

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

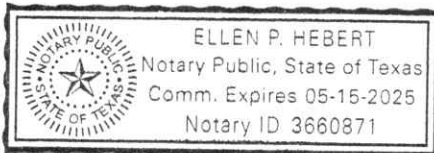
15 C/OH NAME <u>James Cross</u>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 840 ⁰⁰
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 14,618 ⁰⁰
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 10,858.34
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 5357.33
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 500.00

18 SIGNATURE 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.

James Cross
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by James Cross this the 3rd day of April, 2025, to certify which, witness my hand and seal of office.

Ellen P. Hebert Ellen P. Hebert Notary
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

James Cross

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 15,458 ⁰⁰
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,730 ⁰⁷
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$ 500 ⁰⁰
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 10,858 ³⁴
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 1/28/25	5 Full name of contributor out-of-state PAC (ID#: _____) Holly Ohlsson	7 Amount of contribution (\$) \$250⁰⁰
6 Contributor address; City; State; Zip Code 25514 Merrimac Trace Ct. Katy TX 77494		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1/28/25	Full name of contributor out-of-state PAC (ID#: _____) Leah Wilson	Amount of contribution (\$) \$100⁰⁰
Contributor address; City; State; Zip Code 5411 Briarcliff Ln Fulshear TX 77441		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/28/25	Full name of contributor out-of-state PAC (ID#: _____) Christianna Woods	Amount of contribution (\$) \$100⁰⁰
Contributor address; City; State; Zip Code 907 Redcedar Ln Houston TX 77094		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/28/25	Full name of contributor out-of-state PAC (ID#: _____) Vricki Sanders	Amount of contribution (\$) \$50⁰⁰
Contributor address; City; State; Zip Code 19039 Village Maple Ct Houston TX 77084		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 1/28/25	5 Full name of contributor out-of-state PAC (ID#: _____) Elizabeth Morris	7 Amount of contribution (\$) \$25⁰⁰
6 Contributor address; City; State; Zip Code 1722 Locksford St. Houston TX 77008		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 1/25/25	Full name of contributor out-of-state PAC (ID#: _____) Linela Page	Amount of contribution (\$) \$2000⁰⁰
Contributor address; City; State; Zip Code 13 Scotsmoor Ct. Sugar Land TX 77479		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 1/18/25	Full name of contributor out-of-state PAC (ID#: _____) Courtney Davis	Amount of contribution (\$) \$100⁰⁰
Contributor address; City; State; Zip Code 2610 Teal View Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 1/17/25	Full name of contributor out-of-state PAC (ID#: _____) Robert Mueller	Amount of contribution (\$) \$250⁰⁰
Contributor address; City; State; Zip Code 24926 North Point P1 Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 1/17/25	5 Full name of contributor out-of-state PAC (ID#: _____) Rose Marie Greer	7 Amount of contribution (\$) \$ 50⁰⁰
6 Contributor address; City; State; Zip Code 1407 Shadybrook Dr. Houston TX 77094		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1/17/25	Full name of contributor out-of-state PAC (ID#: _____) Robert Willeby	Amount of contribution (\$) \$ 100⁰⁰
Contributor address; City; State; Zip Code 2310 Trotter Dr Katy TX 77493		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/17/25	Full name of contributor out-of-state PAC (ID#: _____) Wendy Duncan	Amount of contribution (\$) \$ 25⁰⁰
Contributor address; City; State; Zip Code 22915 Chaus Ct. Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/17/25	Full name of contributor out-of-state PAC (ID#: _____) Carla Justus	Amount of contribution (\$) \$ 1,000⁰⁰
Contributor address; City; State; Zip Code 2014 Arbor Cove Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 3/2/25	5 Full name of contributor out-of-state PAC (ID#: _____) Rollie Gardner	7 Amount of contribution (\$) \$ 500⁰⁰
6 Contributor address; City; State; Zip Code 2327 Sweet Almond Dr Brookshire TX 77423		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/2/25	Full name of contributor out-of-state PAC (ID#: _____) Gerald Ross	Amount of contribution (\$) \$ 250⁰⁰
Contributor address; City; State; Zip Code 22402 Piper Terrace LN Katy TX 77450		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/2/25	Full name of contributor out-of-state PAC (ID#: _____) Wendy Duncan	Amount of contribution (\$) \$ 200⁰⁰
Contributor address; City; State; Zip Code 22915 Chaus Ct. Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/2/25	Full name of contributor out-of-state PAC (ID#: _____) Carla Morgan	Amount of contribution (\$) \$ 100⁰⁰
Contributor address; City; State; Zip Code 23622 Hackberry Dr. Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 3/17/25	5 Full name of contributor out-of-state PAC (ID#: _____) Aida Pith	7 Amount of contribution (\$) \$ 100⁰⁰
6 Contributor address; City; State; Zip Code 3101 Diamond Hollow Ct Katy TX 77450		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/20/25	Full name of contributor out-of-state PAC (ID#: _____) Allan Kirk	Amount of contribution (\$) \$ 500⁰⁰
