

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

|   |  |   |  |  |
|---|--|---|--|--|
| <b>The C/OH Instruction Guide explains how to complete this form.</b>                               |  | <b>1</b> Filer ID<br>(Ethics Commission Filers)<br>00086453 | <b>2</b> Total pages filed:<br>26  |  |
| <b>3</b> CANDIDATE / OFFICEHOLDER NAME  | MS / MRS / MR<br>The Honorable   | FIRST<br>Staci D.   | MI<br>   | <b>OFFICE USE ONLY</b><br>Date Received<br><b>ELECTRONICALLY FILED</b><br>02/23/2026 |
|   | NICKNAME   | LAST<br>Childs  | SUFFIX   |  |
| <b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY;<br>13958 Cottingham Street<br>Unit 10207<br>Houston, TX 77048   |   | ZIP CODE   | Date Hand-delivered or Date Postmarked   |
|   |  |   | Receipt #  | Amount   |
|   |  |   | Date Processed   |  |
|   |  |   | Date Imaged  |  |
| <b>5</b> CAMPAIGN TREASURER NAME  | MS / MRS / MR<br>Ms.   | FIRST<br>Ashley A.  | MI<br>   |  |
|   | NICKNAME   | LAST<br>Bowman  | SUFFIX   |  |
| <b>6</b> CAMPAIGN TREASURER ADDRESS<br><br>(Residence or Business)                                  | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>1093 Jefferson Ave.<br><br>East Point , GA 30344  |   |  |  |
|   |  |   |  |  |
| <b>7</b> CAMPAIGN TREASURER PHONE   | AREA CODE<br>(404)   | PHONE NUMBER<br>558-7637                                    | EXTENSION  |  |
| <b>8</b> REPORT TYPE  | <input 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 checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)   |   |  |  |
| <b>9</b> PERIOD COVERED   | Month    Day    Year<br>01/23/2026   | THROUGH   |  | Month    Day    Year<br>02/21/2026   |
| <b>10</b> ELECTION  | ELECTION DATE<br>Month    Day    Year<br>03/03/2026  |   | ELECTION TYPE<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special |  |
|   |  |   |  |  |
| <b>11</b> OFFICE  | OFFICE HELD (if any)<br>State Board Of Education District 4  |   | <b>12</b> OFFICE SOUGHT (if known)<br>State Representative District 131  |  |

**GO TO PAGE 2**

# 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)  
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

|   |                                      |
|---|--------------------------------------|
| COMMITTEE TYPE                              | COMMITTEE NAME                       |
| <input checked="" type="checkbox"/> GENERAL | Legacy 44 PAC                        |
| <input type="checkbox"/> SPECIFIC           | COMMITTEE ADDRESS                    |
|   | 4001 Sinclair Ave                    |
|   | Austin, TX 78756                     |
|   | COMMITTEE CAMPAIGN TREASURER NAME    |
|   | COMMITTEE CAMPAIGN TREASURER ADDRESS |
|   | TX                                   |

|                               |   |    |            |
|-------------------------------|---|----|------------|
| <b>16</b> CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 54,260.77  |
|                               | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  | \$ | 108,521.54 |
| EXPENDITURE TOTALS            | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES  | \$ | 22,502.05  |
|                               | 4. TOTAL POLITICAL EXPENDITURES   | \$ | 45,004.10  |
| CONTRIBUTION BALANCE          | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD  | \$ | 678.95     |
| 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

# CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM C/OH  
ADDENDUM

Page 3 of 26

|             |                                  |          |                            |
|-------------|----------------------------------|----------|----------------------------|
| C / OH NAME | Childs, Staci D. (The Honorable) | Filer ID | (Ethics Commission Filers) |
|             |                                  | 00086453 |                            |

|                                       |   |   |  |
|---------------------------------------|---|---|--|
| 17 NOTICE FROM POLITICAL COMMITTEE(S) | .. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures .. |   |  |
|                                       | COMMITTEE TYPE  | COMMITTEE NAME  |  |
|                                       | <input checked="" type="checkbox"/> GENERAL   | Charter Schools Now PAC                                       |  |
|                                       | <input type="checkbox"/> SPECIFIC   | COMMITTEE ADDRESS   |  |
|                                       |   | 3005 S Lamar Blv<br>Suite D-109 #250<br>Austin, TX 78704-8864 |  |
|                                       | COMMITTEE CAMPAIGN TREASURER NAME   |   |  |
|                                       | COMMITTEE CAMPAIGN TREASURER ADDRESS  |   |  |
|                                       | TX  |   |  |

