2025	Payee name Starboard Strategy Group		
Amount (\$) \$1,500.00	Payee address; City; 5129 Calmont Avenue Fort Worth, TX 76107	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Consulting fee	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/02/2025	Payee name Starboard Strategy Group		
Amount (\$) \$1,500.00	Payee address; City; 5129 Calmont Avenue Fort Worth, TX 76107	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Consulting 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: 2/2 Rpt: 26/27	2 FILER NAME Bazan, Norma A. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00089671
4 Date 11/04/2025	5 Payee name Starboard Strategy Group	
6 Amount (\$) \$1,500.00	7 Payee address; City; 5129 Calmont Avenue Fort Worth, TX 76107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Consulting fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/01/2025	Payee name TC GOP	
Amount (\$) \$2,500.00	Payee address; City; 201 N. Rupert Street Suite 117 Fort Worth, TX 76107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee to file Petition
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/26/2025	Payee name The Press Group	
Amount (\$) \$841.82	Payee address; City; 4620 Penbrook Court Plano, TX 75024	
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 push cards
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	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: 1/1 Rpt: 27/27	2 FILER NAME Bazan, Norma A. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00089671	
4 Date 09/17/2025	5 Payee name Marca		
6 Amount (\$) \$135.31	7 Payee address; City; State; Zip Code 5024 E. Belknap St Haltom City, TX 76117		
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 Banner	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/18/2025	Payee name Metro Mailer		
Amount (\$) \$243.56	Payee address; City; State; Zip Code 576 N. Beach Street Fort Worth, TX 76111		
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 cards and envelopes	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/15/2025	Payee name Metro Mailer		
Amount (\$) \$162.38	Payee address; City; State; Zip Code 576 N. Beach Street Fort Worth, TX 76111		
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 additional note cards and envelopes	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held