

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) 00089721	2 Total pages filed: 22	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Michelle L.	MI	OFFICE USE ONLY
	NICKNAME	LAST Williams	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 5851 Sunnygate Drive Spring, TX 77373			Date Hand-delivered or Date Postmarked
				Receipt # Amount
				Date Processed
				Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Elizabeth M.	MI	
	NICKNAME Liz	LAST Silva	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 10457 Gwen Street Houston, TX 77093			
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	(713)	382-9063		
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	THROUGH		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) None Harris		12 OFFICE SOUGHT (if known) State Representative District 127	

GO TO PAGE 2

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

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

2 of 22

13 C / OH NAME Williams, Michelle L. (Ms.)	14 Filer ID (Ethics Commission Filers) 00089721
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15 NOTICE FROM POLITICAL COMMITTEE(S) <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.	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME <hr/> COMMITTEE ADDRESS <hr/> COMMITTEE CAMPAIGN TREASURER NAME <hr/> COMMITTEE CAMPAIGN TREASURER ADDRESS <hr/>

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)	\$ 2,918.84
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,904.46
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. Michelle L. Williams

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

18 FILER NAME Williams, Michelle L. (Ms.)		19 Filer ID (Ethics Commission Filers) 00089721
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,918.84
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 checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,904.46
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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/15 Rpt: 4/22
2 FILER NAME Williams, Michelle L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089721
4 Date 09/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmont, Marlene	7 Amount of Contribution (\$) \$103.75
6 Contributor address; City; State; Zip Code Houston, TX 77075		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolanos, Ary	Amount of Contribution (\$) \$103.75
Contributor address; City; State; Zip Code Houston, TX 77018		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Alison	Amount of Contribution (\$) \$52.00
Contributor address; City; State; Zip Code Houston, TX 77044		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Charles	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Molly	Amount of Contribution (\$) \$103.75
Contributor address; City; State; Zip Code Houston, TX 77006		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/15 Rpt: 5/22
2 FILER NAME Williams, Michelle L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089721
4 Date 09/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotter, John <hr/> 6 Contributor address; City; State; Zip Code Kingwood, TX 77345	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danas, Kathryn <hr/> Contributor address; City; State; Zip Code Katy, TX 77449	Amount of Contribution (\$) \$15.78
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danas, Kathryn <hr/> Contributor address; City; State; Zip Code Katy, TX 77449	Amount of Contribution (\$) \$15.78
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deese, Shelia <hr/> Contributor address; City; State; Zip Code Houston, TX 77095	Amount of Contribution (\$) \$10.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durrel, Douglas <hr/> Contributor address; City; State; Zip Code HOuston, TX 77004	Amount of Contribution (\$) \$103.75
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/15 Rpt: 6/22
2 FILER NAME Williams, Michelle L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089721
4 Date 09/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eads, Kathy A <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77506	7 Amount of Contribution (\$) \$52.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Kameetra <hr/> Contributor address; City; State; Zip Code Manvel, TX 77578	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fernandez, Guadalupe <hr/> Contributor address; City; State; Zip Code Houston, TX 77029	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Laura <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$103.75
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchenson, L Michele <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$36.48
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/15 Rpt: 7/22
2 FILER NAME Williams, Michelle L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089721
4 Date 11/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jimenez, Angelica <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77080	7 Amount of Contribution (\$) \$52.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Patricia <hr/> Contributor address; City; State; Zip Code Houston, TX 77503	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Patrece <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Patrece <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Patrece <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/15 Rpt: 8/22
2 FILER NAME Williams, Michelle L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089721
4 Date 10/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Patrece <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75204	7 Amount of Contribution (\$) \$52.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaMargaret, Lewis <hr/> Contributor address; City; State; Zip Code houston, TX 77086	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monroe, Valiza <hr/> Contributor address; City; State; Zip Code Houston, TX 77017	Amount of Contribution (\$) \$103.75
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MorganJohnson, Sandra <hr/> Contributor address; City; State; Zip Code Houston, TX 77088	Amount of Contribution (\$) \$20.95
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nath, Audrey <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/15 Rpt: 9/22
2 FILER NAME Williams, Michelle L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089721
4 Date 07/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nath, Audrey	7 Amount of Contribution (\$) \$103.75
6 Contributor address; City; State; Zip Code Houston, TX 77019		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nath, Audrey	Amount of Contribution (\$) \$52.00
Contributor address; City; State; Zip Code Houston, TX 77019		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pelton-Sam, sonjia	Amount of Contribution (\$) \$10.60
Contributor address; City; State; Zip Code Baytown, TX 77521		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pelton-Sam, sonjia	Amount of Contribution (\$) \$10.60
Contributor address; City; State; Zip Code Baytown, TX 77521		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pelton-Sam, sonjia	Amount of Contribution (\$) \$10.60
Contributor address; City; State; Zip Code Baytown, TX 77521		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/15 Rpt: 10/22
2 FILER NAME Williams, Michelle L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089721
4 Date 12/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pelton-Sam, sonjia	7 Amount of Contribution (\$) \$10.60
6 Contributor address; City; State; Zip Code Baytown, TX 77521		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pelton-Sam, sonjia	Amount of Contribution (\$) \$10.60
Contributor address; City; State; Zip Code Baytown, TX 77521		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pelton-Sam, sonjia	Amount of Contribution (\$) \$10.60
Contributor address; City; State; Zip Code Baytown, TX 77521		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pelton-Sam, sonjia	Amount of Contribution (\$) \$10.60
Contributor address; City; State; Zip Code Baytown, TX 77521		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pelton-Sam, sonjia	Amount of Contribution (\$) \$10.60