Contributor address; City; State; Zip Code 28411 S. Firethorne Rd. Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/19/25	Full name of contributor out-of-state PAC (ID#: _____) Kramer Family (Patricia + Donald)	Amount of contribution (\$) \$ 50⁰⁰
Contributor address; City; State; Zip Code 24922 Ginger Ranch Dr. Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/19/25	Full name of contributor out-of-state PAC (ID#: _____) Devin Hovas	Amount of contribution (\$) \$ 250⁰⁰
Contributor address; City; State; Zip Code 6206 S. Woodsln Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 3/18/25	5 Full name of contributor out-of-state PAC (ID#: _____) Ann Weiss	7 Amount of contribution (\$) \$ 500⁰⁰
6 Contributor address; City; State; Zip Code 22907 DeForest Ridge Katy TX 77494		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/21/25	Full name of contributor out-of-state PAC (ID#: _____) Jessica Jamanca	Amount of contribution (\$) \$ 250⁰⁰
Contributor address; City; State; Zip Code 2627 Kelliwood Lakes Dr Katy TX 77450		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/23/25	Full name of contributor out-of-state PAC (ID#: _____) KayLynn Fern	Amount of contribution (\$) \$ 100⁰⁰
Contributor address; City; State; Zip Code 30224 Creekside Dr. Brookshire TX 77423		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/23/25	Full name of contributor out-of-state PAC (ID#: _____) Anne Russey	Amount of contribution (\$) \$ 50⁰⁰
Contributor address; City; State; Zip Code 28231 Shorecrest Lane Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 3/27/25	5 Full name of contributor out-of-state PAC (ID#: _____) Mika Kalapatapu	7 Amount of contribution (\$) \$ 100⁰⁰
6 Contributor address; City; State; Zip Code 8635 Chickasaw Plum Way Katy TX 77494		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 3/27/25	Full name of contributor out-of-state PAC (ID#: _____) Michael Arellano	Amount of contribution (\$) \$ 25⁰⁰
Contributor address; City; State; Zip Code 21402 Sand Bunker Ct Katy TX 77450		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 3/25/25	Full name of contributor out-of-state PAC (ID#: _____) Jackie Zimmerman	Amount of contribution (\$) \$ 50⁰⁰
Contributor address; City; State; Zip Code 27710 Gable Creek Ct Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 3/25/25	Full name of contributor out-of-state PAC (ID#: _____) Bryan Michalsky	Amount of contribution (\$) \$ 1,000⁰⁰
Contributor address; City; State; Zip Code 514 Merrill St. Houston TX 77009		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 3/24/25	5 Full name of contributor out-of-state PAC (ID#: _____) Anne Fazzini	7 Amount of contribution (\$) \$25⁰⁰
6 Contributor address; City; State; Zip Code 817 Dollins St. Katy TX 77493		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/31/25	Full name of contributor out-of-state PAC (ID#: _____) Beejal Patel	Amount of contribution (\$) \$100⁰⁰
Contributor address; City; State; Zip Code 7603 Emerald Meadow Ct Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/1/25	Full name of contributor out-of-state PAC (ID#: _____) Donald Keller	Amount of contribution (\$) \$100⁰⁰
Contributor address; City; State; Zip Code 2406 Fairbreeze Dr Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/1/25	Full name of contributor out-of-state PAC (ID#: _____) Dianne Appolito	Amount of contribution (\$) \$100⁰⁰
Contributor address; City; State; Zip Code 926 Chisel Point Houston TX 77094		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 4/1/25	5 Full name of contributor out-of-state PAC (ID#: _____) Cliff Bryant	7 Amount of contribution (\$) \$ 50⁰⁰
	6 Contributor address; City; State; Zip Code 114 W. Necessary Rogers AR 72758	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 3/30/25	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katy Educational Excellence Partners PAC	8 Amount of Contribution \$ 1,405.07	9 In-kind contribution description push cards, stamps, post cards
7 Contributor address; City; State; Zip Code 5554 South Peek Rd. Katy TX 77450		Check if travel outside of Texas. Complete Schedule T.	
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 3/31/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawn Champagne	Amount of Contribution \$ \$100	In-kind contribution description Meet and Greet
Contributor address; City; State; Zip Code 21410 Sand Bunker Cir Katy TX 77450		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)			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <i>James Cross</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>3/17/25</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Janene Adam</i>	8 Amount of Contribution \$ <i>\$125⁰⁰</i>	9 In-kind contribution description <i>Meet and Greet</i>
7 Contributor address; City; State; Zip Code <i>1807 Sand Hollow Ln. Katy TX 77450</i>		Check if travel outside of Texas. Complete Schedule T.	
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 <i>3/28/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Patti + Bill Lacy</i>	Amount of Contribution \$ <i>\$100⁰⁰</i>	In-kind contribution description <i>Meet and Greet</i>
Contributor address; City; State; Zip Code <i>1703 Kent Falls Ct. Katy TX 77450</i>		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)			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

