

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <b>43</b>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: <b>Mrs.</b>	FIRST: <b>Lindsey</b>	MI: <b>E</b>
	NICKNAME: _____	LAST: <b>Sheguit</b>	SUFFIX: _____
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX:	APT / SUITE #	CITY; STATE; ZIP CODE
	<b>1915 Fair Field Drive Grapevine, TX 76051</b>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	Date Received: <b>4-2-26</b> <b>D. Howard</b>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: <b>Mr.</b>	FIRST: <b>Taylor</b>	MI: _____
	NICKNAME: _____	LAST: <b>Davis</b>	SUFFIX: _____
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY; STATE; ZIP CODE
	<b>4206 Green meadow Colleyville TX 76034 8th East</b>		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
<b>(817) 975-5948</b>			
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)		
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month	Day	Year
<b>01 / 22 / 2026</b>		THROUGH	<b>04 / 02 / 2026</b>
11 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
<b>05 / 02 / 2026</b>		<input checked="" type="checkbox"/> General	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> Special
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
<b>None</b>		<b>Place 6, GCISO Trustee</b>	
14 NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. 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 type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

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

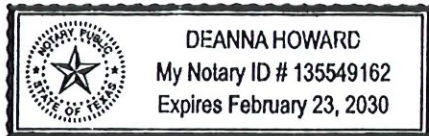
<b>15 C/OH NAME</b> <u>Lindsey Sheguit</u>		<b>16 Filer ID</b> (Ethics Commission Filers)
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ <u>261.00</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>24,902.78</u>
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ <u>0.00</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>5,057.94</u>
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>6,979.04</u>
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>0.00</u>

**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.

*Lindsey Sheguit*  
Signature of Candidate or Officeholder

**Please complete either option below:**

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Lindsey Sheguit this the 2 day of April, 2024, to certify which, witness my hand and seal of office.

Deanna Howard Deanna Howard Executive Assistant  
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 <i>Lindsey Shaguit</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ <i>11,160.49</i>
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ <i>13,242.29</i>
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. <input type="checkbox"/> SCHEDULE E: LOANS		\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ <i>5,007.94</i>
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$ <i>211.09</i>
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$
12. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$ <i>376.49</i>

