SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC
COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed: 19

OFFICE USE ONLY

Date Received
RECEIVED OCT 06 2025
Sara
11:15am

Date Hand-delivered or Date Postmarked
DELIVERED OCT 06 2025

Receipt # | Amount $

Date Processed

Date Imaged
CHECKED OCT 06 2025

3 COMMITTEE NAME
CAPE CFISD Advocates for Public Ed

4 COMMITTEE ADDRESS
☐ Change of Address
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
5315-B Cypress Creek Pkwy #283
Houston, TX 77069-4403

5 CAMPAIGN TREASURER NAME
MS / MRS / MR: Mr. FIRST: Darcy MI: A
NICKNAME LAST: Mingoia SUFFIX

6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
6610 Battington Garden
Houston, TX 77069

7 CAMPAIGN TREASURER MAILING ADDRESS
☐ Change of Address
STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

8 CAMPAIGN TREASURER PHONE
AREA CODE PHONE NUMBER EXTENSION
(713) 859-0030

9 REPORT TYPE
☐ January 15
☐ July 15
☒ 30th day before election
☐ 8th day before election
☐ Runoff
☐ Exceeded Modified Reporting Limit
☐ Dissolution Report (Attached PAC-FR)
☐ 10th day after campaign treasurer termination

10 PERIOD COVERED
Month Day Year: 07/01/2025 THROUGH Month Day Year: 09/25/2025

11 ELECTION
ELECTION DATE
Month Day Year: 11/04/2025
ELECTION TYPE
☐ Primary ☐ Runoff ☐ Other
☒ General ☐ Special Description

GO TO PAGE 2

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC
COVER SHEET PG 2

12 COMMITTEE NAME: CAPE CFISD Advocates for Public Ed

13 Filer ID (Ethics Commission Filers):

14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.)

- [x] SUPPORT (Candidate or Measure)
- [ ] OPPOSE (Candidate or Measure)
- [ ] ASSIST (Officeholder)

- [x] CANDIDATE
- [ ] OFFICEHOLDER
- [ ] MEASURE

CANDIDATE / OFFICEHOLDER NAME: Lesley Guilmartin, Cleveland Lane + Kendra Camarena

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder): Position 5, Position 6 + Position 7 CFISD Board of Trustees

BALLOT IDENTIFICATION / #:

ELECTION DATE: Month / Day / Year

DESCRIPTION:

15 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	$ 740.00
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 8,035.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	$ 0.00
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 18,558.94
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 2,027.93
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

16 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.

STEPHANIE BURKE
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 06/27/27
NOTARY ID 834776-4

Darcy Mingoia
Signature of Campaign Treasurer (Declarant)

Please complete either option below:

(1) Affidavit

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Darcy Mingoia, this the 6th day of October, 20 25, to certify which, witness my hand and seal of office.

Stephanie Burke — STEPHANIE BURKE — 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 _____ (month), 20_____ (year).

_____
Signature of Campaign Treasurer (Declarant)

SUBTOTALS - SPAC

FORM SPAC
COVER SHEET PG 3

17 COMMITTEE NAME	18 Filer ID (Ethics Commission Filers)
CAPE CFISD Advocates for Public Ed	

19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	☐	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 8,775.00
2.	☐	SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS $49.00 unitemized	$ 1,056.00
3.	☐	SCHEDULE B: PLEDGED CONTRIBUTIONS	$ 0.00
4.	☐	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$ 0.00
5.	☐	SCHEDULE C2 : NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$ 0.00
6.	☐	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATON OR LABOR ORGANIZATION	$ 0.00
7.	☐	SCHEDULE E: LOANS	$ 0.00
8.	☐	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 18,558.94
9.	☐	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$ 0.00
10.	☐	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	$ 0.00
11.	☐	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$ 0.00
12.	☐	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	$ 0.00
13.	☐	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 0.00
14.	☐	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	$ 0.00