March 28, 2025

To Whom it May Concern:

This letter is to confirm that I have made an in-kind donation of \$100 to James Cross' 2025 Campaign for Katy ISD School Board when I hosted a Meet and Greet for him on March 28, 2025 at my home.

Patti & Bill Lacy

1703 Kent Falls Ct.

Katy, TX. 77450



Katy Educational Excellence Partners

30 March 2025

RE: Notification of In-Kind Contribution – James Cross

Details on In Kind Contribution:

1. **Name of Organization:** Katy Educational Excellence Partners (KEEP) PAC, Treasurer Melissa Nixon
2. **Address:** 5554 South Peek Road PMB 42, Katy Texas 77450
3. **Total Amount of In-Kind Contributions:** \$1,405.07
4. **Date, Description and Value of each In Kind Contribution**

Date	Description	Value
25 March 2025	Push cards for endorsement of candidate	\$283.67
10 March 2025	Push cards for endorsement of candidate	\$185.93
04 March 2025	Stamps for post cards for endorsement of candidate	\$841.28
03 March 2025	Post cards for endorsement of candidate	\$94.19

For any additional information, please contact the KEEP PAC Treasurer at melissa.nixon3@comcast.net.

Please, file appropriate documentation with the Texas Ethics Commission (TEC).

Regards,

Melissa Nixon

Treasurer, Katy Educational Excellence Partners

March 31, 2025

To Whom it May Concern:

This letter is to confirm that I have made an in-kind donation of \$100 to James Cross's 2025 Campaign for Katy ISD School Board when I hosted a Meet and Greet for him on March 27, 2025 at my home.

Thank you,

Dawn Champagne
21410 Sand Bunker Cir
Katy, TX 77450
bdchampagne@sbcglobal.net
832-549-2059

April 2, 2025

To Whom It May Concern:

This letter is to confirm that I made an in-kind donation of \$125 to James Cross's 2025 Campaign for Katy ISD School Board when I hosted a Meet and Greet for him on March 17, 2025, at my home.

Sincerely,

Janene M. Adam
1807 Sand Hollow LN
Katy, TX. 77450
jan.adam@att.net
281-382-8517

LOANS

SCHEDULE E

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E:
2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 500⁰⁰
5 Date of loan 1/15/25	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitzi Cross	9 Loan Amount (\$) 500⁰⁰
6 Is lender a financial institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8 Lender address; City; State; Zip Code 24922 Almond Katy TX 77494 Orchard Ln.	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See Instructions) Retired		13 Employer (See Instructions) N/A
14 Description of Collateral none		15 Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial institution? <input type="checkbox"/> Y <input type="checkbox"/> N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral none		Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

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.