# 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: <b>28</b>
2 FILER NAME <b>Lindsey Choquit</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>2-13-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kimberly Phoenix</b>	7 Amount of contribution (\$) <b>\$ 211.18</b>
6 Contributor address; City; State; Zip Code <b>3333 Meritage Lane Grapevine, TX 76051</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>2-13-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Katherine Parks</b>	Amount of contribution (\$) <b>\$ 53.04</b>
Contributor address; City; State; Zip Code <b>3519 Mercury Drive Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-13-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Feifei Wang</b>	Amount of contribution (\$) <b>\$ 50.00</b>
Contributor address; City; State; Zip Code <b>3504 Cheval Blanc Colleyville, TX 76034</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-13-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Aaryn Lamb</b>	Amount of contribution (\$) <b>\$ 300.00</b>
Contributor address; City; State; Zip Code <b>709 Preston Place Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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4 Date <b>2-13-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kristal Buxter</b>	7 Amount of contribution (\$) <b>\$53.04</b>
6 Contributor address; City; State; Zip Code <b>312 Timberline Dr Colleyville, TX 76034</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>2-13-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jeena Stephen</b>	Amount of contribution (\$) <b>\$105.75</b>
Contributor address; City; State; Zip Code <b>1921 N Fort Ct Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Chad Dupriest</b>	Amount of contribution (\$) <b>\$105.75</b>
Contributor address; City; State; Zip Code <b>1918 Fair Field Dr Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Adrian Higginbotham</b>	Amount of contribution (\$) <b>\$250.00</b>
Contributor address; City; State; Zip Code <b>2413 Whitney Lane Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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4 Date <b>2-14-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Clint VonGundy</b>	7 Amount of contribution (\$) <b>\$53.04</b>
6 Contributor address; City; State; Zip Code <b>2820 McKinnon St # 4069 Dallas, TX 75201</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date <b>2-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Justin Jones</b>	Amount of contribution (\$) <b>\$105.75</b>
Contributor address; City; State; Zip Code <b>5216 Parkplace Dr. Argyle, TX 76226</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <b>2-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jack Leonard</b>	Amount of contribution (\$) <b>\$50.00</b>
Contributor address; City; State; Zip Code <b>4343 Congress Ave #151 Dallas, TX 75219</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <b>2-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Junell Dubois</b>	Amount of contribution (\$) <b>\$14.00</b>
Contributor address; City; State; Zip Code <b>5317 Altacrest Ct Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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4 Date <b>2-14-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Sheri Robbings</b>	7 Amount of contribution (\$) <b>\$15.08</b>
6 Contributor address; City; State; Zip Code <b>215 W Peach Street Grapevine, TX 76051</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>2-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Coley Center</b>	Amount of contribution (\$) <b>\$53.04</b>
Contributor address; City; State; Zip Code <b>250 Magazine Ave New Braunfels, TX 78130</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Lean Dixon</b>	Amount of contribution (\$) <b>\$15.08</b>
Contributor address; City; State; Zip Code <b>3708 Cliffwood Dr Colleyville, TX 76034</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Marnie Pape</b>	Amount of contribution (\$) <b>\$15.08</b>
Contributor address; City; State; Zip Code <b>2716 Harmon Dr Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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4 Date <b>2-14-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Lorilee Bland</b>	7 Amount of contribution (\$) <b>\$15.08</b>
6 Contributor address; City; State; Zip Code <b>318 Keosler Dr Euless, TX 76039</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>2-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Melanea Warren</b>	Amount of contribution (\$) <b>\$105.75</b>
Contributor address; City; State; Zip Code <b>2103 Loest Valley Dr Euless, TX 76039</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>John Doughney</b>	Amount of contribution (\$) <b>\$53.04</b>
Contributor address; City; State; Zip Code <b>2834 Northwood Ct Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jessica Rajian</b>	Amount of contribution (\$) <b>\$50.00</b>
Contributor address; City; State; Zip Code <b>5405 Juniper Ct Colleyville, TX 76034</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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4 Date <b>2-14-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Amy Fork</b>	7 Amount of contribution (\$) <b>\$15.08</b>
6 Contributor address; City; State; Zip Code <b>1934 Stafford Rd Grapevine, TX 76051</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>2-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Wanda Cotter</b>	Amount of contribution (\$) <b>\$15.08</b>
Contributor address; City; State; Zip Code <b>5601 Oak Top Dr Colleyville, TX 76034</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Claire Wanda</b>	Amount of contribution (\$) <b>\$105.75</b>
Contributor address; City; State; Zip Code <b>2066 Wedgewood Dr Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Tracey Stone</b>	Amount of contribution (\$) <b>\$15.08</b>
Contributor address; City; State; Zip Code <b>1903 Hartford Rd Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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4 Date <b>2-14-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Shane Eyer</b>	7 Amount of contribution (\$) <b>\$105.75</b>
6 Contributor address; City; State; Zip Code <b>701 Pioneer Trail Dripping Springs, TX 78620</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>2-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Stephan Phoenix</b>	Amount of contribution (\$) <b>\$14.00</b>
Contributor address; City; State; Zip Code <b>5333 Meritage Ln Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kimberley Davis</b>	Amount of contribution (\$) <b>\$14.00</b>
Contributor address; City; State; Zip Code <b>3218 Rolling Hills Lane Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kimberley Davis</b>	Amount of contribution (\$) <b>\$14.02</b>
Contributor address; City; State; Zip Code <b>3218 Rolling Hills Lane Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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4 Date <b>2-14-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Edward Middlebrook</b>	7 Amount of contribution (\$) <b>\$14.00</b>
6 Contributor address; City; State; Zip Code <b>913 Surrey Lane Grapevine, TX 76051</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>2-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Scott Salazar</b>	Amount of contribution (\$) <b>\$100.00</b>
Contributor address; City; State; Zip Code <b>3000 Yorkshire Ct Flower Mound, TX 75028</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Patricia Thompson</b>	Amount of contribution (\$) <b>\$50.00</b>
Contributor address; City; State; Zip Code <b>1023 Phoenician Ridge Dr Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Allison Stiles</b>	Amount of contribution (\$) <b>\$100.00</b>
Contributor address; City; State; Zip Code <b>2153 Willowood Dr Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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4 Date <b>2-15-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kim Cummings</b>	7 Amount of contribution (\$) <b>\$20.00</b>
6 Contributor address; City; State; Zip Code <b>3812 Hillside Trail Grapevine, TX 76051</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>2-15-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Susan Green</b>	Amount of contribution (\$) <b>\$50.00</b>
