

**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) 00089722	2 Total pages filed: 33		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Tamecia S.	MI	OFFICE USE ONLY		
	NICKNAME	LAST Glover	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; 9711 Mason Rd. Ste. 125-277 Richmond, TX 77407			ZIP CODE Date Hand-delivered or Date Postmarked		
				Receipt # <input type="text"/> Amount <input type="text"/>		
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Candice	MI			
	NICKNAME	LAST Elliott	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 7402 Swan Ranch Lane Richmond , TX 77407		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (251) 458-2626					
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 07/01/2025	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) None			12 OFFICE SOUGHT (if known) District Judge District 502		

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	Glover, Tamecia S. (Ms.)		14 Filer ID (Ethics Commission Filers) 00089722												
15 NOTICE FROM POLITICAL COMMITTEE(S)	<p>This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.</p> <table border="1"> <tr> <td><input type="checkbox"/> Additional Pages</td> <td>COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td></td> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td></td> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>			<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS		<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			COMMITTEE CAMPAIGN TREASURER ADDRESS
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME													
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS													
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME													
		COMMITTEE CAMPAIGN TREASURER ADDRESS													
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00												
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 7,130.00												
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00												
	4. TOTAL POLITICAL EXPENDITURES		\$ 29,444.84												
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 6,430.57												
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 5,500.00												
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>Ms. Tamecia S. Glover _____ 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 Glover, Tamecia S. (Ms.)	19 Filer ID (Ethics Commission Filers) 00089722
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A(J): MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 7,130.00
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input checked="" type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$ 793.62
4. <input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$ 5,500.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 29,444.84
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 A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/13 Rpt: 4/33
2 FILER NAME Glover, Tamecia S. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089722
4 Date 07/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrow, Nadia 6 Contributor address; City; State; Zip Code Houston, TX 77055	7 Amount of Contribution (\$) \$105.75
	8 Contributor's Principal Occupation Attorney	9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Fervo Energy Company		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 08/08/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrow, Nadia Contributor address; City; State; Zip Code Houston, TX 77055		Amount of Contribution (\$) \$105.75
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Fervo Energy Company		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/08/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrow, Nadia Contributor address; City; State; Zip Code Houston, TX 77055		Amount of Contribution (\$) \$105.75
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Fervo Energy Company		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: 2/13 Rpt: 5/33
2 FILER NAME Glover, Tamecia S. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089722
4 Date 10/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrow, Nadia 6 Contributor address; City; State; Zip Code Houston, TX 77055	7 Amount of Contribution (\$) \$105.75
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Fervo Energy Company		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/08/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrow, Nadia Contributor address; City; State; Zip Code Houston, TX 77055		Amount of Contribution (\$) \$105.75
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Fervo Energy Company		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/08/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrow, Nadia Contributor address; City; State; Zip Code Houston, TX 77055		Amount of Contribution (\$) \$105.75
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Fervo Energy Company		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: 3/13 Rpt: 6/33
2 FILER NAME Glover, Tamecia S. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089722
4 Date 12/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byas, Allycin	7 Amount of Contribution (\$) \$53.04
	6 Contributor address; City; State; Zip Code Richmond, TX 77407	
8 Contributor's Principal Occupation Bartender		9 Contributor's Job Title Bartender
10 Contributor's employer/law firm Self-employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christie, Greg	Amount of Contribution (\$) \$53.04
	Contributor address; City; State; Zip Code Houston, TX 77004	
Contributor's Principal Occupation Project Manager		Contributor's Job Title Project Manager
Contributor's employer/law firm Montgomery Roth Architecture and interior Design		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer-Price, Pamela	Amount of Contribution (\$) \$105.75
	Contributor address; City; State; Zip Code Houston, TX 77004	
Contributor's Principal Occupation Associate Director		Contributor's Job Title Associate Director
Contributor's employer/law firm Lexicon Pharmaceuticals		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: 4/13 Rpt: 7/33
2 FILER NAME Glover, Tamecia S. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089722
4 Date 08/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer-Price, Pamela	7 Amount of Contribution (\$) \$105.75
	6 Contributor address; City; State; Zip Code Houston, TX 77004	
8 Contributor's Principal Occupation Associate Director		9 Contributor's Job Title Associate Director
10 Contributor's employer/law firm Lexicon Pharmaceuticals		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer-Price, Pamela	Amount of Contribution (\$) \$105.75
	Contributor address; City; State; Zip Code Houston, TX 77004	
Contributor's Principal Occupation Associate Director		Contributor's Job Title Associate Director
Contributor's employer/law firm Lexicon Pharmaceuticals		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer-Price, Pamela	Amount of Contribution (\$) \$105.75
	Contributor address; City; State; Zip Code Houston, TX 77004	
Contributor's Principal Occupation Associate Director		Contributor's Job Title Associate Director
Contributor's employer/law firm Lexicon Pharmaceuticals		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: 5/13 Rpt: 8/33
2 FILER NAME Glover, Tamecia S. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089722
4 Date 11/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer-Price, Pamela	7 Amount of Contribution (\$) \$105.75
	6 Contributor address; City; State; Zip Code Houston, TX 77004	
8 Contributor's Principal Occupation Associate Director		9 Contributor's Job Title Associate Director
10 Contributor's employer/law firm Lexicon Pharmaceuticals		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer-Price, Pamela	Amount of Contribution (\$) \$105.75
	Contributor address; City; State; Zip Code Houston, TX 77004	
Contributor's Principal Occupation Associate Director		Contributor's Job Title Associate Director
Contributor's employer/law firm Lexicon Pharmaceuticals		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fields, John	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77021	