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

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|  |   |
|--|---|
| <b>18 FILER NAME</b><br>Childs, Staci D. (The Honorable) | <b>19 Filer ID</b> (Ethics Commission Filers)<br>00086453 |
|--|---|

| <b>20 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE  | SUBTOTAL AMOUNT |
|---|-----------------|
| 1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                            | \$ 52,742.00    |
| 2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS              | \$ 55,779.54    |
| 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         | \$ 45,004.10    |
| 6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS  | \$              |
| 7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                   | \$              |
| 8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                       | \$              |
| 9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                              | \$              |
| 10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH             | \$              |
| 11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                | \$              |
| 12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>       |  | <b>1</b> Total pages Schedule A1:<br>Sch: 1/5 Rpt: 5/26  |
| <b>2</b> FILER NAME<br>Childs, Staci D. (The Honorable)                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00086453 |
| <b>4</b> Date<br>02/19/2026  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bryant, Ronda<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77027 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>NA     |  | <b>9</b> Employer (See Instructions)<br>NA               |
| Date<br>01/30/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Clark, Kirbi<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77045                    | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>NA              |  | Employer (See Instructions)<br>NA                        |
| Date<br>01/29/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Clark, Tiffany<br><hr/> Contributor address; City; State; Zip Code<br><br>DrDeSoto , TX 75115                | Amount of Contribution (\$)<br><br>\$100.00              |
| Principal occupation / Job title (See Instructions)<br>Dunkinville ISD |  | Employer (See Instructions)<br>School Counselor          |
| Date<br>02/07/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Davis, Brandee<br><hr/> Contributor address; City; State; Zip Code<br><br>Owings Mills, MD 21117             | Amount of Contribution (\$)<br><br>\$1,000.00            |
| Principal occupation / Job title (See Instructions)<br>Realtor         |  | Employer (See Instructions)<br>Keller Williams           |
| Date<br>02/03/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Goolsby, Meyundai<br><hr/> Contributor address; City; State; Zip Code<br><br>Convington , GA 30016           | Amount of Contribution (\$)<br><br>\$50.00               |
| Principal occupation / Job title (See Instructions)<br>NA              |  | Employer (See Instructions)<br>NA                        |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>   |   | <b>1</b> Total pages Schedule A1:<br>Sch: 2/5 Rpt: 6/26  |
| <b>2</b> FILER NAME<br>Childs, Staci D. (The Honorable)            |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00086453 |
| <b>4</b> Date<br>01/31/2026  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hall, Kimberly<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77045 | <b>7</b> Amount of Contribution (\$)<br><br>\$131.00     |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>NA |   | <b>9</b> Employer (See Instructions)<br>NA               |
| Date<br>02/19/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Howard, Mokolo<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77092                   | Amount of Contribution (\$)<br><br>\$20.00               |
| Principal occupation / Job title (See Instructions)                |   | Employer (See Instructions)<br>Texas Children Hospital   |
| Date<br>02/16/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hutson, Dwight<br><hr/> Contributor address; City; State; Zip Code<br><br>Atlanta, GA 30331                   | Amount of Contribution (\$)<br><br>\$50.00               |
| Principal occupation / Job title (See Instructions)<br>Teacher     |   | Employer (See Instructions)<br>Atlanta Public Schools    |
| Date<br>01/30/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Jackson, Jeffery<br><hr/> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75209                  | Amount of Contribution (\$)<br><br>\$500.00              |
| Principal occupation / Job title (See Instructions)<br>Na          |   | Employer (See Instructions)<br>Na                        |
| Date<br>02/03/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Jackson, LaHarriet<br><hr/> Contributor address; City; State; Zip Code<br><br>Grovetown, GA 30813             | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>NA          |   | Employer (See Instructions)<br>NA                        |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |   |
|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>         |   | <b>1</b> Total pages Schedule A1:<br>Sch: 3/5 Rpt: 7/26         |
| <b>2</b> FILER NAME<br>Childs, Staci D. (The Honorable)                  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00086453        |
| <b>4</b> Date<br>02/05/2026  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Leadership for Educational Equity<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Washington, DC 20005 | <b>7</b> Amount of Contribution (\$)<br><br>\$669.00            |
| <b>8</b> Principal occupation / Job title (See Instructions)             |   | <b>9</b> Employer (See Instructions)                            |
| Date<br>02/09/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Legacy 44<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78756   | Amount of Contribution (\$)<br><br>\$7,500.00                   |
| Principal occupation / Job title (See Instructions)                      |   | Employer (See Instructions)                                     |
| Date<br>02/20/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Legacy 44<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78756   | Amount of Contribution (\$)<br><br>\$15,000.00                  |
| Principal occupation / Job title (See Instructions)                      |   | Employer (See Instructions)                                     |
| Date<br>01/30/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>List, Amanda<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin , TX 78731   | Amount of Contribution (\$)<br><br>\$250.00                     |
| Principal occupation / Job title (See Instructions)<br>A List Consulting |   | Employer (See Instructions)<br>Lobbyist                         |
| Date<br>02/03/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Millar, Ron<br><hr/> Contributor address; City; State; Zip Code<br><br>Arlington, VA 22201  | Amount of Contribution (\$)<br><br>\$25.00                      |
| Principal occupation / Job title (See Instructions)<br>President         |   | Employer (See Instructions)<br>Center for Free Thought Equality |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>                 |   | <b>1</b> Total pages Schedule A1:<br>Sch: 4/5 Rpt: 8/26  |
| <b>2</b> FILER NAME<br>Childs, Staci D. (The Honorable)                          |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00086453 |
| <b>4</b> Date<br>01/30/2026  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Morris, Carson<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Albuquerque, NM 87106 | <b>7</b> Amount of Contribution (\$)<br><br>\$20.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>University of NM |   | <b>9</b> Employer (See Instructions)<br>Professor        |
| Date<br>02/05/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ratliff, Kim<br><hr/> Contributor address; City; State; Zip Code<br><br>Charlotte, NC 28215                       | Amount of Contribution (\$)<br><br>\$50.00               |
| Principal occupation / Job title (See Instructions)<br>NA                        |   | Employer (See Instructions)<br>NA                        |
| Date<br>02/09/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rivzi, Sameeha<br><hr/> Contributor address; City; State; Zip Code<br><br>Richmond , TX 77407                     | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>Organizer                 |   | Employer (See Instructions)<br>CAIR                      |
| Date<br>02/02/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Secular Texas<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77008                        | Amount of Contribution (\$)<br><br>\$100.00              |
| Principal occupation / Job title (See Instructions)                              |   | Employer (See Instructions)                              |
| Date<br>02/02/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Skelly, Michael<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77003                      | Amount of Contribution (\$)<br><br>\$500.00              |
| Principal occupation / Job title (See Instructions)<br>CEO                       |   | Employer (See Instructions)<br>Grid United               |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>                     |   | <b>1</b> Total pages Schedule A1:<br>Sch: 5/5 Rpt: 9/26  |
| <b>2</b> FILER NAME<br>Childs, Staci D. (The Honorable)                              |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00086453 |
| <b>4</b> Date<br>02/12/2026  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Smith, Tyler<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Washington DC, DC 20003 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Political Strategist |   | <b>9</b> Employer (See Instructions)<br>Every Town       |
| Date<br>01/25/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Sterling, Gwendolyn<br><hr/> Contributor address; City; State; Zip Code<br><br>Humble, TX 77396                   | Amount of Contribution (\$)<br><br>\$131.00              |
| Principal occupation / Job title (See Instructions)<br>Educator                      |   | Employer (See Instructions)<br>HoustonISD                |
| Date<br>02/11/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Woodbury, Johnny<br><hr/> Contributor address; City; State; Zip Code<br><br>Clinton, MD 20735                     | Amount of Contribution (\$)<br><br>\$100.00              |
| Principal occupation / Job title (See Instructions)<br>Retired                       |   | Employer (See Instructions)<br>Militray                  |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