Contributor address; City; State; Zip Code <b>401 Silver Oak Dr. Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-15-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kari Schultz</b>	Amount of contribution (\$) <b>\$25.00</b>
Contributor address; City; State; Zip Code <b>2702 Scrimshire Ct Grapevine, TX 76039</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-16-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Laurie Ackerman</b>	Amount of contribution (\$) <b>\$53.04</b>
Contributor address; City; State; Zip Code <b>3501 High Countryside Dr. Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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4 Date <b>2-16-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Christopher Kinsey</b>	7 Amount of contribution (\$) <b>\$105.75</b>
6 Contributor address; City; State; Zip Code <b>4700 Prestwick Dr Colleyville, TX 76034</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>2-18-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Bryan Smith</b>	Amount of contribution (\$) <b>\$53.04</b>
Contributor address; City; State; Zip Code <b>907 Homestead Ln Grapevine, TX 76031</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-18-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Louie Murillo</b>	Amount of contribution (\$) <b>\$100.00</b>
Contributor address; City; State; Zip Code <b>2200 Glade Rd Colleyville, TX 76034</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-18-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jake &amp; Jinky Hicks</b>	Amount of contribution (\$) <b>\$53.04</b>
Contributor address; City; State; Zip Code <b>4104 Mockingbird Ln Colleyville, TX 76034</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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: 28
2 FILER NAME Lindsay Sheguit		3 Filer ID (Ethics Commission Filers)
4 Date 2-18-26	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amy Care	7 Amount of contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 608 Knott Ct EULESS, TX 76039		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 2-18-26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lorilee Bland	Amount of contribution (\$) \$105.75
Contributor address; City; State; Zip Code 318 Kessler Dr EULESS, TX 76039		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 2-18-26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donna Bloom	Amount of contribution (\$) \$25.00
Contributor address; City; State; Zip Code 2019 Crestwood A Denton, TX 76209		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 2-18-26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janet Sheguit	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code 1900 N Hoodler Ave Cameron, TX 76520		
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 <b>Lindsey Chequitt</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>2-18-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Rachel Nichols</b>	7 Amount of contribution (\$) <b>\$50.00</b>
6 Contributor address; City; State; Zip Code <b>2025 Club View Dr Corinth, TX 76210</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>2-18-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Leslie Smith</b>	Amount of contribution (\$) <b>\$100.00</b>
Contributor address; City; State; Zip Code <b>2649 Deer Hollow Little Elm, TX 75068</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-18-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Rachel Wall</b>	Amount of contribution (\$) <b>\$100.00</b>
Contributor address; City; State; Zip Code <b>2922 Oak Forest Dr Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-18-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Patti Sacker</b>	Amount of contribution (\$) <b>\$105.75</b>
Contributor address; City; State; Zip Code <b>5401 Linden Ct Colleyville, TX 76034</b>		
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 <b>Lindsey Bnequit</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>2-18-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Mia Do</b>	7 Amount of contribution (\$) <b>\$100.00</b>
6 Contributor address; City; State; Zip Code <b>1022 Lakeridge Ct Colleyville, TX 76034</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>2-18-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Mindy Russell</b>	Amount of contribution (\$) <b>\$105.75</b>
Contributor address; City; State; Zip Code <b>1805 Camden Green Colleyville, TX 76034</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-19-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jessica Grace</b>	Amount of contribution (\$) <b>\$50.00</b>
Contributor address; City; State; Zip Code <b>5112 Heatherdale Drive Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-19-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Amber James</b>	Amount of contribution (\$) <b>\$50.00</b>
Contributor address; City; State; Zip Code <b>1316 5th Ave Fort Worth, TX 76104</b>		
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 <b>Lindsey Sheguit</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>2-19-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Taylor Davis</b>	7 Amount of contribution (\$) <b>\$500.00</b>
6 Contributor address; City; State; Zip Code <b>4206 Green meadow st E Colleyville, TX 76034</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>2-20-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>L J Thalken</b>	Amount of contribution (\$) <b>\$50.00</b>
Contributor address; City; State; Zip Code <b>1313 Oak Timber Dr Euless TX 76039</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-20-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Karen Fyda</b>	Amount of contribution (\$) <b>\$105.75</b>
Contributor address; City; State; Zip Code <b>4030 Wellington Ln Grapevine TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>2-21-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Linda Fulhart</b>	Amount of contribution (\$) <b>\$100.00</b>
Contributor address; City; State; Zip Code <b>1924 Rose Ct Grapevine TX 76051</b>		
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 <b>Lindsay Sheguit</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>2-21-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Caroline Harrison</b>	7 Amount of contribution (\$) <b>\$100.00</b>
6 Contributor address; City; State; Zip Code <b>4304 Country Ln Grapevine TX 76051</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date <b>2-24-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Leeta Battle</b>	Amount of contribution (\$) <b>\$53.04</b>
Contributor address; City; State; Zip Code <b>3001 Double Creek Drive Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <b>2-25-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Stephanie Hicks</b>	Amount of contribution (\$) <b>\$37.22</b>
Contributor address; City; State; Zip Code <b>102 Bremen Dr Hurst, TX 76054</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <b>2-26-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kathryn Waire</b>	Amount of contribution (\$) <b>\$100.00</b>
Contributor address; City; State; Zip Code <b>19 Dogwood Ln Saint Louis MO 63124</b>		
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 Lindsey Sheguit		3 Filer ID (Ethics Commission Filers)
4 Date 2-28-26	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kristin Peters	7 Amount of contribution (\$) \$53.04
6 Contributor address; City; State; Zip Code 2733 Hidden Lake Dr Grapevine TX 76051		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3-1-26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valerie Van Gorp	Amount of contribution (\$) \$316.61
Contributor address; City; State; Zip Code 4008 Windermere Dr Colleyville, TX 76034		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3-3-26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jesse Eyer	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code 9809 Bitterroot Dr Little Elm, TX 75068		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3-3-26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison Parr	Amount of contribution (\$) \$105.75
Contributor address; City; State; Zip Code 320 Lloyd Circle Colleyville, TX 76034		
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 <b>Lindsey Sheguit</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3.5.20</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Amy Warren</b>	7 Amount of contribution (\$) <b>\$100.00</b>