1 Total pages Schedule F1:	2 FILER NAME James Cross	3 Filer ID (Ethics Commission Filers)
4 Date 2/4/25	5 Payee name Temu	
6 Amount (\$) 98.95	7 Payee address; City; State; Zip Code Temu.com Santa Monica CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Marketing materials	(b) Description Parade materials
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/5/25	Payee name Hobby Lobby	
Amount (\$) 28.52	Payee address; City; State; Zip Code 6811 S. Fry Rd. Katy TX 77494	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Marketing materials	Description Parade Float materials
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/7/25	Payee name NBD Graphics	
Amount (\$) 2,193.15	Payee address; City; State; Zip Code 517 S. Mason Rd. Katy TX 77450	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Marketing Materials	Description Signs , T-shirts
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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.

1 Total pages Schedule F1:	2 FILER NAME James Cross	3 Filer ID (Ethics Commission Filers)
4 Date 2/7/25	5 Payee name Amazon	
6 Amount (\$) 12.52	7 Payee address; City; State; Zip Code Amazon.com Seattle WA	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Marketing Materials	(b) Description Parade Materials
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/07/25	Payee name Hobby Lobby	
Amount (\$) 13.93	Payee address; City; State; Zip Code 10247 W. Grand Pky South Richmond TX 77407	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Marketing Materials	Description Parade Materials
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/10/25	Payee name Amazon	
Amount (\$) 124.33	Payee address; City; State; Zip Code Amazon.com Seattle WA	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food / Beverage Expense	Description Parade Candy
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

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.

1 Total pages Schedule F1:		2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)	
4 Date 2/10/25		5 Payee name Amazon			
6 Amount (\$) 70.35		7 Payee address; City; State; Zip Code Amazon.com Seattle WA			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Marketing Materials		(b) Description Parade Supplies		
	(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 2/10/25		Payee name Mardel			
Amount (\$) 14.07		Payee address; City; State; Zip Code 19650 Restaurant Row Houston TX 77084			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Marketing Materials		Description Parade Sign Lamination		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 2/11/2025		Payee name Hobby Lobby			
Amount (\$) 17.98		Payee address; City; State; Zip Code 6811 South Fry Rd Katy TX 77494			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Marketing Materials		Description Parade Supplies		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

1 Total pages Schedule F1:		2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)	
4 Date 2/11/25		5 Payee name Amazon			
6 Amount (\$) 62.68		7 Payee address; amazon.com		City; Seattle	State; WA
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Marketing Materials		(b) Description Parade Supplies		
	(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 2/13/25		Payee name Home Depot			
Amount (\$) 79.23		Payee address; 6850 S Fry Rd		City; Katy	State; TX
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Marketing Materials		Description Parade Supplies		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 2/13/25		Payee name Amazon			
Amount (\$) 82.24		Payee address; amazon.com		City; Seattle	State; WA
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Marketing Materials		Description Parade Supplies		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

1 Total pages Schedule F1:	2 FILER NAME James Cross	3 Filer ID (Ethics Commission Filers)
4 Date 2/14/25	5 Payee name Amazon	
6 Amount (\$) 37.86	7 Payee address; amazon.com	City; State; Zip Code Seattle WA
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Marketing Materials	(b) Description Parade Supplies
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/14/25	Payee name Mardel	
Amount (\$) 16.77	Payee address; 19650 Restaurant Rd	City; State; Zip Code Houston TX 77084
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Marketing Materials	Description Parade sign lamination
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/21/25	Payee name NBD Graphics	
Amount (\$) 644.09	Payee address; 517 S. Mason	City; State; Zip Code Katy TX 77450
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Marketing Materials	Description Signs
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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.