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: 9 1 of 9

2 FILER NAME: CAPE CFISD Advocates for Public Ed

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
7/1/2025	Susan Olson 12006 Fawnview Dr. Houston, Tx 77070	$100.00

8 Principal occupation / Job title (See Instructions):

9 Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)
7/7/2025	Michael Wilson 7331 Haley Woods Ct. Houston, Tx 77095	$30.00

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)
7/8/2025	Jeanne Davis 17318 Haley Falls LN. Houston, Tx 77095	$100.00

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)
7/14/2025	Wil Jeudy 2125 Yale #1551 Houston, Tx 77008	$100.00

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.**

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1 Total pages Schedule A1: 9 2 of 9

2 FILER NAME: CAPE CFISD Advocates for Public Ed

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
7/16/2025	Laura Shepard	17919 Western Pass LN. Houston, Tx 77095	$25.00
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 ($)
7/16/2025	Nicola Speedie	15314 Woodlawn Manor Ct. Cypress, Tx 77429	$25.00
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 ($)
7/16/2025	Kattina Yang	13015 Far Point Ct. Manor Cypress, Tx 77429	$30.00
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 ($)
7/18/2025	Deniza Coleman	15014 Moss Boulder Ct. Houston, Tx 77084	$20.00
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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1 Total pages Schedule A1: 9 3 of 9

2 FILER NAME: CAPE CFISD Advocates for Public Ed

3 Filer ID (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
7/25/2025	Hoang Pham	11526 Galbreath Dr. Houston, Tx 77066	$100.00

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 ($)
7/25/2025	Ryan Sandlin	10127 Blanchard Park LN. Cypress, Tx 77433	$50.00

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 ($)
7/30/2025	Margarette Boswell	18506 Imagination Way Cypress, Tx 77433	$50.00

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 ($)
8/4/2025	Kelly Crist	13507 Fawn Lily Dr. Cypress, Tx 77429	$25.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

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1 Total pages Schedule A1: 4 of 9

2 FILER NAME: CAPE CFISD Advocates for Public Ed

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
8/7/2025	Michael Wilson 7331 Haley Woods Ct. Houston, Tx 77095	$30.00

8 Principal occupation / Job title (See Instructions):

9 Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)
8/19/2025	Deniza Coleman 15014 Mass Boulder Ct. Houston, Tx 77084	$20.00

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)
8/19/2025	Eve Myers 22734 Timberlake Creek Tomball, Tx 77377	$50.00

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)
8/26/2025	Ryan Sandlin 10127 Blanchard Park Ln. Cypress, Tx 77433	$50.00

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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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: 5 of 9

2 FILER NAME: CAPE CFISD Advocates for Public Ed

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor / out-of-state PAC (ID#:)	6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
8/30/2025	Margarette Boswell	18506 Imagination Way Cypress, Tx 77433	$50.00		
9/3/2025	Stacye Anderson	15703 Quiet Bay Ct. Houston, Tx 77095	$250.00		
9/4/2025	Linda Macias	377 CR409 Falfurrias, Tx 78355	$75.00		
9/7/2025	Michael Wilson	7331 Haley Woods Ct. Houston, Tx 77095	$30.00		

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1: 9 6 of 9

2 FILER NAME: CAPE CFISD Advocates for Public Ed

3 Filer ID (Ethics Commission Filers)

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of contribution ($)
9/7/2025	Rhonda Campbell	$25.00
	6 Contributor address; City; State; Zip Code: 19515 Dunlavy Springs Dr. Cypress, TX 77433	

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
9/12/2025	Paul Morgan	$1,000.00
	Contributor address; City; State; Zip Code: 10038 Elm Meadow TR. Houston, TX 77064	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
9/12/2025	Annette Graves	$60.00
	Contributor address; City; State; Zip Code: PO Box 925303 Houston, TX 77292	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)
9/13/2025	Gary Frankel	$100.00
	Contributor address; City; State; Zip Code: 15706 Jersey Dr. Houston, TX 77040	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

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1 Total pages Schedule A1: 7 of 9