|  |   |   |   |
|--|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>                   |   | <b>1</b> Total pages Schedule A2:<br>Sch: 1/2 Rpt: 10/26                        |   |
| <b>2</b> FILER NAME<br>Childs, Staci D. (The Honorable)                            |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00086453                        |   |
| <b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                       |   | <b>\$</b> 27,889.77   |   |
| <b>5</b> Date<br>02/05/2026  | <b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Charter Schools Now PAC | <b>8</b> Amount of contribution (\$)<br>\$5,900.00                              | <b>9</b> In-kind contribution description<br>Yards signs and printing |
| <b>7</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78704        |   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |   |
| <b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)   |   | <b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)                        |   |
| <b>12</b> Contributor's principal occupation (FOR JUDICIAL)                        |   | <b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)             |   |
| <b>14</b> Contributor's employer/law firm (FOR JUDICIAL)                           |   | <b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)              |   |
| <b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) |   |   |   |
| Date<br>02/10/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Charter Schools Now PAC          | Amount of contribution (\$)<br>\$6,160.00                                       | In-kind contribution description<br>Canvassing                        |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78704                 |   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |   |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)             |   | Employer (FOR NON-JUDICIAL) (See instructions)                                  |   |
| Contributor's principal occupation (FOR JUDICIAL)                                  |   | Contributor's job title (FOR JUDICIAL) (See instructions)                       |   |
| Contributor's employer/law firm (FOR JUDICIAL)                                     |   | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |   |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)           |   |   |   |
| Date<br>02/13/2026   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Charter Schools Now PAC          | Amount of contribution (\$)<br>\$24.34  | In-kind contribution description<br>Text Message Service              |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78704                 |   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |   |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)             |   | Employer (FOR NON-JUDICIAL) (See instructions)                                  |   |
| Contributor's principal occupation (FOR JUDICIAL)                                  |   | Contributor's job title (FOR JUDICIAL) (See instructions)                       |   |
| Contributor's employer/law firm (FOR JUDICIAL)                                     |   | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |   |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)           |   |   |   |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