Contributor's Principal Occupation Associate Attorney		Contributor's Job Title Associate Attorney
Contributor's employer/law firm Chamberlain Hrdlicka		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: 6/13 Rpt: 9/33	
2 FILER NAME Glover, Tamecia S. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089722	
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Clemetric 6 Contributor address; City; State; Zip Code Richmond, TX 77406	7 Amount of Contribution (\$) \$21.41	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney	
10 Contributor's employer/law firm Self-employed		11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)			
Date 07/01/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grigsby, Ava Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$105.75
Contributor's Principal Occupation Operations Manager		Contributor's Job Title Operations Manager	
Contributor's employer/law firm MD Anderson		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 07/01/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hittle, Donnie Contributor address; City; State; Zip Code Richmond, TX 77406	Amount of Contribution (\$) \$53.04
Contributor's Principal Occupation AGM		Contributor's Job Title AGM	
Contributor's employer/law firm Costco		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: 7/13 Rpt: 10/33
2 FILER NAME Glover, Tamecia S. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089722
4 Date 08/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins, Alicia	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Missouri City, TX 77459	
8 Contributor's Principal Occupation Doctor		9 Contributor's Job Title Doctor
10 Contributor's employer/law firm Baylor College of Medicine		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Sherry	Amount of Contribution (\$) \$53.04
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Contributor's Principal Occupation Self-employed		Contributor's Job Title Self-employed
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 07/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Marc	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Fresno, TX 77545	
Contributor's Principal Occupation Senior Financial Analyst		Contributor's Job Title Senior Financial Analyst
Contributor's employer/law firm JAS Services		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: 8/13 Rpt: 11/33
2 FILER NAME Glover, Tamecia S. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089722
4 Date 09/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiggundu, Jammy 6 Contributor address; City; State; Zip Code Sugar Land, TX 77479	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Partner		9 Contributor's Job Title Partner
10 Contributor's employer/law firm Douglass & Kiggundu, PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/01/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nwokonko, Emma Contributor address; City; State; Zip Code Houston, TX 77082		Amount of Contribution (\$) \$50.00
Contributor's Principal Occupation Executive Recruiter		Contributor's Job Title Executive Recruiter
Contributor's employer/law firm Fervo		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parrott, Kimberly Contributor address; City; State; Zip Code Richmond, TX 77407		Amount of Contribution (\$) \$75.00
Contributor's Principal Occupation Assistant Director		Contributor's Job Title Assistant Director
Contributor's employer/law firm Region IV		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: 9/13 Rpt: 12/33
2 FILER NAME Glover, Tamecia S. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089722
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Bo 6 Contributor address; City; State; Zip Code Sugar Land, TX 77496	7 Amount of Contribution (\$) \$263.90
	8 Contributor's Principal Occupation Founder, CEO	
9 Contributor's Job Title Founder, CEO		
10 Contributor's employer/law firm Bo Porter Future All-Stars Baseball		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarfoh, Sheri Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$53.04
	Contributor's Principal Occupation Corporate Counsel	
Contributor's Job Title Corporate Counsel		
Contributor's employer/law firm Service Corporation International		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sugar Land Mortuary Contributor address; City; State; Zip Code Sugar Land, TX 77478	Amount of Contribution (\$) \$2,000.00
	Contributor's Principal Occupation	
Contributor's Job Title		
Contributor's employer/law firm		
Law firm of contributor's spouse (if any)		
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/13 Rpt: 13/33
2 FILER NAME Glover, Tamecia S. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089722
4 Date 07/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suggs, Wes	7 Amount of Contribution (\$) \$105.75
	6 Contributor address; City; State; Zip Code Tomball, TX 77375	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Alliant		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Hatton Law Firm	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77478	
Contributor's Principal Occupation		Contributor's Job Title Owner
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#: _____) Tullous, Cordelia	Amount of Contribution (\$) \$53.04
	Contributor address; City; State; Zip Code Irving, TX 75062	
Contributor's Principal Occupation Strategy Consultant		Contributor's Job Title Strategy Consultant
Contributor's employer/law firm Redstone Consulting		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: 11/13 Rpt: 14/33
2 FILER NAME Glover, Tamecia S. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089722
4 Date 08/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tullous, Cordelia 6 Contributor address; City; State; Zip Code Irving, TX 75062	7 Amount of Contribution (\$) \$53.04
8 Contributor's Principal Occupation Strategy Consultant		9 Contributor's Job Title Strategy Consultant
10 Contributor's employer/law firm Redstone Consulting		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/30/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tullous, Cordelia Contributor address; City; State; Zip Code Irving, TX 75062		Amount of Contribution (\$) \$53.04
Contributor's Principal Occupation Strategy Consultant		Contributor's Job Title Strategy Consultant
Contributor's employer/law firm Redstone Consulting		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/01/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tullous, Cordelia Contributor address; City; State; Zip Code Irving, TX 75062		Amount of Contribution (\$) \$53.04
Contributor's Principal Occupation Strategy Consultant		Contributor's Job Title Strategy Consultant
Contributor's employer/law firm Redstone Consulting		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: 12/13 Rpt: 15/33
2 FILER NAME Glover, Tamecia S. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089722
4 Date 11/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tullous, Cordelia 6 Contributor address; City; State; Zip Code Irving, TX 75062	7 Amount of Contribution (\$) \$53.04
8 Contributor's Principal Occupation Strategy Consultant		9 Contributor's Job Title Strategy Consultant
10 Contributor's employer/law firm Redstone Consulting		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/30/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tullous, Cordelia Contributor address; City; State; Zip Code Irving, TX 75062		Amount of Contribution (\$) \$53.04
Contributor's Principal Occupation Strategy Consultant		Contributor's Job Title Strategy Consultant
Contributor's employer/law firm Redstone Consulting		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/07/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Jeremy Contributor address; City; State; Zip Code Houston, TX 77071		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Signal Officer		Contributor's Job Title Signal Officer
Contributor's employer/law firm US Army		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