1 Total pages Schedule F1:	2 FILER NAME James Cross	3 Filer ID (Ethics Commission Filers)
4 Date 2/24/25	5 Payee name Vista print	
6 Amount (\$) 579.11	7 Payee address; City; State; Zip Code vistaprint.com MA	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Marketing Materials	(b) Description Push cards
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/26/25	Payee name Amazon	
Amount (\$) 86.59	Payee address; City; State; Zip Code amazon.com Seattle WA	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Kick-off Equipment
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/27/25	Payee name Amazon	
Amount (\$) 288.45	Payee address; City; State; Zip Code amazon.com Seattle WA	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Kick-off Equipment
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

1 Total pages Schedule F1:	2 FILER NAME James Cross	3 Filer ID (Ethics Commission Filers)
4 Date 2/28/25	5 Payee name Office Max	
6 Amount (\$) 53.01	7 Payee address; City; State; Zip Code 23610 Westheimer Pkwy Katy TX 77494	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Kick-off Office Supplies
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/3/25	Payee name Hobby Lobby	
Amount (\$) 34.32	Payee address; City; State; Zip Code 6811 S. Fry Rd Katy TX 77494	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Marketing/Event Expense	Description Frames - Kick-off
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/4/25	Payee name NBD	
Amount (\$) 192.44	Payee address; City; State; Zip Code 517 S. Mason Rd. Katy TX 77450	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Marketing Materials	Description Signs
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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.

1 Total pages Schedule F1:	2 FILER NAME James Cross	3 Filer ID (Ethics Commission Filers)
4 Date 3/11/25	5 Payee name NBD Graphics	
6 Amount (\$) 1,921.44	7 Payee address; City; State; Zip Code 517 S. Mason Rd. Katy TX 77450	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Marketing Materials	(b) Description Signs
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/19/25	Payee name NBD Graphics	
Amount (\$) 1,061.85	Payee address; City; State; Zip Code 517 S. Mason Rd. Katy TX 77450	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Marketing Materials	Description Signs
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/24/25	Payee name Amazon	
Amount (\$) 71.43	Payee address; City; State; Zip Code amazon.com Seattle WA	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Supplies	Description printer ink
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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.

