Supplemen Officeholde	tal Report r			FOR Cover She	et SR	
1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	_{FIRST} Jaynie	МІ	2. Total Pages Filed: 5		
	NICKNAME	LAST Schultz	SUFFIX	3. Office Held		
4. SUPPLEMENTAL REPORT TYPE	☆ January 15	c 30th day before election c Runoff c 15th day after campaign treasurer appointment (officeholder only)				
	c July 15	c 8th day bef	ore election c Exceeded limit	\$500 c Final Report		
5. PERIOD / COVERED	7/1/2024 THROUGH 12/31/2024					
6. ELECTION	Month Day Year					
	5/3/2025	c Primary c Runoff X General c Special c N/A				
7. OFFICE- HOLDER	CONTRIBUTION TOTALS	1. TOTAL OFFICEHOLDER CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED 2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$0.00			\$0.00	
ŀ					\$0.00	
	EXPENDITURE	3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$0.00			\$0.00	
	TOTALS	4. TOTAL OFFICEHOLDER EXPENDITURES \$ 0.00				
8. POLITICAL	CONTRIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OF INTEES OF LOANS), UNLESS IT	R LESS (OTHER THAN PLEDGES TEMIZED	\$ 0.00	
(Campaign)		6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 0.00			\$ 0.00	
	EXPENDITURE TOTALS	7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED		\$ 1,862.64		
		8. TOTAL POLITICAL EXPENDITURES \$3		\$ 3725.28		
9. OFFICEHOLDER FUN FOR CAMPAIGN PUR			AMOUNT OF OFFICEHOLDER C DITURES DURING THE REPORT		\$ 0.00	
10. AFFIDAVIT		is true a		of perjury, that the accompar Il information required to be r		
			ELECTRONICAL	LY CERTIFIED		
AFFIX NOTARY STAI	MP / SEAL ABOVE	Signature of Candidate or Officeholder				
Sworn to and subscribed	before me, by the saidJay	ynie Schultz		, this the31st	day	
	0_24, to certify whi					
Signature of officer ac	Iministering oath	Printed name of office	cer administering oath	Title of officer add	ministering oath	

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

Th	e Instruction Guide explains how to complete this form	1 Total pages Schedule A2: 1 of 1			
2 FILER NAME Jaynie Schultz	=	3 Filer ID (Ethics Commission Filers) 0.00			
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$		
5 Date	6 Full name of contributor)	8 Amount of Contribution \$	9 In-kind contribution description	
	7 Contributor address; City; State;	Zip Code		 	
10 Principal occ	upation / Job title (FOR NON-JUDICIAL)(See Instructions)	11 Employe	er (FOR NON-JUDICIA	de of Texas. Complete Schedule T. AL)(See Instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JU	DICIAL)(See Instructions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spou	se (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor)	Amount of Contribution \$	In-kind contribution description	
	Contributor address; City; State;	Zip Code		 	
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employ	Check if travel outsider (FOR NON-JUDICIA	de of Texas. Complete Schedule T. AL)(See Instructions)	
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	utor's job title (FOR JU	DICIAL)(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 T	HIS SCHEDU	JLE 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

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)

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 1 of 3	2 FILER NAME Jaynie Schultz		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name		1	
07/16/2024	Constant Contact Constant Contact			
6 Amount (\$) 55.44 Campaign Funds for Campaign Expenditures	7 Payee address; 1801 Trapelo Rd Wlatham, MA 02451	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Advertising Expense	Email Software		
	(c) Check if travel outside of Texas. Complete Schedule T.	T. Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	(Office held
Date	Payee name			
08/16/2024	Constant Contact Constant Contact			
Amount (\$) 55.44 Campaign Funds for	Payee address; 1801 Trapelo Rd Waltham, MA 02451	City;	State;	Zip Code
Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising Expense	Email software		
	Check if travel outside of Texas. Complete Schedule T.	le T. Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	(Office held
Date	Payee name			
09/16/2024	Constant Contact Constant Contact			
Amount (\$) 55.44	Payee address; 1801 Trapelo Rd Waltham, MA 02451	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	Tool Trupelo Rd Waldalli, HII 52431			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising Expense	Email Software		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living e	expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	<u> </u>	Office held
Complete ONLY if direct expenditure to benefit C/OF		Office sought		Onice neid
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

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

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)

Credit Card Payment	The Instruction Guide explains how to	complete this form.		,
1 Total pages Schedule F1: 2 of 3	2 FILER NAME Jaynie Schultz		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
10/16/2024	Constant Contact Constant Contact			
6 Amount (\$) 55.44 Campaign Funds for Campaign Expenditures	7 Payee address; 1801 Trapelo Rd Waltham, MA 02451	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Advertising Expense	Email Software		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	ı expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
11/18/2024	Constant Contact Constant Contact			
Amount (\$) 55.44 Campaign Funds for Campaign Expenditures	Payee address; 1801 Trapelo Rd Waltham, MA 02451	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising Expense	Email Software		
	Check if travel outside of Texas. Complete Schedule T.	plete Schedule T. Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
12/16/2024	Constant Contact Constant Contact			
Amount (\$) 55.44 Campaign Funds for Campaign Expenditures	Payee address; 1801 Trapelo Rd Waltham, MA 02451	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising Expense	Email software		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

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

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)

Credit Card Payment	The Instruction Guide explains how to	complete this form.			
1 Total pages Schedule F1: 3 of 3	2 FILER NAME Jaynie Schultz	3 Filer ID (Ethics Commission			
4 Date	5 Payee name				
09/25/2024	Dallas Democratic party Dallas Democratic Party				
6 Amount (\$) 750.00 Campaign Funds for Campaign Expenditures	7 Payee address; 1414 N. Washington AveDallas, TX 75204	City;	State; Zip Code		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE OF EXPENDITURE	Event Expense	JJ Dinner			
	(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		
Date	Payee name				
11/26/2024	Gay Donnell Willis Gay Donnell Willis Campaign				
Amount (\$) 500.00	Payee address; 4728 Mill Run Rd Dallas, TX 75244	City;	State; Zip Code		
Campaign Funds for Campaign Expenditures					
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Campaign Contributi	ion		
	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			
Date	Payee name				
12/11/2024	Yiddishe Kup Yiddishe Kup				
Amount (\$) 280.00	Payee address; 12324 Merit Drive Dallas, TX 75252	City;	State; Zip Code		
Campaign Funds for Campaign Expenditures	12324 Wellt Drive Dallas, 1X 73232				
	Category (See Categories listed at the top of this schedule)) Description			
PURPOSE OF EXPENDITURE	Gift/Awards/Memorials Expense	Holiday gifts			
	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 NEE	EDED		