6 Contributor address; City; State; Zip Code <b>2705 Old English Ct Euless, TX 76039</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>3.5.20</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Stephanie Williams</b>	Amount of contribution (\$) <b>\$500.00</b>
Contributor address; City; State; Zip Code <b>5205 Braedon Ln Colleyville, TX 76034</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>3.7.20</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kaitlin Kimbro</b>	Amount of contribution (\$) <b>\$30.00</b>
Contributor address; City; State; Zip Code <b>2732 Harmon Dr Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>3.7.20</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kaki Talbot</b>	Amount of contribution (\$) <b>\$50.00</b>
Contributor address; City; State; Zip Code <b>1004 Surrey Ln Grapevine, TX 76051</b>		
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 <b>Lindsey Sheguit</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3-7-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Elaine Milligan</b>	7 Amount of contribution (\$) <b>\$25.00</b>
6 Contributor address; City; State; Zip Code <b>610 Ellington Dr Grapevine, TX 76051</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date <b>3-7-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Aubrey Eyer</b>	Amount of contribution (\$) <b>\$100.00</b>
Contributor address; City; State; Zip Code <b>2400 Melissa Oaks Ln Austin TX 78744</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <b>1-29-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Lindsey Sheguit</b>	Amount of contribution (\$) <b>\$50.00</b>
Contributor address; City; State; Zip Code <b>1915 Fair Field Dr Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <b>3-9-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Judith Larose</b>	Amount of contribution (\$) <b>\$26.68</b>
Contributor address; City; State; Zip Code <b>2906 Creekwood Dr Grapevine, TX 76051</b>		
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 <b>Lindsey Sheguit</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3-10-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kristine Leathers</b>	7 Amount of contribution (\$) <b>\$105.75</b>
6 Contributor address; City; State; Zip Code <b>6300 Emerald Dr Colleyville, TX 76034</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>3-11-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Christy Spivey</b>	Amount of contribution (\$) <b>\$53.04</b>
Contributor address; City; State; Zip Code <b>3907 Martin Pkwy Colleyville, TX 76034</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>3-13-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Matthew Kammerdiener</b>	Amount of contribution (\$) <b>\$100.00</b>
Contributor address; City; State; Zip Code <b>4404 Jim Mitchell Trl Colleyville, TX 76034</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>3-13-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Melissa Cross</b>	Amount of contribution (\$) <b>\$50.00</b>
Contributor address; City; State; Zip Code <b>2309 Woodmoor Ln Colleyville, TX 76034</b>		
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 <b>Lindsey Sheguit</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3-14-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Julie Rounsaville</b>	7 Amount of contribution (\$) <b>\$35.00</b>
6 Contributor address; City; State; Zip Code <b>1479 Hampton Grapevine, TX 76051</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date <b>3-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jana Howell</b>	Amount of contribution (\$) <b>\$105.75</b>
Contributor address; City; State; Zip Code <b>4010 Whitby Ln Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <b>3-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Amanda Gideon</b>	Amount of contribution (\$) <b>\$100.00</b>
Contributor address; City; State; Zip Code <b>1727 Altacrest Dr Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <b>3-14-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Bryan Snow</b>	Amount of contribution (\$) <b>\$250.00</b>
Contributor address; City; State; Zip Code <b>3629 Chateaux Ln Forest, TX 76054</b>		
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 Lindsey Sheguit		3 Filer ID (Ethics Commission Filers)
4 Date 3-14-26	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimberley Davis	7 Amount of contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code 3218 Rolling Hills Lane Grapevine, TX 76051	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3-15-26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Danahue	Amount of contribution (\$) \$105.75
	Contributor address; City; State; Zip Code 1414 Laguna Vista Way Grapevine, TX 76051	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3-16-26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heidi Hughes	Amount of contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 411 McDonnell School Colleyville, TX 76034	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3-16-26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lorraine Napier	Amount of contribution (\$) \$53.04
	Contributor address; City; State; Zip Code 2808 Cottonwood Ln Colleyville, TX 76034	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME <b>Lindsey Sheguit</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3-17-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Amin Lamb</b>	7 Amount of contribution (\$) <b>\$25.00</b>
6 Contributor address; City; State; Zip Code <b>709 Preston Place Grapevine, TX 76051</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>3-18-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Dasha Schalekamp</b>	Amount of contribution (\$) <b>\$50.00</b>
Contributor address; City; State; Zip Code <b>4449 Vineyard Creek Dr Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>3-21-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Caitlin Dodd</b>	Amount of contribution (\$) <b>\$26.68</b>
Contributor address; City; State; Zip Code <b>4153 Windomere Dr Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>3-22-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Cody Cooper</b>	Amount of contribution (\$) <b>\$200.00</b>
Contributor address; City; State; Zip Code <b>4000 Cattlebaron Dr Ft Worth, TX 76108</b>		
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 <b>Lindsey Sheguit</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3-22-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Luanne Choppy</b>	7 Amount of contribution (\$) <b>\$100.00</b>
6 Contributor address; City; State; Zip Code <b>3545 Pecan Hollow Ct Grapevine, TX 76051</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>3-22-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Scott Goble</b>	Amount of contribution (\$) <b>\$50.00</b>
Contributor address; City; State; Zip Code <b>2013 Sandy Point Rd Harker Heights, TX 76548</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>3-22-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Scott Goble</b>	Amount of contribution (\$) <b>\$50.00</b>
Contributor address; City; State; Zip Code <b>2013 Sandy Point Rd Harker Heights, TX 76548</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>3-22-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Alex Stucky</b>	Amount of contribution (\$) <b>\$50.00</b>
Contributor address; City; State; Zip Code <b>4345 Country Ln Grapevine, TX 76051</b>		
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 <b>Lindsay Sheguit</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3-23-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jonathan Bodiford</b>	7 Amount of contribution (\$) <b>\$211.18</b>
6 Contributor address; City; State; Zip Code <b>4008 Stonehaven Dr Colleyville, TX 76034</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>3-23-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Michael Hendrickson</b>	Amount of contribution (\$) <b>\$50.00</b>
Contributor address; City; State; Zip Code <b>1108 Garry Lynn Colleyville, TX 76034</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>3-24-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Carme Murdock</b>	Amount of contribution (\$) <b>\$104.00</b>
Contributor address; City; State; Zip Code <b>4004 meadow Dr Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>3-17-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Margaret Telford</b>	Amount of contribution (\$) <b>\$50.00</b>
Contributor address; City; State; Zip Code <b>416 Azelea Drive Grapevine, TX 76051</b>		
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