|   |  |  |  |
|---|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>            |  | 1 Total pages Schedule A2:<br>Sch: 2/2 Rpt: 11/26            |  |
| 2 FILER NAME<br>Childs, Staci D. (The Honorable)                            |  | 3 Filer ID (Ethics Commission Filers)<br>00086453            |  |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                       |  | \$ 27,889.77   |  |
| 5 Date<br>02/18/2026  | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Charter Schools Now PAC | 8 Amount of contribution (\$)<br>\$6,160.00                  | 9 In-kind contribution description<br>Canvassing |
|   | 7 Contributor address; City; State; Zip Code<br><br>Austin, TX 78704   |  |  |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)   |  | 11 Employer (FOR NON-JUDICIAL) (See instructions)            |  |
| 12 Contributor's principal occupation (FOR JUDICIAL)                        |  | 13 Contributor's job title (FOR JUDICIAL) (See instructions) |  |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                           |  | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)  |  |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) |  |  |  |
| Date<br>02/03/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Charter Schools Now PAC   | Amount of contribution (\$)<br>\$6,160.00                    | In-kind contribution description<br>Canvassing   |
|   | Contributor address; City; State; Zip Code<br><br>Austin, TX 78704   |  |  |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)      |  | Employer (FOR NON-JUDICIAL) (See instructions)               |  |
| Contributor's principal occupation (FOR JUDICIAL)                           |  | Contributor's job title (FOR JUDICIAL) (See instructions)    |  |
| Contributor's employer/law firm (FOR JUDICIAL)                              |  | Law firm of contributor's spouse (if any) (FOR JUDICIAL)     |  |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)    |  |  |  |
| Date<br>01/30/2026  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Legacy 44                 | Amount of contribution (\$)<br>\$3,485.43                    | In-kind contribution description<br>M3 Grphics   |
|   | Contributor address; City; State; Zip Code<br><br>Austin, TX 78756   |  |  |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)      |  | Employer (FOR NON-JUDICIAL) (See instructions)               |  |
| Contributor's principal occupation (FOR JUDICIAL)                           |  | Contributor's job title (FOR JUDICIAL) (See instructions)    |  |
| Contributor's employer/law firm (FOR JUDICIAL)                              |  | Law firm of contributor's spouse (if any) (FOR JUDICIAL)     |  |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)    |  |  |  |

# 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.

|          |  |   |   |               |   |
|----------|--|---|---|---------------|---|
| <b>1</b> | Total pages Schedule F1:<br>Sch: 1/15 Rpt: 12/26 | <b>2</b>  | FILER NAME<br>Childs, Staci D. (The Honorable)  | <b>3</b>      | Filer ID (Ethics Commission Filers)<br>00086453 |
| <b>4</b> | Date<br>02/17/2026                               | <b>5</b>  | Payee name<br>Amazon  |               |   |
| <b>6</b> | Amount (\$)<br>\$340.95                          | <b>7</b>  | Payee address; City; State; Zip Code<br><br>TX 77035  |               |   |
| <b>8</b> | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense            | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>camera roll for early voting polls pictures |               |   |
| <b>9</b> |  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   | Office sought | Office held                                     |
|          | Date<br>02/20/2026                               |   | Payee name<br>Amazon  |               |   |
|          | Amount (\$)<br>\$20.56                           |   | Payee address; City; State; Zip Code<br><br>TX 77035  |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>shades for poll greeting                    |               |   |
|          |  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   | Office sought | Office held                                     |
|          | Date<br>02/20/2026                               |   | Payee name<br>Amazon  |               |   |
|          | Amount (\$)<br>\$21.60                           |   | Payee address; City; State; Zip Code<br><br>TX 77035  |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense          | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>shades for poll greeting                    |               |   |
|          |  | 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.

