

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) 00080016		2 Total pages filed: 28	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Alejandra		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/15/2026		
	NICKNAME LAST SUFFIX Salinas				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 56386 Houston, TX 77256			Date Hand-delivered or Date Postmarked	
				Receipt #	Amount
				Date Processed	
				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI				
	NICKNAME LAST SUFFIX				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION				
8 REPORT TYPE	☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only) ☒ July 15 ☐ 8th day before election ☐ Exceeded modified reporting limit ☐ Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 01/01/2026 06/30/2026				
10 ELECTION	ELECTION DATE Month Day Year 11/02/2027		ELECTION TYPE		
			☐ Primary ☐ Runoff ☐ Other ☒ General ☐ Special		
11 OFFICE	OFFICE HELD (if any) City Council Member, District, At Large 4			12 OFFICE SOUGHT (if known) City Council Member, District, At Large 4	

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME	Salinas, Alejandra	14 Filer ID	(Ethics Commission Filers)
		00080016	

15 NOTICE FROM POLITICAL COMMITTEE(S) ☐ Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	☐ GENERAL	COMMITTEE ADDRESS
	☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	43,076.94
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	51,265.12
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	3,028.51
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	95,000.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Alejandra Salinas

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

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

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18 FILER NAME Salinas, Alejandra		19 Filer ID 00080016	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	43,030.00
2.	☒ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	46.94
3.	☐ SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	☐ SCHEDULE E: LOANS	\$	
5.	☒ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	40,478.71
6.	☒ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	401.79
7.	☐ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	☒ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	10,384.62
10.	☐ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	☐ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	☒ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	72.63