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: <b>28</b>
2 FILER NAME <b>Lindsay Sheguit</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>2-27-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Rick Daniel</b>	7 Amount of contribution (\$) <b>\$750.00</b>
6 Contributor address; City; State; Zip Code <b>3368 Oak Creek Dr Corinth, TX 76210</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>3-25-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Donald Miller</b>	Amount of contribution (\$) <b>\$316.00</b>
Contributor address; City; State; Zip Code <b>4708 Latour Ln Colleyville, TX 76034</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>3-26-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Justin Adams</b>	Amount of contribution (\$) <b>\$50.00</b>
Contributor address; City; State; Zip Code <b>1954 Limerick Ln Grapevine, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>3-27-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Joseph B Mello II</b>	Amount of contribution (\$) <b>\$35.00</b>
Contributor address; City; State; Zip Code <b>204 Capriole Ct Colleyville, TX 76034</b>		
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

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: <b>28</b>
2 FILER NAME <b>Lindsey Sheguit</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3-27-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jonathan West</b>	7 Amount of contribution (\$) <b>\$200.00</b>
6 Contributor address; City; State; Zip Code <b>2803 Stonehurst Dr Grapierne, TX 76051</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>3-29-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Cathy Ives</b>	Amount of contribution (\$) <b>\$21.41</b>
Contributor address; City; State; Zip Code <b>1879 Cimarron Ct Grapierne, TX 76051</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>3-29-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Ajit Purandare</b>	Amount of contribution (\$) <b>\$105.75</b>
Contributor address; City; State; Zip Code <b>1109 Riverwalk Ct Colleyville, TX 76034</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>3-29-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Marcus &amp; Lindsey Banner</b>	Amount of contribution (\$) <b>\$400.00</b>
Contributor address; City; State; Zip Code <b>105 Oak Valley Dr Colleyville, TX 76034</b>		
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