Contributor address; City; State; Zip Code Baytown, TX 77521		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/15 Rpt: 11/22
2 FILER NAME Williams, Michelle L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089721
4 Date 09/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pelton-Sam, sonjia	7 Amount of Contribution (\$) \$10.60
6 Contributor address; City; State; Zip Code Baytown, TX 77521		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pelton-Sam, sonjia	Amount of Contribution (\$) \$10.60
Contributor address; City; State; Zip Code Baytown, TX 77521		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodgers, Dionne	Amount of Contribution (\$) \$26.13
Contributor address; City; State; Zip Code Houston, TX 77233		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodgers, Dionne	Amount of Contribution (\$) \$26.13
Contributor address; City; State; Zip Code Houston, TX 77233		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodgers, Dionne	Amount of Contribution (\$) \$26.13
Contributor address; City; State; Zip Code Houston, TX 77233		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/15 Rpt: 12/22
2 FILER NAME Williams, Michelle L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089721
4 Date 11/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodgers, Dionne <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77233	7 Amount of Contribution (\$) \$26.13
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodgers, Dionne <hr/> Contributor address; City; State; Zip Code Houston, TX 77233	Amount of Contribution (\$) \$26.13
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodgers, Dionne <hr/> Contributor address; City; State; Zip Code Houston, TX 77233	Amount of Contribution (\$) \$26.13
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodgers, Dionne <hr/> Contributor address; City; State; Zip Code Houston, TX 77233	Amount of Contribution (\$) \$26.13
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodgers, Dionne <hr/> Contributor address; City; State; Zip Code Houston, TX 77233	Amount of Contribution (\$) \$26.13
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/15 Rpt: 13/22
2 FILER NAME Williams, Michelle L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089721
4 Date 09/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodgers, Dionne <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77233	7 Amount of Contribution (\$) \$26.13
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rushing, Shawn <hr/> Contributor address; City; State; Zip Code Houston, TX 77045	Amount of Contribution (\$) \$15.78
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rushing, Shawn <hr/> Contributor address; City; State; Zip Code Houston, TX 77045	Amount of Contribution (\$) \$15.78
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rushing, Shawn <hr/> Contributor address; City; State; Zip Code Houston, TX 77045	Amount of Contribution (\$) \$15.78
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rushing, Shawn <hr/> Contributor address; City; State; Zip Code Houston, TX 77045	Amount of Contribution (\$) \$15.78
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/15 Rpt: 14/22
2 FILER NAME Williams, Michelle L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089721
4 Date 10/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rushing, Shawn	7 Amount of Contribution (\$) \$15.78
6 Contributor address; City; State; Zip Code Houston, TX 77045		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rushing, Shawn	Amount of Contribution (\$) \$15.78
Contributor address; City; State; Zip Code Houston, TX 77045		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rushing, Shawn	Amount of Contribution (\$) \$15.78
Contributor address; City; State; Zip Code Houston, TX 77045		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rushing, Shawn	Amount of Contribution (\$) \$15.78
Contributor address; City; State; Zip Code Houston, TX 77045		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rushing, Shawn	Amount of Contribution (\$) \$15.78
Contributor address; City; State; Zip Code Houston, TX 77045		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/15 Rpt: 15/22
2 FILER NAME Williams, Michelle L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089721
4 Date 10/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Shemiya <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77016	7 Amount of Contribution (\$) \$20.95
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Total Wellness Group <hr/> Contributor address; City; State; Zip Code Duson, LA 70529	Amount of Contribution (\$) \$36.48
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Cliff <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$259.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Nelva <hr/> Contributor address; City; State; Zip Code Richmond, TX 77407	Amount of Contribution (\$) \$10.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Nelva <hr/> Contributor address; City; State; Zip Code Richmond, TX 77407	Amount of Contribution (\$) \$10.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/15 Rpt: 16/22
2 FILER NAME Williams, Michelle L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089721
4 Date 08/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Nelva <hr/> 6 Contributor address; City; State; Zip Code Richmond, TX 77407	7 Amount of Contribution (\$) \$10.60
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Nelva <hr/> Contributor address; City; State; Zip Code Richmond, TX 77407	Amount of Contribution (\$) \$10.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Nelva <hr/> Contributor address; City; State; Zip Code Richmond, TX 77407	Amount of Contribution (\$) \$10.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Nelva <hr/> Contributor address; City; State; Zip Code Richmond, TX 77407	Amount of Contribution (\$) \$10.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Toni <hr/> Contributor address; City; State; Zip Code Lauderhill, FL 33351	Amount of Contribution (\$) \$20.95
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/15 Rpt: 17/22
2 FILER NAME Williams, Michelle L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089721
4 Date 07/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) adams, janel <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77070	7 Amount of Contribution (\$) \$10.60
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) adams, janel <hr/> Contributor address; City; State; Zip Code Houston, TX 77070	Amount of Contribution (\$) \$10.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) adams, janel <hr/> Contributor address; City; State; Zip Code Houston, TX 77070	Amount of Contribution (\$) \$10.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) adams, janel <hr/> Contributor address; City; State; Zip Code Houston, TX 77070	Amount of Contribution (\$) \$10.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) adams, janel <hr/> Contributor address; City; State; Zip Code Houston, TX 77070	Amount of Contribution (\$) \$10.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/15 Rpt: 18/22
2 FILER NAME Williams, Michelle L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089721
4 Date 12/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) adams, janel <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77070	7 Amount of Contribution (\$) \$10.60
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) jackson, kevin <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$36.48
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) livingston, lola <hr/> Contributor address; City; State; Zip Code spring, TX 77379	Amount of Contribution (\$) \$103.75
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) livingston, lola <hr/> Contributor address; City; State; Zip Code spring, TX 77379	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) yarborough, melissa <hr/> Contributor address; City; State; Zip Code Houston, TX 77023	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions)		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.