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/11 Rpt: 4/28
2 FILER NAME Salinas, Alejandra		3 Filer ID (Ethics Commission Filers) 00080016
4 Date 02/05/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) ACEC Houston PAC 6 Contributor address; City; State; Zip Code Houston, TX 77018	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/17/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Allen Boone Humphries Robinson LLP Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/14/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Anderson, Emily Contributor address; City; State; Zip Code Houston, TX 77081	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Halff Associates Inc.
Date 02/17/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) BAC PAC Contributor address; City; State; Zip Code Houston, TX 77046	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/15/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Berg, Tom Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/11 Rpt: 5/28
2 FILER NAME Salinas, Alejandra		3 Filer ID (Ethics Commission Filers) 00080016
4 Date 02/12/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Biar, Andrew 6 Contributor address; City; State; Zip Code Houston, TX 77024	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/13/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Black, David Contributor address; City; State; Zip Code St. Paul, MN 55123	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/27/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Bracewell PAC Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Calve, Billy Contributor address; City; State; Zip Code San Antonio, TX 78202	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor ☒ out-of-state PAC (ID#: C00699157) Clear Channel Outdoor, LLC PAC Contributor address; City; State; Zip Code Phoenix, AZ 85016	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/11 Rpt: 6/28
2 FILER NAME Salinas, Alejandra		3 Filer ID (Ethics Commission Filers) 00080016
4 Date 02/17/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Clifford, Cindy 6 Contributor address; City; State; Zip Code Houston, TX 77019	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/17/2026	Full name of contributor ☒ out-of-state PAC (ID#: <u>C00248716</u>) Comcast Corporation PAC Contributor address; City; State; Zip Code Philadelphia, PA 19103	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Cornerstone Government Affairs Texas PAC Contributor address; City; State; Zip Code Washington, DC 20024	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Frazier, Sarah Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Gonzalez, Blanca Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/11 Rpt: 7/28
2 FILER NAME Salinas, Alejandra		3 Filer ID (Ethics Commission Filers) 00080016
4 Date 06/18/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Greater Houston Restaurant Association PAC 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/12/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Gregg, Kerry Contributor address; City; State; Zip Code Houston, TX 77003	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) LAN Inc.
Date 01/27/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) HOME-PAC Greater Houston Builders Association Contributor address; City; State; Zip Code Houston, TX 77064	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Harris, Michael Contributor address; City; State; Zip Code Houston, TX 77046	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Harris Law Firm
Date 01/26/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Hartman, John Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/11 Rpt: 8/28
2 FILER NAME Salinas, Alejandra		3 Filer ID (Ethics Commission Filers) 00080016
4 Date 02/17/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Hartman, John 6 Contributor address; City; State; Zip Code Houston, TX 77007	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 01/09/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Heisch, Rodney Contributor address; City; State; Zip Code Houston, TX 77009	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) BGE Inc.
Date 06/30/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Hillsman, Jennifer Contributor address; City; State; Zip Code Houston, TX 77016	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Hlavacek, Ian Contributor address; City; State; Zip Code Houston, TX 77023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Houston Apartment Association PAC Contributor address; City; State; Zip Code Houston, TX 77041	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/11 Rpt: 9/28
2 FILER NAME Salinas, Alejandra		3 Filer ID (Ethics Commission Filers) 00080016
4 Date 04/28/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Joiner, Patricia 6 Contributor address; City; State; Zip Code Houston, TX 77055	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/17/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) LANPAC Contributor address; City; State; Zip Code Houston, TX 77042	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Langham, Chanler Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Susman Godfrey LLP
Date 01/14/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Lee, Alice Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/14/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Lee, Alice Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/11 Rpt: 10/28
2 FILER NAME Salinas, Alejandra		3 Filer ID (Ethics Commission Filers) 00080016
4 Date 03/14/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Lee, Alice 6 Contributor address; City; State; Zip Code Houston, TX 77096	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/14/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Lee, Alice Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/14/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Lee, Alice Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/14/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Lee, Alice Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Lee, Megumi Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/11 Rpt: 11/28
2 FILER NAME Salinas, Alejandra		3 Filer ID (Ethics Commission Filers) 00080016
4 Date 04/01/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Linebarger Goggan Blair & Sampson, LLP 6 Contributor address; City; State; Zip Code Austin, TX 78760	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/30/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Magee, Amber Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Susman Godfrey LLP
Date 04/29/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Markland, Clive Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) FMG Construction LLC
Date 04/21/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Narcisse, Jude Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/17/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Peavy, Judge John W. Contributor address; City; State; Zip Code Houston, TX 77288	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/11 Rpt: 12/28
2 FILER NAME Salinas, Alejandra		3 Filer ID (Ethics Commission Filers) 00080016
4 Date 02/10/2026	5 Full name of contributor ☒ out-of-state PAC (ID#: C00194555) Political Action Committee of Winstead PC 6 Contributor address; City; State; Zip Code Dallas, TX 75201	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/16/2026	Full name of contributor ☐ out-of-state PAC (ID#:) Rensink, Carol Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/14/2026	Full name of contributor ☐ out-of-state PAC (ID#:) Salinas, Rosalia Contributor address; City; State; Zip Code San Diego, CA 92106	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Retired
Date 06/29/2026	Full name of contributor ☐ out-of-state PAC (ID#:) Shaddix, James Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/17/2026	Full name of contributor ☐ out-of-state PAC (ID#:) TREPAC-Texas REALTORS PAC Contributor address; City; State; Zip Code Austin, TX 78768	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/11 Rpt: 13/28
2 FILER NAME Salinas, Alejandra		3 Filer ID (Ethics Commission Filers) 00080016
4 Date 02/18/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Tahir, Emad 6 Contributor address; City; State; Zip Code Houston, TX 77080	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/19/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Tahir, Zafar Contributor address; City; State; Zip Code Houston, TX 77080	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self employed
Date 03/20/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Tameez, Mustafa Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Managing Director		Employer (See Instructions) Outreach Strategists LLC
Date 02/02/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Tucker, Eliot Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Wilson, Jennifer Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/11 Rpt: 14/28
2 FILER NAME Salinas, Alejandra		3 Filer ID (Ethics Commission Filers) 00080016