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A(J)1: Sch: 13/13 Rpt: 16/33</p>
<p>2 FILER NAME Glover, Tamecia S. (Ms.)</p>		<p>3 Filer ID (Ethics Commission Filers) 00089722</p>
<p>4 Date 08/03/2025</p>	<p>5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Ken 6 Contributor address; City; State; Zip Code Sugar Land, TX 77498</p>	<p>7 Amount of Contribution (\$) \$105.75</p>
<p>8 Contributor's Principal Occupation Executive Director</p>		<p>9 Contributor's Job Title Executive Director</p>
<p>10 Contributor's employer/law firm Divine Caregivers, Inc</p>		<p>11 Law firm of contributor's spouse (if any)</p>
<p>12 If contributor is a child, law firm of parent(s) (if any)</p>		
<p>Date 07/18/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Jessica Contributor address; City; State; Zip Code Missouri City, TX 77459</p>	<p>Amount of Contribution (\$) \$50.00</p>
<p>Contributor's Principal Occupation Project Specialist</p>		<p>Contributor's Job Title Project Specialist</p>
<p>Contributor's employer/law firm Fluor Corporation</p>		<p>Law firm of contributor's spouse (if any)</p>
<p>If contributor is a child, law firm of parent(s) (if any)</p>		

PLEDGED CONTRIBUTIONS (JUDICIAL)

SCHEDULE B(J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B(J):

Sch: 1/1 Rpt: 17/33

2 FILER NAME

Glover, Tamecia S. (Ms.)