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: <b>28</b>
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Hilarie Benedetto</b>	7 Amount of contribution (\$) <b>\$50.00</b>
<b>3-30-26</b>	6 Contributor address; City; State; Zip Code <b>3201 Summit Ct Grapevine, TX 76051</b>	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Joseph West</b>	Amount of contribution (\$) <b>\$211.18</b>
<b>3-31-26</b>	Contributor address; City; State; Zip Code <b>4107 Trail Bend Ct Colleyville, TX 76034</b>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Anne Lapkin</b>	Amount of contribution (\$) <b>\$300.00</b>
<b>3-21-26</b>	Contributor address; City; State; Zip Code <b>904 W Sunset Grapevine, TX 76051</b>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Linda Fulhart</b>	Amount of contribution (\$) <b>\$80.00</b>
<b>3-31-26</b>	Contributor address; City; State; Zip Code <b>1924 Rose Ct Grapevine, TX 76051</b>	
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

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: <b>28</b>
2 FILER NAME <b>Lindsay Sheguit</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4-1-26</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>becky St. John</b>	7 Amount of contribution (\$) <b>\$200.00</b>
6 Contributor address; City; State; Zip Code <b>2702 W. Kimball Grapevine TX 76051</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>4-1-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Waltraud Allen</b>	Amount of contribution (\$) <b>\$500.00</b>
Contributor address; City; State; Zip Code <b>5600 Miramar Ln Colleyville, TX 76034</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>4-1-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Donna Goy</b>	Amount of contribution (\$) <b>\$36.00</b>
Contributor address; City; State; Zip Code <b>4008 Deepwood St Colleyville, TX 76034</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>4-1-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Whitney Johnson</b>	Amount of contribution (\$) <b>\$26.68</b>
Contributor address; City; State; Zip Code <b>6401 Ponderosa Ln Colleyville, TX 76034</b>		
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: <b>6</b>
2 FILER NAME <b>Lindsey Chequit</b>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$
5 Date <b>2-3-26</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Patricia &amp; Allan Thompson</b>	8 Amount of Contribution \$ <b>\$5000.00</b>
	7 Contributor address; City; State; Zip Code <b>1023 Pheasant Ridge Dr Grapevine, TX 76051</b>	9 In-kind contribution description <b>Photography, Videography &amp; Video Editing</b>
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <b>Photographer/Videographer</b>		11 Employer (FOR NON-JUDICIAL) (See Instructions) <b>Self-Employed</b>
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 <b>1-29-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Courtney Fray</b>	Amount of Contribution \$ <b>\$7500.00</b>	In-kind contribution description <b>website, Logo, yard sign &amp; graphics design</b>
	Contributor address; City; State; Zip Code <b>601 S. Main Street Ste 212 Grapevine, TX 76051</b>	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <b>Marketing &amp; Advertising</b>		Employer (FOR NON-JUDICIAL) (See Instructions) <b>Self-Employed</b>	
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)			

**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: <b>6</b>	
2 FILER NAME <b>Lindsay Shequit</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <b>1-22-26</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Aarvin Lamb</b>	8 Amount of Contribution \$ <b>\$192.00</b>	9 In-kind contribution description <b>website purchase domain</b>
7 Contributor address; City; State; Zip Code <b>709 Preston Place Grapevine, TX</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <b>Attorney</b>		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 <b>2-23-26</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Courtney Fray</b>	Amount of Contribution \$ <b>\$167.45</b>	In-kind contribution description <b>banner purchase</b>
Contributor address; City; State; Zip Code <b>601 S. Main Street Grapevine, TX 76051 Ste 212</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <b>Marketing &amp; Advertising</b>		Employer (FOR NON-JUDICIAL)(See Instructions) <b>Self-Employed</b>	
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)			

**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: <span style="font-size: 1.5em;">6</span>	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <span style="font-size: 1.2em;">3-24-20</span>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <span style="font-size: 1.5em;">Rachel Wall</span>	8 Amount of Contribution \$ <span style="font-size: 1.5em;">\$ 33.33</span>	9 In-kind contribution description <span style="font-size: 1.2em;">Facility Rental Food &amp; Drinks</span>
7 Contributor address; City; State; Zip Code <span style="font-size: 1.2em;">2922 Oak Forest Dr Grapevine, TX 76051</span>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <span style="font-size: 1.5em;">Attorney</span>		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 <span style="font-size: 1.2em;">3-24-20</span>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <span style="font-size: 1.5em;">Kimberly Phoenix</span>	Amount of Contribution \$ <span style="font-size: 1.5em;">\$ 33.33</span>	In-kind contribution description <span style="font-size: 1.2em;">Facility Rental Food &amp; Drinks</span>
Contributor address; City; State; Zip Code <span style="font-size: 1.2em;">5333 Meritage Ln Grapevine, TX 76051</span>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <span style="font-size: 1.5em;">Volunteer</span>		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)			