|          |  |   |   |               |   |
|----------|--|---|---|---------------|---|
| <b>1</b> | Total pages Schedule F1:<br>Sch: 2/15 Rpt: 13/26 | <b>2</b>  | FILER NAME<br>Childs, Staci D. (The Honorable)  | <b>3</b>      | Filer ID (Ethics Commission Filers)<br>00086453 |
| <b>4</b> | Date<br>01/30/2026                               | <b>5</b>  | Payee name<br>Bank of Texas   |               |   |
| <b>6</b> | Amount (\$)<br>\$3.00                            | <b>7</b>  | Payee address; City; State; Zip Code<br><br>TX 77035  |               |   |
| <b>8</b> | PURPOSE OF EXPENDITURE                           | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>bank service costs      |               |   |
| <b>9</b> |  | Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought | Office held                                     |
|          | Date<br>02/16/2026                               |   | Payee name<br>ChopnBlok   |               |   |
|          | Amount (\$)<br>\$169.35                          |   | Payee address; City; State; Zip Code<br><br>TX 77035  |               |   |
|          | PURPOSE OF EXPENDITURE                           | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense          | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>food for campaign staff |               |   |
|          |  | Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought | Office held                                     |
|          | Date<br>02/09/2026                               |   | Payee name<br>Elmore, Davida  |               |   |
|          | Amount (\$)<br>\$600.00                          |   | Payee address; City; State; Zip Code<br><br>TX 77035  |               |   |
|          | PURPOSE OF EXPENDITURE                           | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff payment  |               |   |
|          |  | 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  
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.

|          |  |  |  |               |   |
|----------|--|--|--|---------------|---|
| <b>1</b> | Total pages Schedule F1:<br>Sch: 3/15 Rpt: 14/26 | <b>2</b>   | FILER NAME<br>Childs, Staci D. (The Honorable)   | <b>3</b>      | Filer ID (Ethics Commission Filers)<br>00086453 |
| <b>4</b> | Date<br>02/09/2026                               | <b>5</b>   | Payee name<br>Elmore, Davida   |               |   |
| <b>6</b> | Amount (\$)<br>\$600.00                          | <b>7</b>   | Payee address; City; State; Zip Code<br><br>TX 77035   |               |   |
| <b>8</b> | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff payment |               |   |
| <b>9</b> |  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought | Office held                                     |
|          | Date<br>02/17/2026                               |  | Payee name<br>Elmore   |               |   |
|          | Amount (\$)<br>\$840.00                          |  | Payee address; City; State; Zip Code<br><br>TX 77035   |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff payment |               |   |
|          |  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought | Office held                                     |
|          | Date<br>02/17/2026                               |  | Payee name<br>Elmore   |               |   |
|          | Amount (\$)<br>\$840.00                          |  | Payee address; City; State; Zip Code<br><br>TX 77035   |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff payment |               |   |
|          |  | 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.

|          |  |  |  |               |   |
|----------|--|--|--|---------------|---|
| <b>1</b> | Total pages Schedule F1:<br>Sch: 4/15 Rpt: 15/26 | <b>2</b>   | FILER NAME<br>Childs, Staci D. (The Honorable)   | <b>3</b>      | Filer ID (Ethics Commission Filers)<br>00086453 |
| <b>4</b> | Date<br>02/16/2026                               | <b>5</b>   | Payee name<br>Fifth Vessel Coffee  |               |   |
| <b>6</b> | Amount (\$)<br>\$27.28                           | <b>7</b>   | Payee address; City; State; Zip Code<br><br>TX 77035   |               |   |
| <b>8</b> | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>coffee for campaign planning meeting |               |   |
| <b>9</b> |  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       | Candidate/Officeholder name  | Office sought | Office held                                     |
|          | Date<br>02/09/2026                               |  | Payee name<br>Food-a-rama  |               |   |
|          | Amount (\$)<br>\$26.75                           |  | Payee address; City; State; Zip Code<br><br>TX 77035   |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>snacks for canvassing for staff      |               |   |
|          |  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       | Candidate/Officeholder name  | Office sought | Office held                                     |
|          | Date<br>02/11/2026                               |  | Payee name<br>HEB  |               |   |
|          | Amount (\$)<br>\$124.00                          |  | Payee address; City; State; Zip Code<br><br>TX 77035   |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>town hall food and cake              |               |   |
|          |  | 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.