3 Filer ID (Ethics Commission Filers)

00089722

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date 12/31/2025	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrow, Nadia 7 Pledgor Address; City; State; Zip Code Houston, TX 77055	8 Amount of pledge (\$) \$317.25	9 In-kind description (If applicable) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
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10 Pledgor's principal occupation

Attorney

11 Pledgor's job title

Attorney

12 Pledgor's employer/law firm

Fervo Energy Company

13 Law firm of pledgor's spouse (if any)

14 If pledgor is a child, law firm of parent(s) (if any)

Date 12/31/2025	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer-Price, Pamela (Dr.) Pledgor Address; City; State; Zip Code Houston, TX 77004	Amount of pledge (\$) \$317.25	In-kind description (If applicable) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
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Pledgor's principal occupation

Pharmacist

Pledgor's job title

Director

Pledgor's employer/law firm

Lexicon Pharmaceutical

Law firm of pledgor's spouse (if any)

If pledgor is a child, law firm of parent(s) (if any)

Date 12/31/2025	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tullous, Cordelia Pledgor Address; City; State; Zip Code Irving, TX 75062	Amount of pledge (\$) \$159.12	In-kind description (If applicable) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
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Pledgor's principal occupation

Strategy Consultant

Pledgor's job title

Strategy Consultant

Pledgor's employer/law firm

Redstone Consulting

Law firm of pledgor's spouse (if any)

If pledgor is a 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: 1/1 Rpt: 18/33	
2 FILER NAME Glover, Tamecia S. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089722	
4 TOTAL OF UNITEMIZED LOANS		\$	
5 Date of loan 12/31/2025	7 Name of lender Glover, Tamecia	8 out-of-state PAC (ID#: _____)	9 Loan Amount (\$) \$5,500.00
6 Is lender a financial institution? No	8 Lent address; TX 77469	City; State; Zip Code	10 Interest Rate
			11 Maturity Date
12 Lender's Principal Occupation Attorney		13 Lender's Job Title Assistant County Attorney	
14 Lender's Employer/Law Firm Fort Bend County Attorneys Office		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	20 Name of guarantor <input checked="" type="checkbox"/> not applicable		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)			