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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: <span style="font-size: 1.5em;">4</span>	
2 FILER NAME <span style="font-size: 1.5em; color: blue;">Lindsey Sheguit</span>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <span style="font-size: 1.5em; color: blue;">3-24-20</span>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <span style="font-size: 1.5em; color: blue;">Kimberley Barber Davis</span>	8 Amount of Contribution \$ <span style="font-size: 1.5em; color: blue;">\$ 33.34</span>	9 In-kind contribution description <span style="font-size: 1.5em; color: blue;">Facility Rental Food &amp; Drinks</span>
7 Contributor address; City; State; Zip Code <span style="font-size: 1.5em; color: blue;">3218 Rolling Hills Ln Grapevine, TX 76051</span>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <span style="font-size: 1.5em; color: blue;">Volunteer</span>		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 <span style="font-size: 1.5em; color: blue;">3-24-20</span>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <span style="font-size: 1.5em; color: blue;">Becky St. John</span>	Amount of Contribution \$ <span style="font-size: 1.5em; color: blue;">\$ 33.34</span>	In-kind contribution description <span style="font-size: 1.5em; color: blue;">Facility Rental Food &amp; Drinks</span>
Contributor address; City; State; Zip Code <span style="font-size: 1.5em; color: blue;">2702 W. Kimball Grapevine, TX 76051</span>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <span style="font-size: 1.5em; color: blue;">Housing Coordinator</span>		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)			

**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: <span style="font-size: 1.5em;">6</span>	
2 FILER NAME <span style="font-size: 1.5em;">Lindsey Shegoff</span>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <span style="font-size: 1.5em;">2.27.20</span>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <span style="font-size: 1.5em;">Kimberly Phoenix</span>	8 Amount of Contribution \$ <span style="font-size: 1.5em;">\$21.00</span>	9 In-kind contribution description <span style="font-size: 1.5em;">Food</span>
7 Contributor address; City; State; Zip Code <span style="font-size: 1.5em;">5333 Mentage Ln Grapevine, Tx 76051</span>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <span style="font-size: 1.5em;">Volunteer</span>		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 <span style="font-size: 1.5em;">2.19.20</span>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <span style="font-size: 1.5em;">Sara &amp; Jonathan Marshall</span>	Amount of Contribution \$ <span style="font-size: 1.5em;">\$58.00</span>	In-kind contribution description <span style="font-size: 1.5em;">Facility Rental</span>
Contributor address; City; State; Zip Code <span style="font-size: 1.5em;">1104 Riverwalk Ct Colleyville, Tx 76034</span>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <span style="font-size: 1.5em;">Volunteer / Attorney</span>		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)			

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <u>6</u>	
2 FILER NAME <u>Lindsay Sheguit</u>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <u>3-7-26</u>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Jennifer Patel</u>	8 Amount of Contribution \$ <u>\$95.69</u>	9 In-kind contribution description <u>Food &amp; Drinks</u>
7 Contributor address; City; State; Zip Code <u>1800 Northern Oak Circle Irving, TX 75036</u>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <u>Volunteer</u>		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 <u>3-9-26</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Kimberly Phoenix</u>	Amount of Contribution \$ <u>\$74.15</u>	In-kind contribution description <u>Printing Rush Fee</u>
Contributor address; City; State; Zip Code <u>5333 Meritage Ln Grapevine, TX 76051</u>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <u>Volunteer</u>		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><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

# 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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Credit Card Payment  | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <u>4</u>	<b>2</b> FILER NAME <u>Lindsey Sheguit</u>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <u>2.12.26</u>	<b>5</b> Payee name <u>Squarespace</u>	
<b>6</b> Amount (\$) <u>\$38.38</u>	<b>7</b> Payee address; City; State; Zip Code <u>225 Varick Street 12th Floor New York, NY 10014</u> <input type="checkbox"/> Check if individual's residence address.	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>	<b>(b)</b> Description <u>Website Fee</u>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
<b>Date</b> <u>2.26.26</u>	<b>Payee name</b> <u>Edwards &amp; Patterson Signs</u>	
<b>Amount (\$)</b> <u>\$1841.33</u>	<b>Payee address;</b> City; State; Zip Code <u>203 S. Belt Line Rd Irving TX 75060</u> <input type="checkbox"/> Check if individual's residence address.	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <u>Advertising Expense</u>	<b>Description</b> <u>Campaign Signs</u>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
<b>Date</b> <u>2.27.26</u>	<b>Payee name</b> <u>Frost Bank</u>	
<b>Amount (\$)</b> <u>\$14.00</u>	<b>Payee address;</b> City; State; Zip Code <u>975 William D. Tate Ave Grapevine, TX 76051</u> <input type="checkbox"/> Check if individual's residence address.	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <u>Accounting / Banking Expense</u>	<b>Description</b> <u>Monthly Service Charge</u>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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)