4 Date 02/17/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Young, Kari 6 Contributor address; City; State; Zip Code Houston, TX 77008	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 01/19/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Zermeno, Roy Contributor address; City; State; Zip Code Houston, TX 77013	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 15/28	
2 FILER NAME Salinas, Alejandra		3 Filer ID (Ethics Commission Filers) 00080016	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 01/27/2026	6 Full name of contributor ☐ out-of-state PAC (ID#: _____) Greater Houston Restaurant Association PAC	8 Amount of contribution (\$) \$46.94	9 In-kind contribution description Event refreshments
	7 Contributor address; City; State; Zip Code Houston, TX 77064	☐ 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)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/10 Rpt: 16/28	2 FILER NAME Salinas, Alejandra	3 Filer ID (Ethics Commission Filers) 00080016
4 Date 01/09/2026	5 Payee name ActBlue	
6 Amount (\$) \$25.13	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online contribution fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/02/2026	Candidate/Officeholder name Office sought Office held	
Payee name ActBlue		
Amount (\$) \$104.71	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online contribution fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/14/2026	Candidate/Officeholder name Office sought Office held	
Payee name ActBlue		
Amount (\$) \$15.38	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online contribution fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/10 Rpt: 17/28	2 FILER NAME Salinas, Alejandra	3 Filer ID (Ethics Commission Filers) 00080016
4 Date 04/14/2026	5 Payee name ActBlue	
6 Amount (\$) \$21.01	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online contribution fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/14/2026	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$0.38	Payee name ActBlue Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online contribution fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/14/2026	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$10.14	Payee name ActBlue Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online contribution fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/10 Rpt: 18/28	2 FILER NAME Salinas, Alejandra	3 Filer ID (Ethics Commission Filers) 00080016
4 Date 01/08/2026	5 Payee name Cedar Break Strategies	
6 Amount (\$) \$3,250.00	7 Payee address; City; State; Zip Code 4730 Mountain Laurel Dr. Rosharon, TX 77583	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Voter contact services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/13/2026	Payee name Grant Martin Campaigns	
Amount (\$) \$6,180.70	Payee address; City; State; Zip Code 2383 Bush Street San Francisco, TX 94115	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Yard signs and collateral material
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/28/2026	Payee name Grant Martin Campaigns	
Amount (\$) \$26,222.36	Payee address; City; State; Zip Code 2383 Bush Street San Francisco, TX 94115	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Win bonus and printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/10 Rpt: 19/28	2 FILER NAME Salinas, Alejandra	3 Filer ID (Ethics Commission Filers) 00080016
4 Date 01/05/2026	5 Payee name Gusto	
6 Amount (\$) \$162.04	7 Payee address; City; State; Zip Code 525 20th St. San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Payroll processing fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/03/2026	Candidate/Officeholder name Office sought Office held	
Payee name Gusto		
Amount (\$) \$115.28	Payee address; City; State; Zip Code 525 20th St. San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Payroll processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/04/2026	Candidate/Officeholder name Office sought Office held	
Payee name Gusto		
Amount (\$) \$85.28	Payee address; City; State; Zip Code 525 20th St. San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Payroll processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/10 Rpt: 20/28	2 FILER NAME Salinas, Alejandra	3 Filer ID (Ethics Commission Filers) 00080016
4 Date 04/03/2026	5 Payee name Gusto	
6 Amount (\$) \$52.23	7 Payee address; City; State; Zip Code 525 20th St. San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Payroll processing fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/05/2026	Candidate/Officeholder name Office sought Office held	
Payee name Gusto		
Amount (\$) \$52.23	Payee address; City; State; Zip Code 525 20th St. San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Payroll processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/02/2026	Candidate/Officeholder name Office sought Office held	
Payee name Gusto		
Amount (\$) \$52.23	Payee address; City; State; Zip Code 525 20th St. San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Payroll processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/10 Rpt: 21/28	2 FILER NAME Salinas, Alejandra	3 Filer ID (Ethics Commission Filers) 00080016
4 Date 02/18/2026	5 Payee name Huntington Bank	
6 Amount (\$) \$30.00	7 Payee address; City; State; Zip Code 41 South High Street Columbus, OH 43287	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online payment center fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/11/2026	Candidate/Officeholder name Office sought Office held	
Payee name Huntington Bank		
Amount (\$) \$12.63	Payee address; City; State; Zip Code 41 South High Street Columbus, OH 43287	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Check printing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/16/2026	Candidate/Officeholder name Office sought Office held	
Payee name Huntington Bank		
Amount (\$) \$30.00	Payee address; City; State; Zip Code 41 South High Street Columbus, OH 43287	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Online payment center fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/10 Rpt: 22/28	2 FILER NAME Salinas, Alejandra	3 Filer ID (Ethics Commission Filers) 00080016
4 Date 04/16/2026	5 Payee name Huntington Bank	
6 Amount (\$) \$30.00	7 Payee address; City; State; Zip Code 41 South High Street Columbus, OH 43287	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Bank fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/02/2026	Candidate/Officeholder name NGP VAN	
Amount (\$) \$630.27	Office sought 1445 New York Ave. NW, Suite 200 Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign database software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/14/2026	Candidate/Officeholder name NGP VAN	
Amount (\$) \$435.73	Office sought 1445 New York Ave. NW, Suite 200 Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign database software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/10 Rpt: 23/28	2 FILER NAME Salinas, Alejandra	3 Filer ID (Ethics Commission Filers) 00080016
4 Date 05/11/2026	5 Payee name NGP VAN	
6 Amount (\$) \$630.27	7 Payee address; City; State; Zip Code 1445 New York Ave. NW, Suite 200 Washington, DC 20005	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign database software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/09/2026	Candidate/Officeholder name Office sought Office held	
Payee name Stripe		
Amount (\$) \$38.23	Payee address; City; State; Zip Code 354 Oyster Point Blvd. South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/02/2026	Candidate/Officeholder name Office sought Office held	
Payee name Stripe		
Amount (\$) \$157.47	Payee address; City; State; Zip Code 354 Oyster Point Blvd. South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/10 Rpt: 24/28	2 FILER NAME Salinas, Alejandra	3 Filer ID (Ethics Commission Filers) 00080016
4 Date 03/14/2026	5 Payee name Stripe	
6 Amount (\$) \$23.01	7 Payee address; City; State; Zip Code 354 Oyster Point Blvd. South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Processing fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/14/2026	Payee name Stripe	
Amount (\$) \$31.95	Payee address; City; State; Zip Code 354 Oyster Point Blvd. South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/14/2026	Payee name Stripe	
Amount (\$) \$0.78	Payee address; City; State; Zip Code 354 Oyster Point Blvd. South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/10 Rpt: 25/28	2 FILER NAME Salinas, Alejandra	3 Filer ID (Ethics Commission Filers) 00080016
4 Date 06/14/2026	5 Payee name Stripe	
6 Amount (\$) \$17.33	7 Payee address; City; State; Zip Code 354 Oyster Point Blvd. South San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Processing fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/23/2026	Payee name Tejas Brewery	
Amount (\$) \$515.51	Payee address; City; State; Zip Code 2101 Summer St. Houston, TX 77007	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Event deposit
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/23/2026	Payee name Tejas Brewery	
Amount (\$) \$1,546.43	Payee address; City; State; Zip Code 2101 Summer St. Houston, TX 77007	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Event venue and refreshments
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