1	Total pages Schedule F1: Sch: 1/4 Rpt: 19/22	2	FILER NAME Williams, Michelle L. (Ms.)	3	Filer ID (Ethics Commission Filers) 00089721
4	Date 09/25/2025	5	Payee name Campos, Jessica		
6	Amount (\$) \$475.00	7	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE TX		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for kickoff party		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 11/05/2025		Payee name Civitech PBC		
	Amount (\$) \$32.48		Payee address; City; State; Zip Code 1023 Springdale Road Austin, TX 78721		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 RunningMate: State House		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 11/30/2025		Payee name Civitech PBC		
	Amount (\$) \$32.48		Payee address; City; State; Zip Code 1023 Springdale Road Austin, TX 78721		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 Subscription		
	Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 2/4 Rpt: 20/22	2	FILER NAME Williams, Michelle L. (Ms.)	3	Filer ID (Ethics Commission Filers) 00089721
4	Date 09/03/2025	5	Payee name NPG VAN, Inc.		
6	Amount (\$) \$47.97	7	Payee address; City; State; Zip Code 655 15th St NW, Suite 650 Washington, DC 20005		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Subscription to candidate services		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 07/01/2025		Payee name NPG VAN, Inc.		
	Amount (\$) \$47.94		Payee address; City; State; Zip Code 655 15th St NW, Suite 650 Washington, DC 20005		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 Polling service subscription		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/16/2025		Payee name NameBadge		
	Amount (\$) \$36.44		Payee address; City; State; Zip Code 12240 SW 53rd Street Suite 511 Cooper City, FL 33330		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign shirt		
		Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/4 Rpt: 21/22	2 FILER NAME Williams, Michelle L. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089721
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4 Date 10/15/2025	5 Payee name Office Max
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6 Amount (\$) \$149.15	7 Payee address; City; State; Zip Code 20075 I45N Spring, TX 77388
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Toner
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2025	Payee name State Of Texas
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Amount (\$) \$750.00	Payee address; City; State; Zip Code 1100 Congress Avenue Austin, TX 78701
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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 Filing fee for candidate
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/27/2025	Payee name Taylor, Shemiya
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Amount (\$) \$220.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE TX
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Balloons for campaign kick off party
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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.

1 Total pages Schedule F1: Sch: 4/4 Rpt: 22/22	2 FILER NAME Williams, Michelle L. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089721
4 Date 11/05/2025	5 Payee name USPS	
6 Amount (\$) \$113.00	7 Payee address; City; State; Zip Code 1411 Wunsche Loop Spring, TX 77373	
8 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 PO Box fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held