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: 1/14 Rpt: 19/33	2 FILER NAME Glover, Tamecia S. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089722
4 Date 10/06/2025	5 Payee name A Better Me Ministries	
6 Amount (\$) \$175.00	7 Payee address; City; 13035 Highway 6 Rosharon, TX 77583	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fashion Show Donation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/08/2025	Payee name African American Memorial Heritage Monument And Park	
Amount (\$) \$29.81	Payee address; City; 630 Charlie Roberts Ln Kendleton, TX 77451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/24/2025	Payee name Amazon	
Amount (\$) \$34.82	Payee address; City; 410 Terry Ave N Seattle, WA 98109	
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 Parade Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/14 Rpt: 20/33	2 FILER NAME Glover, Tamecia S. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089722
4 Date 12/12/2025	5 Payee name American Caribbean Chamber of Commerce	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code No Street Address Provided Richmond, TX 77407	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bike Drive Donation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/08/2025	Payee name Black Cowboy Museum	
Amount (\$) \$45.41	Payee address; City; State; Zip Code 1104 3rd St. Rosenberg, TX 77471	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name DTF Print House	
Amount (\$) \$25.35	Payee address; City; State; Zip Code 4007 Greenbriar Stafford, TX 77477	
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 T-shirts
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/14 Rpt: 21/33	2 FILER NAME Glover, Tamecia S. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089722
4 Date 07/02/2025	5 Payee name Dibrell & Associates	
6 Amount (\$) \$7,630.00	7 Payee address; City; 4203 Glade Shadow Ct Sugar Land, TX 77479	
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 Road Signs
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Dibrell & Associates	Office sought Office held
Date 07/14/2025	Payee name Dibrell & Associates	
Amount (\$) \$3,413.00	Payee address; City; 4203 Glade Shadow Ct Sugar Land, TX 77479	
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 Commercial Production
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Dibrell & Associates	Office sought Office held
Date 07/31/2025	Payee name Dibrell & Associates	
Amount (\$) \$1,350.00	Payee address; City; 4203 Glade Shadow Ct Sugar Land, TX 77479	
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 Video Production
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Dibrell & Associates	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/14 Rpt: 22/33	2 FILER NAME Glover, Tamecia S. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089722
4 Date 08/09/2025	5 Payee name Dibrell & Associates	
6 Amount (\$) \$100.00	7 Payee address; City; 4203 Glade Shadow Ct Sugar Land, TX 77479	
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 Advertising Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Dibrell & Associates	Office sought Office held
Date 09/05/2025	Payee name Dibrell & Associates	
Amount (\$) \$52.96	Payee address; City; 4203 Glade Shadow Ct Sugar Land, TX 77479	
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 Shirts
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Dibrell & Associates	Office sought Office held
Date 09/16/2025	Payee name Dibrell & Associates	
Amount (\$) \$500.00	Payee address; City; 4203 Glade Shadow Ct Sugar Land, TX 77479	
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 Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Dibrell & Associates	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/14 Rpt: 23/33	2 FILER NAME Glover, Tamecia S. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089722
4 Date 10/10/2025	5 Payee name Dibrell & Associates	
6 Amount (\$) \$2,950.00	7 Payee address; City; 4203 Glade Shadow Ct Sugar Land, TX 77479	
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 Commercial Placement
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Dibrell & Associates	Office sought Office held
Date 10/27/2025	Payee name Dibrell & Associates	
Amount (\$) \$3,250.00	Payee address; City; 4203 Glade Shadow Ct Sugar Land, TX 77479	
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 Commercial Placement, Canvassing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Dibrell & Associates	Office sought Office held
Date 11/23/2025	Payee name Dibrell & Associates	
Amount (\$) \$750.00	Payee address; City; 4203 Glade Shadow Ct Sugar Land, TX 77479	
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
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Dibrell & Associates	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/14 Rpt: 24/33	2 FILER NAME Glover, Tamecia S. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089722
4 Date 07/28/2025	5 Payee name Dolly's Girl Organics	
6 Amount (\$) \$20.00	7 Payee address; City; 5855 Sienna Spring Way Missouri City, TX 77459	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Farmer's Market Donation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/31/2025	Payee name Donorbox.org	
Amount (\$) \$523.73	Payee address; City; 5 3rd St Ste 900 San Francisco, CA 94103	
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 Transaction Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/25/2025	Payee name Fort Bend Chamber of Commerce	
Amount (\$) \$125.00	Payee address; City; 445 Commerce Green Blvd Sugar Land, TX 77478	
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 Candidate's Academy
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/14 Rpt: 25/33	2 FILER NAME Glover, Tamecia S. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089722
4 Date 12/03/2025	5 Payee name Fort Bend County Democratic Party	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 13515 Southwest Fwy #204 Sugar Land, TX 77478	
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 Filing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/03/2025	Payee name Fort Bend County Democratic Party	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 13515 Southwest Fwy #204 Sugar Land, TX 77478	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Party Donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/25/2025	Payee name HEB	
