

**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) 00086453 | 2 Total pages filed: 9 | | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR | FIRST The Honorable Staci D. | MI | OFFICE USE ONLY | | |
| | NICKNAME | LAST Childs | SUFFIX | Date Received ELECTRONICALLY FILED 02/02/2026 | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; 13958 Cottingham Street Unit 10207 Houston, TX 77048 | | | Date Hand-delivered or Date Postmarked | | |
| | | | | Receipt # | Amount | |
| | | | | Date Processed | | |
| | | | | Date Imaged | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR | FIRST Ms. | MI | | | |
| | NICKNAME | LAST Bowman | SUFFIX | | | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); 1093 Jefferson Ave. East Point , GA 30344 | | APT / SUITE #; | CITY; | STATE; | ZIP CODE |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (404) 558-7637 | | | | | |
| 8 REPORT TYPE | <input type="checkbox"/> January 15 <input checked="" 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 01/01/2026 | Day | Year | Month 01/22/2026 | Day | Year |
| 10 ELECTION | ELECTION DATE Month Day Year 03/03/2026 | | ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special | | | |
| 11 OFFICE | OFFICE HELD (if any) State Board Of Education District 4 | | | 12 OFFICE SOUGHT (if known) State Representative District 131 | | |

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

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

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|--|--|--------------------------------------|---|
| 13 C / OH NAME | Childs, Staci D. (The Honorable) | | 14 Filer ID (Ethics Commission Filers) 00086453 |
| 15 NOTICE FROM POLITICAL COMMITTEE(S) | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. | | |
| <input type="checkbox"/> Additional Pages | COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | COMMITTEE NAME | |
| | | COMMITTEE ADDRESS | |
| | | COMMITTEE CAMPAIGN TREASURER NAME | |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS | |
| 16 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | | \$ 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | | \$ 13,797.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | | \$ 0.00 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | | \$ 35.26 |
| 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

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.

The Honorable Staci D. Childs

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day
of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

SUBTOTALS - C/OH

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

3 of 9

| | | |
|--|---|--|
| 18 FILER NAME Childs, Staci D. (The Honorable) | | 19 Filer ID (Ethics Commission Filers) 00086453 |
| 20 SCHEDULE SUBTOTALS | | |
| NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 13,797.00 |
| 2. | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input checked="" type="checkbox"/> SCHEDULE E: LOANS | \$ 5,500.00 |
| 5. | <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 6. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 7. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 8. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 9. | <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/5 Rpt: 4/9 |
| 2 FILER NAME Childs, Staci D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00086453 |
| 4 Date 01/08/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apakama, Onyi | 7 Amount of Contribution (\$) \$250.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77027 | |
| 8 Principal occupation / Job title (See Instructions) Ed Tech | | 9 Employer (See Instructions) Gradient Learning |
| Date 01/13/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bishop, Jeff | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77098 | |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Consultant |
| Date 01/13/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bishop, Jeff | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77098 | |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Consultant |
| Date 01/11/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbellmoore, JoAnne | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Lithonia, GA 30038 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 01/22/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Jefferson | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Pearland, TX 77584 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/5 Rpt: 5/9 |
| 2 FILER NAME Childs, Staci D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00086453 |
| 4 Date 01/13/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotton, Christopher (Mr.) | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77002 | |
| 8 Principal occupation / Job title (See Instructions) Project Management | | 9 Employer (See Instructions) |
| Date 01/03/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Isaiah | Amount of Contribution (\$) \$2,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77048 | |
| Principal occupation / Job title (See Instructions) Case Manager | | Employer (See Instructions) The Stat of Hope |
| Date 01/15/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Isaiah | Amount of Contribution (\$) \$1,131.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77048 | |
| Principal occupation / Job title (See Instructions) Case Manager | | Employer (See Instructions) The Stat of Hope |
| Date 01/15/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardaway, Christina | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Atlanta, GA 30331 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/06/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Christina | Amount of Contribution (\$) \$40.00 |
| | Contributor address; City; State; Zip Code Douglasville, GA 30135 | |
| Principal occupation / Job title (See Instructions) Work | | Employer (See Instructions) From home |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/5 Rpt: 6/9 |
| 2 FILER NAME Childs, Staci D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00086453 |
| 4 Date 01/16/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Avery | 7 Amount of Contribution (\$) \$75.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77047 | |
| 8 Principal occupation / Job title (See Instructions) Na | | 9 Employer (See Instructions) Na |
| Date 01/14/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karjeker, Alejandro | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Brooklyn, NY 11238 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/13/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karjeker, Alejandro | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Brooklyn, NY 11238 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/03/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenney, Robert | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code LONE TREE, CO 80124 | |
| Principal occupation / Job title (See Instructions) President | | Employer (See Instructions) Xcel Energy Colorado |
| Date 01/11/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Legacy 44 | Amount of Contribution (\$) \$7,500.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78756 | |
| 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: 4/5 Rpt: 7/9 |
| 2 FILER NAME Childs, Staci D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00086453 |
| 4 Date 01/21/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Brittany | 7 Amount of Contribution (\$) \$131.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78247 | |
| 8 Principal occupation / Job title (See Instructions) Vice President of Business Development | | 9 Employer (See Instructions) Pearson |
| Date 01/02/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McShay, Juli | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77007 | |
| Principal occupation / Job title (See Instructions) Professor | | Employer (See Instructions) San Jacinto College |
| Date 01/02/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sereal, Ursula | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Manvel, TX 77578-3291 | |
| Principal occupation / Job title (See Instructions) Human Resources | | Employer (See Instructions) Saipem |
| Date 01/12/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singletary, Ivy | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Atlanta, GA 30311 | |
| Principal occupation / Job title (See Instructions) Public Health Advisor | | Employer (See Instructions) CDC |
| Date 01/12/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singletary, Ivy | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Atlanta, GA 30311 | |
| Principal occupation / Job title (See Instructions) Public Health Advisor | | Employer (See Instructions) CDC |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/5 Rpt: 8/9 |
| 2 FILER NAME Childs, Staci D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00086453 |
| 4 Date 01/05/2026 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smoot, Randy 6 Contributor address; City; State; Zip Code Springfield, OH 45503 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) Executive Director | | 9 Employer (See Instructions) Oakmont education |
| Date 01/10/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verhofstad, Maria Contributor address; City; State; Zip Code Houston, TX 77059 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/07/2026 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) sofidiya, itunu Contributor address; City; State; Zip Code HYATTSVILLE, MD 20784 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Director | | Employer (See Instructions) University |

LOANS

SCHEDULE E

| | | | |
|---|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule E: Sch: 1/1 Rpt: 9/9 | |
| 2 FILER NAME Childs, Staci D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00086453 | |
| 4 TOTAL OF UNITEMIZED LOANS | | \$ 0.00 | |
| 5 Date of loan 01/20/2026 | 7 Name of lender Childs, Staci (The Honorable) | 8 <input type="checkbox"/> out-of-state PAC (ID#: Childs, Staci (The Honorable) | 9 Loan Amount (\$) \$5,500.00 |
| 6 Is lender a financial institution? No | 10 Interest Rate | | |
| | 11 Maturity Date | | |
| 12 Principal occupation / Job title (See Instructions) Attorney | | 13 Employer (See Instructions) Sunnyside Legal | |
| 14 Description of Collateral <input checked="" type="checkbox"/> None | | 15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/> (See Instructions) | |
| 16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable | 17 Name of guarantor 18 Guarantor address; City; State; Zip Code | | 19 Amount Guaranteed (\$) |
| 20 Principal occupation | | 21 Employer (See Instructions) | |