2 FILER NAME: CAPE CFISD Advocates for Public Ed

3 Filer ID (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
9/13/2025	Jackie Carrillo	18366 Madison Claire Ct. Cypress, Tx 77433	$20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Contributor address; City; State; Zip Code	Amount of contribution ($)
9/19/2025	Deniza Coleman	15014 Moss Boulder Ct. Houston, Tx 77084	$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Contributor address; City; State; Zip Code	Amount of contribution ($)
9/22/2025	Loretta Shumway	7110 Willow Bridge CR. Houston, Tx 77095	$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Contributor address; City; State; Zip Code	Amount of contribution ($)
7/7/2025	Alli Sandel	12014 Gardengken Drive Houston, Tx 77070	$500.00
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.**

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1 Total pages Schedule A1: 8 of 9

2 FILER NAME: CAPE CFISD Advocates for Public Ed

3 Filer ID (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
7/27/2025	Darcy Mingoia	6610 Barrington Edn Houston, TX 77069	$500.00
8 Principal occupation / Job title (See Instructions): Retired		9 Employer (See Instructions): Retired	
8/23/2025	Jane S. Humphreys	6923 Walton Heath DR. Houston, TX 77069	$500.00
Principal occupation / Job title (See Instructions):		Employer (See Instructions):	
8/25/2025	Bob Covey	17710 Ledgefield Cypress, TX 77433	$1,000.00
Principal occupation / Job title (See Instructions): Retired		Employer (See Instructions): Retired	
8/25/2025	Brian Sandel	12014 Gardengten Dr. Houston, TX 77070	$300.00
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: ~~9~~ 7 of 9

2 FILER NAME: CAPE CFISD Advocates for Public Ed

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
9/8/2025	Carolyn Spillane	6122 Rolling Water Dr. Houston, TX 77069	$1,000.00

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 ($)
9/15/2025	Kristi Giron	14343 Millstone Estates LN. Cypress, TX 77429	$500.00

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 ($)
9/15/2025	David R. Hughes	17306 Turquoise Stream DR. Houston, TX 77095	$300.00

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: 4 1 of 4
2 FILER NAME CAPE CFISD Advocates for Public Ed	**3** Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS	$

5 Date	**6** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**8** Amount of Contribution $	**9** In-kind contribution description
7/7/2025	Darcy Mingoia **7** Contributor address; City; State; Zip Code 6610 Buffington Ln. Houston, Tx 77069	$94.19 ☐ Check if travel outside of Texas. Complete Schedule T.	Meeting Food & Beverages

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	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution $	In-kind contribution description
	Contributor address; City; State; Zip Code	☐ 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)	

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: 4 2 of 4
2 FILER NAME: CAPE CFISD Advocates for Public Ed	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS	$

5 Date	6 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 7 Contributor address; City; State; Zip Code	8 Amount of Contribution $	9 In-kind contribution description
7/29/2025	Daray Mingoia 6610 Barrington Garden Houston, TX 77069	$158.73	Meeting Food + Beverages ☐ 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)
Retired	Retired
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	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution $	In-kind contribution description
8/4/2025	Daray Mingoia 6610 Barrington Garden Houston, TX 77069	$65.68	Meeting Food + Beverages ☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employer (FOR NON-JUDICIAL) (See Instructions)
Retired	Retired
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.

EXHIBIT PROVIDED BY TEXAS ETHICS COMMISSION
XXXXXX-STATE-STATE-TO-HE
Revised 1/1/2025

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: 4 3 of 4
2 FILER NAME: CAPE CFISD Advocates for Publicly	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS	$

5 Date	6 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 7 Contributor address; City; State; Zip Code	8 Amount of Contribution $	9 In-kind contribution description
8/19/2025	Darcy Mingoia 6610 Barrington Edn Houston, TX 77069	$450.00	Marketing - Ad ☐ 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)
Retired	Retired
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	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution $	In-kind contribution description
8/25/2025	Darcy Mingoia 6610 Barrington Edn. Houston, TX 77069	8122.44	Meeting Food & Beverages ☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employer (FOR NON-JUDICIAL) (See Instructions)
Retired	Retired
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