|          |  |  |   |               |   |
|----------|--|--|---|---------------|---|
| <b>1</b> | Total pages Schedule F1:<br>Sch: 5/15 Rpt: 16/26 | <b>2</b>   | FILER NAME<br>Childs, Staci D. (The Honorable)  | <b>3</b>      | Filer ID (Ethics Commission Filers)<br>00086453 |
| <b>4</b> | Date<br>02/18/2026                               | <b>5</b>   | Payee name<br>Jason's Deli  |               |   |
| <b>6</b> | Amount (\$)<br>\$228.12                          | <b>7</b>   | Payee address; City; State; Zip Code<br><br>TX 77035  |               |   |
| <b>8</b> | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>food for campaign poll greeters |               |   |
| <b>9</b> |  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       | Candidate/Officeholder name   | Office sought | Office held                                     |
|          | Date<br>02/19/2026                               |  | Payee name<br>Jason's Deli  |               |   |
|          | Amount (\$)<br>\$293.13                          |  | Payee address; City; State; Zip Code<br><br>TX 77035  |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>food for campaign poll greeters |               |   |
|          |  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       | Candidate/Officeholder name   | Office sought | Office held                                     |
|          | Date<br>02/20/2026                               |  | Payee name<br>Jason's Deli  |               |   |
|          | Amount (\$)<br>\$285.13                          |  | Payee address; City; State; Zip Code<br><br>TX 77035  |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>food for campaign poll greeters |               |   |
|          |  | 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.

|          |  |   |  |               |   |
|----------|--|---|--|---------------|---|
| <b>1</b> | Total pages Schedule F1:<br>Sch: 6/15 Rpt: 17/26 | <b>2</b>  | FILER NAME<br>Childs, Staci D. (The Honorable)   | <b>3</b>      | Filer ID (Ethics Commission Filers)<br>00086453 |
| <b>4</b> | Date<br>02/17/2026                               | <b>5</b>  | Payee name<br>Kroger Fuel  |               |   |
| <b>6</b> | Amount (\$)<br>\$32.00                           | <b>7</b>  | Payee address; City; State; Zip Code<br><br>TX 77035   |               |   |
| <b>8</b> | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Transportation Equipment And Related Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>gas for early voting driving to polls  |               |   |
| <b>9</b> |  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought | Office held                                     |
|          | Date<br>02/20/2026                               |   | Payee name<br>Kroger x Door Dash   |               |   |
|          | Amount (\$)<br>\$113.61                          |   | Payee address; City; State; Zip Code<br><br>TX 77035   |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense                        | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>snacks, fruit, water for poll greeting |               |   |
|          |  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought | Office held                                     |
|          | Date<br>02/17/2026                               |   | Payee name<br>Luby's   |               |   |
|          | Amount (\$)<br>\$261.52                          |   | Payee address; City; State; Zip Code<br><br>TX 77035   |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense                        | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>senior brunch                          |               |   |
|          |  | 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.

|          |  |   |  |               |   |
|----------|--|---|--|---------------|---|
| <b>1</b> | Total pages Schedule F1:<br>Sch: 7/15 Rpt: 18/26 | <b>2</b>  | FILER NAME<br>Childs, Staci D. (The Honorable)   | <b>3</b>      | Filer ID (Ethics Commission Filers)<br>00086453 |
| <b>4</b> | Date<br>02/20/2026                               | <b>5</b>  | Payee name<br>Lyft   |               |   |
| <b>6</b> | Amount (\$)<br><br>\$18.02                       | <b>7</b>  | Payee address; City; State; Zip Code<br><br>TX 77035   |               |   |
| <b>8</b> | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Transportation Equipment And Related Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>lyft ride for poll greeter |               |   |
| <b>9</b> |  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought | Office held                                     |
|          | Date<br>02/20/2026                               |   | Payee name<br>M3 Graphics  |               |   |
|          | Amount (\$)<br><br>\$596.24                      |   | Payee address; City; State; Zip Code<br><br>TX 77035   |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense                          | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>flyers for poll greeting   |               |   |
|          |  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought | Office held                                     |
|          | Date<br>02/20/2026                               |   | Payee name<br>M3 Graphics  |               |   |
|          | Amount (\$)<br><br>\$3,912.58                    |   | Payee address; City; State; Zip Code<br><br>TX 77035   |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense                          | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>mailers                    |               |   |
|          |  | 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.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 8/15 Rpt: 19/26 | <b>2</b> FILER NAME<br>Childs, Staci D. (The Honorable) | <b>3</b> Filer ID (Ethics Commission Filers)<br>00086453 |
|---|---|--|

|                             |                                    |
|-----------------------------|------------------------------------|
| <b>4</b> Date<br>02/20/2026 | <b>5</b> Payee name<br>M3 Graphics |
|-----------------------------|------------------------------------|

|                                    |   |
|------------------------------------|---|
| <b>6</b> Amount (\$)<br>\$3,000.00 | <b>7</b> Payee address; City; State; Zip Code<br><br>TX 77035 |
|------------------------------------|---|

|                                 |  |   |
|---------------------------------|--|---|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>mailers |
|---------------------------------|--|---|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

|                    |                              |
|--------------------|------------------------------|
| Date<br>01/26/2026 | Payee name<br>Martin, Malcom |
|--------------------|------------------------------|

|                         |  |
|-------------------------|--|
| Amount (\$)<br>\$370.00 | Payee address; City; State; Zip Code<br><br>TX 77035 |
|-------------------------|--|