1 Total pages Schedule F1:	2 FILER NAME James Cross	3 Filer ID (Ethics Commission Filers)
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4 Date 3/25/25	5 Payee name Amazon
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6 Amount (\$) 22.40	7 Payee address; amazon.com	City; Seattle	State; WA	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) DE Marketing Supplies	(b) Description Ring light / tripod
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/31/25	Payee name Home Depot
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Amount (\$) 678.09	Payee address; 6850 S. Fry Rd	City; Katy	State; TX	Zip Code 77494
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Marketing materials	Description Sign display equipment
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/31/25	Payee name Raise The Money, Inc.
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Amount (\$) 643.54	Payee address; P.O. Box 26466	City; Little Rock	State; AR	Zip Code 72221
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Transaction fees
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 3/17/25	5 Full name of contributor out-of-state PAC (ID#: _____) Glenn Gesoff	7 Amount of contribution (\$) \$150.00
6 Contributor address; City; State; Zip Code 5815 Ashley Spring Ct Katy TX 77494		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/17/25	Full name of contributor out-of-state PAC (ID#: _____) Sharon Thompson	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code 20214 Kingsland Blvd. Katy TX 77450		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/16/25	Full name of contributor out-of-state PAC (ID#: _____) Brenda Shaver	Amount of contribution (\$) \$ 75.00
Contributor address; City; State; Zip Code 21330 Park Royale Dr. Katy TX 77450		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/13/25	Full name of contributor out-of-state PAC (ID#: _____) Greg Nady	Amount of contribution (\$) \$ 500.00
Contributor address; City; State; Zip Code 3022 Bentgrass Dr Katy TX 77450		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 3/4/25	5 Full name of contributor out-of-state PAC (ID#: _____) Jessica Strange	7 Amount of contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 9611 Ralston Bend Ln. Katy TX 77494		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/3/25	Full name of contributor out-of-state PAC (ID#: _____) Thomas Scanlon	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code 1514 Shillingtn Dr. Katy TX 77450		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/2/25	Full name of contributor out-of-state PAC (ID#: _____) Summer Piantes	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2907 Drews Manor Ct Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/2/25	Full name of contributor out-of-state PAC (ID#: _____) Kayla Roca	Amount of contribution (\$) \$25.00
Contributor address; City; State; Zip Code 2111 Indigo Manor Ln. Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 3/2/25	5 Full name of contributor out-of-state PAC (ID#: _____) Karen Ricketts	7 Amount of contribution (\$) \$ 100.00
6 Contributor address; City; State; Zip Code 22438 Rustic Meadow Ct. Katy TX 77494		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/2/25	Full name of contributor out-of-state PAC (ID#: _____) Daniel Lee	Amount of contribution (\$) \$ 500.00
Contributor address; City; State; Zip Code 23430 Fairbranch Dr. Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/2/25	Full name of contributor out-of-state PAC (ID#: _____) Shelley Keating	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code 28 Hollingers Is Katy TX 77450		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/2/25	Full name of contributor out-of-state PAC (ID#: _____) Debbie Peterson	Amount of contribution (\$) \$ 50.00
Contributor address; City; State; Zip Code 1930 Cornerstone Place Dr. Katy TX 77450		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 3/2/25	5 Full name of contributor out-of-state PAC (ID#: _____) Angel Bateman 6 Contributor address; City; State; Zip Code 6715 Nighthawk Dr Katy TX 77493	7 Amount of contribution (\$) \$ 50⁰⁰
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/2/25	Full name of contributor out-of-state PAC (ID#: _____) Shannon Petersen Contributor address; City; State; Zip Code 28230 Moonportrait Ln. Katy TX 77494	Amount of contribution (\$) \$ 50⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/2/25	Full name of contributor out-of-state PAC (ID#: _____) Connie Garibaldi Contributor address; City; State; Zip Code 21822 Canyon Peak Ln Katy TX 77450	Amount of contribution (\$) \$ 100⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/2/25	Full name of contributor out-of-state PAC (ID#: _____) Cheryl Hollabaugh Contributor address; City; State; Zip Code 1807 HollowWind Dr. Katy TX 77450	Amount of contribution (\$) \$ 100⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 3/2/25	5 Full name of contributor out-of-state PAC (ID#: _____) Paul McLean	7 Amount of contribution (\$) \$ 150⁰⁰
6 Contributor address; City; State; Zip Code 2802 Noble Grove Ln. Katy TX 77494		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/2/25	Full name of contributor out-of-state PAC (ID#: _____) Whitney Koch	Amount of contribution (\$) \$ 25⁰⁰