Amount (\$) \$101.20	Payee address; City; State; Zip Code 4724 HWY 6 Missouri City, TX 77459	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Turkey Donation to Santee Foundation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/14 Rpt: 26/33	2 FILER NAME Glover, Tamecia S. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089722
4 Date 10/06/2025	5 Payee name Honorable Keisha Smith	
6 Amount (\$) \$70.00	7 Payee address; City; State; Zip Code 1517 Eugene Heimann Circle Richmond, TX 77469	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gala and Art Show Sponsorship
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/28/2025	Payee name Hyatt Place Sugar Land	
Amount (\$) \$149.28	Payee address; City; State; Zip Code 16730 Creekbend Dr Sugar Land, TX 77478	
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 Commercial Hotel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/24/2025	Payee name Jesse Torres Signs	
Amount (\$) \$4,104.60	Payee address; City; State; Zip Code No Street Address Provided Sugar Land, TX 77469	
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 Road Sign Placement and Materials
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/14 Rpt: 27/33	2 FILER NAME Glover, Tamecia S. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089722
4 Date 08/28/2025	5 Payee name Kroger	
6 Amount (\$) \$41.00	7 Payee address; City; 8011 W Grand Pkwy S Richmond, TX 77407	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/02/2025	Payee name Missouri City Sweet Extravagance	
Amount (\$) \$6.60	Payee address; City; 9720 Hwy 6 Ste 1000F Missouri City, TX 77459	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/07/2025	Payee name Portrait Pal	
Amount (\$) \$35.00	Payee address; City; 1925 Lovering Avenue Wilmington, DE 19806	
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 Headshots
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: 10/14 Rpt: 28/33	2 FILER NAME Glover, Tamecia S. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089722
4 Date 09/18/2025	5 Payee name See You At the Polls	
6 Amount (\$) \$75.00	7 Payee address; City; State; Zip Code No Street Address Provided Missouri City, TX 77459	
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 Parade Float Decorations
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/08/2025	Payee name See You At the Polls	
Amount (\$) \$50.00	Payee address; City; State; Zip Code No Street Address Provided Missouri City , TX 77459	
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 No Kings Rally - Advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/03/2025	Payee name See You At the Polls	
Amount (\$) \$75.00	Payee address; City; State; Zip Code No Street Address Provided Missouri City, TX 77459	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense The Hampton at Meadows Place Holiday Party Donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/14 Rpt: 29/33	2 FILER NAME Glover, Tamecia S. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089722
4 Date 08/13/2025	5 Payee name Students Engaged in Advancing Texas	
6 Amount (\$) \$30.00	7 Payee address; City; State; Zip Code P.O. Box 11113 Katy, TX 77492	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/05/2025	Payee name Texas Democratic Women	
Amount (\$) \$30.00	Payee address; City; State; Zip Code No Street Address Provided Sugar Land, TX 77469	
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 Dues
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/11/2025	Payee name Texas Democratic Women	
Amount (\$) \$50.00	Payee address; City; State; Zip Code No Street Address Provided Sugar Land, TX 77469	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to Fort Bend Women's Center
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/14 Rpt: 30/33	2 FILER NAME Glover, Tamecia S. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089722
4 Date 07/25/2025	5 Payee name The Palmer House	
6 Amount (\$) \$50.00	7 Payee address; City; P.O. Box 17593 Sugar Land, TX 77496	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Back to School Donation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/09/2025	Payee name The UPS Store	
Amount (\$) \$115.98	Payee address; City; 9711 Mason Road #125 Richmond, TX 77407	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailbox
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/15/2025	Payee name Thin Blue Line - Katy	
Amount (\$) \$100.00	Payee address; City; 802 Long Prairie Dr Katy, TX 77450	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Raffle Donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/14 Rpt: 31/33	2 FILER NAME Glover, Tamecia S. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089722
4 Date 07/11/2025	5 Payee name Vista Print	
6 Amount (\$) \$104.11	7 Payee address; City; State; Zip Code 4203 Glade Shadow Ct Katy, TX 77494	
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 Advertising Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/29/2025	Payee name Vista Print	
Amount (\$) \$66.92	Payee address; City; State; Zip Code 275 Wyman St Ste 100 Waltham, MA 02451	
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 Advertising Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/17/2025	Payee name Vista Print	
Amount (\$) \$47.64	Payee address; City; State; Zip Code 275 Wyman St Ste 100 Waltham, MA 02451	
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 T-shirts
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: 14/14 Rpt: 32/33	2 FILER NAME Glover, Tamecia S. (Ms.)	3 Filer ID (Ethics Commission Filers) 00089722
4 Date 11/06/2025	5 Payee name Vista Print	
6 Amount (\$) \$50.13	7 Payee address; City; 275 Wyman St Ste 100 Waltham, MA 02451	
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 Pushcards
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Vista print	Office sought Office held
Date 11/23/2025	Payee name Vista print	
Amount (\$) \$17.30	Payee address; City; 275 Wyman St Ste 100 Waltham, MA 02451	
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 Checks
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Vista print	Office sought Office held

OUTSTANDING LOANS

SCHEDULE L

The Instruction Guide explains how to complete this form.		1 Total pages Schedule L: Sch: 1/1 Rpt: 33/33
2 FILER NAME Glover, Tamecia S. (Ms.)		3 Filer ID (Ethics Commission Filers) 00089722
LENDER INFORMATION	4 Name of lender Glover, Tamecia	
	5	
	TX	
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	6 Name of guarantor	
	7	