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: 4	<b>2</b> FILER NAME Lindsey Sheguit	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 3-9-26	<b>5</b> Payee name Print Place	
<b>6</b> Amount (\$) \$740.97	<b>7</b> Payee address; City; State; Zip Code 1130 Ave H East Arlington, TX 76011	
<b>8</b> PURPOSE OF EXPENDITURE	<input type="checkbox"/> Check if individual's residence address.	
	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising expense	<b>(b)</b> Description Campaign Door Hangers
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3-12-26	Payee name Squarespace	
Amount (\$) \$38.38	Payee address; City; State; Zip Code 225 Varick Street 12th Floor New York, NY 10014	
PURPOSE OF EXPENDITURE	<input type="checkbox"/> Check if individual's residence address.	
	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Website Fee
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3-13-26	Payee name NTX Apparel	
Amount (\$) \$597.54	Payee address; City; State; Zip Code 315 Sage Ln Euless TX 76039	
PURPOSE OF EXPENDITURE	<input checked="" type="checkbox"/> Check if individual's residence address.	
	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Campaign Shirts
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Credit Card Payment  | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>4</b>	<b>2</b> FILER NAME <b>Lindsey Sheguit</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>3-23-26</b>	<b>5</b> Payee name <b>United States Postal Service</b>	
<b>6</b> Amount (\$) <b>\$23.40</b>	<b>7</b> Payee address: <b>1501 Hall Johnson Rd Colleyville TX 76034</b>	City; State; Zip Code
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Other</b>	<b>(b)</b> Description <b>Postage</b>
	<input type="checkbox"/> Check if individual's residence address.	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <b>3-31-26</b>	Payee name <b>Edwards &amp; Patterson Signs</b>	
Amount (\$) <b>\$994.86</b>	Payee address: <b>203 S. Belt Line Rd Irving TX 75060</b>	City; State; Zip Code
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Campaign Signs</b>
	<input type="checkbox"/> Check if individual's residence address.	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 <b>4-1-26</b>	Payee name <b>DONOR BOX</b>	
Amount (\$) <b>\$273.48</b>	Payee address: <b>1520 Belle View Blvd Alexandria, VA 22307 # 4106</b>	City; State; Zip Code
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Fees</b>	Description <b>Merchant Card Services Fees</b>
	<input type="checkbox"/> Check if individual's residence address.	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>4</b>	2 FILER NAME <b>Lindsay Sheguit</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>3-2-26</b>	5 Payee name <b>Staples</b>	
6 Amount (\$) <b>\$195.17</b>	7 Payee address; City; State; Zip Code <b>2800 Hwy 121 Suite 1000 Dallas, TX 76039</b>	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Advertising expense</b>	
	(b) Description <b>Flyers</b>	
	(c) <input type="checkbox"/> Check if individual's residence address. <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 <b>4-1-26</b>	Payee name <b>Stripe</b>
Amount (\$) <b>\$300.43</b>	Payee address; City; State; Zip Code <b>354 Oyster Point Blvd South San Francisco, CA 94080</b>
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Fees</b>
	Description <b>Merchant Card services Fees</b>
	<input type="checkbox"/> Check if individual's residence address. <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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	Payee name
Amount (\$)	Payee address; City; State; Zip Code
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)
	Description
	<input type="checkbox"/> Check if individual's residence address. <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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 PERSONAL FUNDS

## SCHEDULE G

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.

<b>1</b> Total pages Schedule G: <u>1</u>	<b>2</b> FILER NAME <u>Lindsey Sheguit</u>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <u>2.7.26</u>	<b>5</b> Payee name <u>Troy Foester</u>	
<b>6</b> Amount (\$) <u>\$211.09</u> <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code <u>5004 Promised Land Dr</u> <u>McKinney, TX</u> <u>75071</u> <input type="checkbox"/> Check if individual's residence address.	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>	<b>(b)</b> Description <u>Photographs</u>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought    Office held
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <input type="checkbox"/> Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought    Office held
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <input type="checkbox"/> Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought    Office held

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**INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER**

**SCHEDULE K**

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 K: <b>1</b>
2 FILER NAME <b>Lindsey Sheguit</b>		3 Filer ID (Ethics Commission Filers)
4 Date  <b>3-2-26</b>	5 Name of person from whom amount is received <b>Staples</b>	8 Amount (\$)  <b>\$195.17</b>
	6 Address of person from whom amount is received; City; State; Zip Code <b>2800 Hwy 121 Suite 1000 Euless, TX 76039</b>	
	7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer <b>Refund</b>	
Date  <b>3-12-26</b>	Name of person from whom amount is received <b>Print Place</b>	Amount (\$)  <b>\$181.32</b>
	Address of person from whom amount is received; City; State; Zip Code <b>1130 Ave H East Arlington, TX 76051</b>	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer <b>Refund</b>	
Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City; State; Zip Code	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	
Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City; State; Zip Code	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	

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