Contributor address; City; State; Zip Code 438 Concordia Dr. Katy TX 77450		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/2/25	Full name of contributor out-of-state PAC (ID#: _____) Monica Ramsey	Amount of contribution (\$) \$ 75⁰⁰
Contributor address; City; State; Zip Code 25806 Shannon Wood Ct. Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/2/25	Full name of contributor out-of-state PAC (ID#: _____) Amy Wernig	Amount of contribution (\$) \$ 25⁰⁰
Contributor address; City; State; Zip Code 1719 Park Maple Dr. Katy TX 77450		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 3/2/25	5 Full name of contributor Tracy Janda out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) \$250 ⁰⁰
6 Contributor address; City; State; Zip Code 23122 San Nicholas Katy TX 77494		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 3/2/25	Full name of contributor Jessica Wright out-of-state PAC (ID#: _____)	Amount of contribution (\$) \$25 ⁰⁰
Contributor address; City; State; Zip Code 2810 Noble Grove Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 3/2/25	Full name of contributor Cheryl Mohn out-of-state PAC (ID#: _____)	Amount of contribution (\$) \$100 ⁰⁰
Contributor address; City; State; Zip Code 22030 Willowford Park Dr Katy TX 77450		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 3/2/25	Full name of contributor Angie Waller out-of-state PAC (ID#: _____)	Amount of contribution (\$) \$100 ⁰⁰
Contributor address; City; State; Zip Code 27622 Wilson Run Ln Fulshear TX 77441		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 3/2/25	5 Full name of contributor out-of-state PAC (ID#: _____) Cass Kindley	7 Amount of contribution (\$) \$50⁰⁰
6 Contributor address; City; State; Zip Code 6806 Tiger Trl Katy TX 77493		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 3/2/25	Full name of contributor out-of-state PAC (ID#: _____) Nancy Limmer	Amount of contribution (\$) \$25⁰⁰
Contributor address; City; State; Zip Code 21631 Cimarron Pkwy Katy TX 77450		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 3/2/25	Full name of contributor out-of-state PAC (ID#: _____) Lynda Thigpen	Amount of contribution (\$) \$25⁰⁰
Contributor address; City; State; Zip Code 23431 Whispering Wind Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 3/2/25	Full name of contributor out-of-state PAC (ID#: _____) Samantha Shilk-Cockerham	Amount of contribution (\$) \$25⁰⁰
Contributor address; City; State; Zip Code 20507 Park Pine Katy TX 77450		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 3/1/25	5 Full name of contributor out-of-state PAC (ID#: _____) Linda Powell	7 Amount of contribution (\$) \$50⁰⁰
6 Contributor address; City; State; Zip Code 2610 Silent Spring Creek Dr. Katy TX 77450		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 3/1/25	Full name of contributor out-of-state PAC (ID#: _____) Carol Berglund	Amount of contribution (\$) \$50⁰⁰
Contributor address; City; State; Zip Code 7827 Shady Villa Mdw Houston TX 77055		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 2/26/25	Full name of contributor out-of-state PAC (ID#: _____) Lynette Alidon	Amount of contribution (\$) \$50⁰⁰
Contributor address; City; State; Zip Code 1038 Three Forks Dr. Katy TX 77450		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 2/23/25	Full name of contributor out-of-state PAC (ID#: _____) Paul Dunk	Amount of contribution (\$) \$99⁰⁰
Contributor address; City; State; Zip Code 1814 Blue Sage Dr. Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 2/22/25	5 Full name of contributor out-of-state PAC (ID#: _____) Michelle Thomas	7 Amount of contribution (\$) \$ 50⁰⁰
6 Contributor address; City; State; Zip Code 27719 Rimcrest Court Katy TX 77494		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 2/22/25	Full name of contributor out-of-state PAC (ID#: _____) John Muskopf	Amount of contribution (\$) \$ 250⁰⁰
Contributor address; City; State; Zip Code 3403 Alden Manor Ln Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 2/20/25	Full name of contributor out-of-state PAC (ID#: _____) Louis Malfaro	Amount of contribution (\$) \$ 100⁰⁰
Contributor address; City; State; Zip Code 1510 E 11th St. Austin TX 78702		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 2/17/25	Full name of contributor out-of-state PAC (ID#: _____) Michelle Loftis	Amount of contribution (\$) \$ 100⁰⁰
Contributor address; City; State; Zip Code 25603 Arcadia Glen Court Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 2/13/25	5 Full name of contributor out-of-state PAC (ID#: _____) Trish Reynolds	7 Amount of contribution (\$) \$ 125⁰⁰
6 Contributor address; City; State; Zip Code 22715 Coriander Dr. Katy TX 77450		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/11/25	Full name of contributor out-of-state PAC (ID#: _____) Maite McCollam	Amount of contribution (\$) \$ 100⁰⁰
Contributor address; City; State; Zip Code 7730 Courtney Manor Ln. Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/10/25	Full name of contributor out-of-state PAC (ID#: _____) Brenda Haegner	Amount of contribution (\$) \$ 25⁰⁰