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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: 4 of 4
2 FILER NAME CAPE CFISD Advocates for PublicEd	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS	$

5 Date	6 Full name of contributor ☐ out-of-state PAC (ID#:_____)	8 Amount of Contribution $	9 In-kind contribution description
9/15/2025	Darcy Mingoia 7 Contributor address; City; State; Zip Code 6610 Barrington Ln. Houston, TX 77069	$115.96	Meeting Food & Beverages ☐ 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	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution $	In-kind contribution description
	Contributor address; City; State; Zip Code		☐ 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)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
3 1 of 3	CAPE CFISD Advocates for Public Ed	

4 Date	5 Payee name
7/7/2025	Print N Sign - Farhan Siddiqui

6 Amount ($)	7 Payee address;	City;	State;	Zip Code
$1,385.60	7350 Harwin Dr #316-A	Houston	TX	77036

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)	(b) Description
Advertising Expense	T-Shirts

(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name — Office sought — Office held

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Date	Payee name
7/11/2025	Jordan Bowen

Amount ($)	Payee address;	City;	State;	Zip Code
$2,000.00	5903 Coral Ridge Rd.	Houston	TX	77069

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)	Description
Consulting Expense	Coordinator for Campaign

☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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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Date	Payee name
7/11/2025	Print N Sign - Farhan Siddiqui

Amount ($)	Payee address;	City;	State;	Zip Code
$1,385.60	7350 Harwin Dr #316-A	Houston	TX	77036

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)	Description
Advertising Expense	T-Shirts

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
3 2 of 3	CAPE CFISD Advocates for Public Ed	

4 Date: 7/23/2025
5 Payee name: NBD Graphics
6 Amount ($): $5,585.70
7 Payee address; 9175 Mason Road **City;** Katy **State;** TX **Zip Code** 77450

8 PURPOSE OF EXPENDITURE
(a) Category (See Categories listed at the top of this schedule): Advertising Expense
(b) Description: Yard Signs
(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name | Office sought | Office held

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Date: 7/31/2025 8/31/2025
Payee name: Amegy Bank of Texas
Amount ($): $4.00
Payee address; P.O. Box 26547 **City;** Salt Lake City **State;** UT **Zip Code** 84126

PURPOSE OF EXPENDITURE
Category (See Categories listed at the top of this schedule): Accounting/Banking
Description: Fees
☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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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Date: 9/11/2025
Payee name: Lesley Guilmart for CFISD Trustee
Amount ($): $5,000.00
Payee address; 16635 Spring Cypress Rd #88 **City;** Cypress **State;** TX **Zip Code** 77429-9998

PURPOSE OF EXPENDITURE
Category (See Categories listed at the top of this schedule): Contributions to Candidate
Description: To support campaign expenses.
☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name | Office sought | Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
3 3 of 3	CAFE CFISD Advocates for Public Ed	

4 Date: 9/14/2025
5 Payee name: Chris Young
6 Amount ($): $1,000.00
7 Payee address; 2919 Helberg — City; Houston — State; TX — Zip Code 77092

8 PURPOSE OF EXPENDITURE
(a) Category (See Categories listed at the top of this schedule): Consulting Expenses
(b) Description: Robocalls/Texts
(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name — Office sought — Office held

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Date: 9/25/2025
Payee name: NBD Graphics
Amount ($): $2,137.94
Payee address; 9175 Mason Road — City; Katy — State; TX — Zip Code 77450

PURPOSE OF EXPENDITURE
Category (See Categories listed at the top of this schedule): Advertising Expense
Description: Yard Signs
☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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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Date: 9/25/2025
Payee name: Anedot
Amount ($): $60.10
Payee address; 1340 Poydras St #1770 — City; New Orleans — State; LA — Zip Code 70112

PURPOSE OF EXPENDITURE
Category (See Categories listed at the top of this schedule): Accounting/Banking
Description: Credit Card Fees
☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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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