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|-------------------------------|--|--|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>field director payment |
|-------------------------------|--|--|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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|--------------------|-----------------------------|
| Date<br>02/01/2026 | Payee name<br>McCary, Eryon |
|--------------------|-----------------------------|

|                         |  |
|-------------------------|--|
| Amount (\$)<br>\$100.00 | Payee address; City; State; Zip Code<br><br>TX 77035 |
|-------------------------|--|

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|-------------------------------|--|--|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff payment |
|-------------------------------|--|--|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| 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.

|          |  |   |   |               |   |
|----------|--|---|---|---------------|---|
| <b>1</b> | Total pages Schedule F1:<br>Sch: 9/15 Rpt: 20/26 | <b>2</b>  | FILER NAME<br>Childs, Staci D. (The Honorable)  | <b>3</b>      | Filer ID (Ethics Commission Filers)<br>00086453 |
| <b>4</b> | Date<br>02/12/2026                               | <b>5</b>  | Payee name<br>McCary, Eryon   |               |   |
| <b>6</b> | Amount (\$)<br>\$350.00                          | <b>7</b>  | Payee address; City; State; Zip Code<br><br>TX 77035  |               |   |
| <b>8</b> | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>payment for road sign placement |               |   |
| <b>9</b> |  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   | Office sought | Office held                                     |
|          | Date<br>02/15/2026                               |   | Payee name<br>McCary, Eryon   |               |   |
|          | Amount (\$)<br>\$100.00                          |   | Payee address; City; State; Zip Code<br><br>TX 77035  |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff payment          |               |   |
|          |  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   | Office sought | Office held                                     |
|          | Date<br>02/21/2026                               |   | Payee name<br>McCary, Eryon   |               |   |
|          | Amount (\$)<br>\$100.00                          |   | Payee address; City; State; Zip Code<br><br>TX 77035  |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff payment          |               |   |
|          |  | 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.

|          |   |   |   |               |   |
|----------|---|---|---|---------------|---|
| <b>1</b> | Total pages Schedule F1:<br>Sch: 10/15 Rpt: 21/26 | <b>2</b>  | FILER NAME<br>Childs, Staci D. (The Honorable)  | <b>3</b>      | Filer ID (Ethics Commission Filers)<br>00086453 |
| <b>4</b> | Date<br>02/20/2026                                | <b>5</b>  | Payee name<br>Mia Make Meal   |               |   |
| <b>6</b> | Amount (\$)<br>\$190.00                           | <b>7</b>  | Payee address; City; State; Zip Code<br><br>TX 77035  |               |   |
| <b>8</b> | <b>PURPOSE OF EXPENDITURE</b>                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense                        | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>lunch for poll greeters               |               |   |
| <b>9</b> |   | Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   | Office sought | Office held                                     |
|          | Date<br>02/20/2026                                |   | Payee name<br>Oregon, Ivan  |               |   |
|          | Amount (\$)<br>\$330.00                           |   | Payee address; City; State; Zip Code<br><br>TX 77035  |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor                | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff payment                |               |   |
|          |   | Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   | Office sought | Office held                                     |
|          | Date<br>02/19/2026                                |   | Payee name<br>Shell Oil   |               |   |
|          | Amount (\$)<br>\$43.08                            |   | Payee address; City; State; Zip Code<br><br>TX 77035  |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Transportation Equipment And Related Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>gas for early voting driving to polls |               |   |
|          |   | 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                        | 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 -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 11/15 Rpt: 22/26   | <b>2</b> FILER NAME<br>Childs, Staci D. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00086453   |
| <b>4</b> Date<br>02/12/2026                                  | <b>5</b> Payee name<br>Soul Food by Catherine  |  |
| <b>6</b> Amount (\$)<br><br>\$13.15                          | <b>7</b> Payee address; City; State; Zip Code<br><br>TX 77035                                    |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>food                         |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>01/29/2026   | Payee name<br>TST Diner  |  |
| Amount (\$)<br><br>\$26.64                                   | Payee address; City; State; Zip Code<br><br>TX 77035   |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>austin campaign dinner       |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>02/11/2026   | Payee name<br>Taste Kitchen  |  |
| Amount (\$)<br><br>\$70.34                                   | Payee address; City; State; Zip Code<br><br>TX 77035   |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>food for campaign media team |
| 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  
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.