Contributor address; City; State; Zip Code 1910 Stormcroft Cir Katy TX 77450		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/4/25	Full name of contributor out-of-state PAC (ID#: _____) Ashley Vann	Amount of contribution (\$) \$ 250⁰⁰
Contributor address; City; State; Zip Code 3707 Marble Cove Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 2/3/25	5 Full name of contributor out-of-state PAC (ID#: _____) Cathy West	7 Amount of contribution (\$) \$ 100⁰⁰
6 Contributor address; City; State; Zip Code 1518 Airline Dr. Katy TX 77493		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/3/25	Full name of contributor out-of-state PAC (ID#: _____) Terri Varvel	Amount of contribution (\$) \$ 20⁰⁰
Contributor address; City; State; Zip Code 2819 Red Maple Dr. Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/1/25	Full name of contributor out-of-state PAC (ID#: _____) Becky Ballard	Amount of contribution (\$) \$ 200⁰⁰
Contributor address; City; State; Zip Code 4914 Saffield Glen Court Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/1/25	Full name of contributor out-of-state PAC (ID#: _____) Eric Miller	Amount of contribution (\$) \$ 25⁰⁰
Contributor address; City; State; Zip Code 6306 Evanmill Ln. Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 1/30/25	5 Full name of contributor out-of-state PAC (ID#: _____) Ronald Jones	7 Amount of contribution (\$) \$50⁰⁰
6 Contributor address; City; State; Zip Code 20031 Stoneledge Dr. Katy TX 77450		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1/30/25	Full name of contributor out-of-state PAC (ID#: _____) Allen Vicars	Amount of contribution (\$) \$150⁰⁰
Contributor address; City; State; Zip Code 232 Leslie Ct. Bristol TN 37620		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/30/25	Full name of contributor out-of-state PAC (ID#: _____) Judy Smith	Amount of contribution (\$) \$100⁰⁰
Contributor address; City; State; Zip Code 5311 Baron Trace Ln. Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/29/25	Full name of contributor out-of-state PAC (ID#: _____) Erin O'Kelly	Amount of contribution (\$) \$50⁰⁰
Contributor address; City; State; Zip Code 4731 Kings Landing Ln Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 1/29/25	5 Full name of contributor out-of-state PAC (ID#: _____) Catie Procuniar	7 Amount of contribution (\$) \$25⁰⁰
6 Contributor address; City; State; Zip Code 24518 Alexander Crossing Ln Katy TX 77494		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1/29/25	Full name of contributor out-of-state PAC (ID#: _____) Karen Westall	Amount of contribution (\$) \$99⁰⁰
Contributor address; City; State; Zip Code 1906 Windy Ridge Dr. Katy TX 77450		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/29/25	Full name of contributor out-of-state PAC (ID#: _____) Michelle Tuttle	Amount of contribution (\$) \$250⁰⁰
Contributor address; City; State; Zip Code 4207 Stonercroft Cr. Katy TX 77450		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/29/25	Full name of contributor out-of-state PAC (ID#: _____) Kristin Rohde	Amount of contribution (\$) \$50⁰⁰
Contributor address; City; State; Zip Code 1411 Rustling Brook Ln. Houston TX 77094		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 1/29/25	5 Full name of contributor Beth Madison out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) \$100 ⁰⁰
6 Contributor address; City; State; Zip Code 3227 Brinton Trails Katy TX 77494		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1/29/25	Full name of contributor Amy Jinks out-of-state PAC (ID#: _____)	Amount of contribution (\$) \$250 ⁰⁰
Contributor address; City; State; Zip Code 2910 sundance Summit Ln. Katy TX 7749		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/29/25	Full name of contributor Chancie Davis out-of-state PAC (ID#: _____)	Amount of contribution (\$) \$100 ⁰⁰
Contributor address; City; State; Zip Code 19510 Cardiff Park Lane Houston TX 77094		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/28/25	Full name of contributor Melanie Roth Lemanski out-of-state PAC (ID#: _____)	Amount of contribution (\$) \$25 ⁰⁰
Contributor address; City; State; Zip Code 1917 Airline Dr. Katy TX 77493		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME James Cross		3 Filer ID (Ethics Commission Filers)
4 Date 1/28/25	5 Full name of contributor out-of-state PAC (ID#: _____) Dawn Champagne	7 Amount of contribution (\$) \$100⁰⁰
6 Contributor address; City; State; Zip Code 21410 Sand Bunker Cir Katy TX 77450		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1/28/25	Full name of contributor out-of-state PAC (ID#: _____) Christie Cuevas	Amount of contribution (\$) \$100⁰⁰
Contributor address; City; State; Zip Code 3903 Cape Meadow Court Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/28/25	Full name of contributor out-of-state PAC (ID#: _____) Carol Campbell	Amount of contribution (\$) \$100⁰⁰
Contributor address; City; State; Zip Code 22919 DeForest Ridge Ln. Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/28/25	Full name of contributor out-of-state PAC (ID#: _____) Lisa Stratton	Amount of contribution (\$) \$50⁰⁰
Contributor address; City; State; Zip Code 25235 Spring Iris Ln. Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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