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 F2: Sch: 1/1 Rpt: 26/28	2 FILER NAME Salinas, Alejandra	3 Filer ID (Ethics Commission Filers) 00080016
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$
5 Date 06/26/2026	6 Payee name Grant Martin Campaigns	
7 Amount (\$) \$401.79	8 Payee address; City; State; Zip Code 2383 Bush Street San Francisco, TX 94115	
9 TYPE OF EXPENDITURE	☒ Political ☐ Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign VM, email distribution software, Google workspace expenses
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 G: Sch: 1/1 Rpt: 27/28		2 FILER NAME Salinas, Alejandra		3 Filer ID (Ethics Commission Filers) 00080016	
4 Date 05/11/2026		5 Payee name Darusman, Davis			
6 Amount (\$) \$5,384.62 ☐ Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Houston, TX 77027			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign stipend	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/18/2026		Payee name Randall, Bryce			
Amount (\$) \$5,000.00 ☐ Reimbursement from political contributions intended		Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Houston, TX 77007			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign stipend	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

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

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/1 Rpt: 28/28
2 FILER NAME Salinas, Alejandra		3 Filer ID (Ethics Commission Filers) 00080016
4 Date 04/10/2026	5 Name of person from whom amount is received Huntington Bank	8 Amount (\$) \$30.00
	6 Address of person from whom amount is received; City; State; Zip Code Houston, TX 77098	
	7 Purpose for which amount is received Refund bank fee	
Date 04/10/2026	Name of person from whom amount is received Huntington Bank	Amount (\$) \$30.00
	Address of person from whom amount is received; City; State; Zip Code Houston, TX 77098	
	Purpose for which amount is received Refund additional bank fee	
Date 03/11/2026	Name of person from whom amount is received Huntington Bank	Amount (\$) \$12.63
	Address of person from whom amount is received; City; State; Zip Code Houston, TX 77098	
	Purpose for which amount is received Refund check order fee	