|          |   |   |   |               |   |
|----------|---|---|---|---------------|---|
| <b>1</b> | Total pages Schedule F1:<br>Sch: 12/15 Rpt: 23/26 | <b>2</b>  | FILER NAME<br>Childs, Staci D. (The Honorable)  | <b>3</b>      | Filer ID (Ethics Commission Filers)<br>00086453 |
| <b>4</b> | Date<br>02/17/2026                                | <b>5</b>  | Payee name<br>The Tshirt Spot   |               |   |
| <b>6</b> | Amount (\$)<br>\$979.00                           | <b>7</b>  | Payee address; City; State; Zip Code<br><br>TX 77035  |               |   |
| <b>8</b> | <b>PURPOSE OF EXPENDITURE</b>                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense                          | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tshirts and sweatsuits for campaign staff |               |   |
| <b>9</b> |   | Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   | Office sought | Office held                                     |
|          | Date<br>01/23/2026                                |   | Payee name<br>Vonlane   |               |   |
|          | Amount (\$)<br>\$137.00                           |   | Payee address; City; State; Zip Code<br><br>TX 77035  |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Transportation Equipment And Related Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>bus ride to austin                        |               |   |
|          |   | Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   | Office sought | Office held                                     |
|          | Date<br>02/20/2026                                |   | Payee name<br>Wilson, Rayford   |               |   |
|          | Amount (\$)<br>\$720.00                           |   | Payee address; City; State; Zip Code<br><br>TX 77035  |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor                | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff payment                    |               |   |
|          |   | 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.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 13/15 Rpt: 24/26   | <b>2</b> FILER NAME<br>Childs, Staci D. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00086453   |
| <b>4</b> Date<br>02/20/2026                                  | <b>5</b> Payee name<br>Wilson, Woodie  |  |
| <b>6</b> Amount (\$)<br>\$580.00                             | <b>7</b> Payee address; City; State; Zip Code<br><br>TX 77035  |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff payment |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>02/04/2026   | Payee name<br>Woodbury, Jonte  |  |
| Amount (\$)<br>\$500.00                                      | Payee address; City; State; Zip Code<br><br>TX 77035   |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff payment |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>02/04/2026   | Payee name<br>Woodbury, Jonte  |  |
| Amount (\$)<br>\$200.00                                      | Payee address; City; State; Zip Code<br><br>TX 77035   |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff payment |
| 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  
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.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 14/15 Rpt: 25/26 | <b>2</b> FILER NAME<br>Childs, Staci D. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00086453   |
| <b>4</b> Date<br>02/09/2026                                | <b>5</b> Payee name<br>Woodbury, Jonte   |  |
| <b>6</b> Amount (\$)<br>\$1,000.00                         | <b>7</b> Payee address; City; State; Zip Code<br><br>TX 77035  |  |
| <b>8</b> PURPOSE OF EXPENDITURE                            | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor                     | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff payment |
|  | <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH<br>Candidate/Officeholder name Office sought Office held |  |
| Date<br>02/09/2026   | Payee name<br>Woodbury, Jonte  |  |
| Amount (\$)<br>\$50.00                                     | Payee address; City; State; Zip Code<br><br>TX 77035   |  |
| <b>PURPOSE OF EXPENDITURE</b>                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor                     | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff payment |
|  | <b>Complete ONLY if direct expenditure to benefit C/OH</b><br>Candidate/Officeholder name Office sought Office held          |  |
| Date<br>02/17/2026   | Payee name<br>Woodbury, Jonte  |  |
| Amount (\$)<br>\$1,000.00                                  | Payee address; City; State; Zip Code<br><br>TX 77035   |  |
| <b>PURPOSE OF EXPENDITURE</b>                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor                     | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff payment |
|  | <b>Complete ONLY if direct expenditure to benefit C/OH</b><br>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.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 15/15 Rpt: 26/26   | <b>2</b> FILER NAME<br>Childs, Staci D. (The Honorable)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00086453   |
| <b>4</b> Date<br>02/17/2026                                  | <b>5</b> Payee name<br>Woodbury, Jonte  |  |
| <b>6</b> Amount (\$)<br>\$1,000.00                           | <b>7</b> Payee address; City; State; Zip Code<br><br>TX 77035   |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff payment |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>02/10/2026   | Payee name<br>Woodbury  |  |
| Amount (\$)<br>\$300.00                                      | Payee address; City; State; Zip Code<br><br>TX 77035  |  |
| <b>PURPOSE OF EXPENDITURE</b>                                | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>text message campaign  |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>01/29/2026   | Payee name<br>iHeartMedia   |  |
| Amount (\$)<br>\$1,989.00                                    | Payee address; City; State; Zip Code<br><br>TX 77035  |  |
| <b>PURPOSE OF EXPENDITURE</b>                                | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense            | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>radio advertisements   |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |