

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 32								
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <i>Sergio</i> FIRST <i>Sergio</i> MI <i>C</i> NICKNAME LAST <i>Jones</i> SUFFIX		OFFICE USE ONLY Date Received RECVD VIA EMAIL 07/16/2026								
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of Address	ADDRESS / PO BOX; <i>6140 Highway 6 #326</i> APT / SUITE #; CITY; <i>Missouri City, TX</i> STATE; ZIP CODE <i>77591</i>										
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE () PHONE NUMBER _____ EXTENSION										
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <i>Sheryl</i> FIRST <i>Sheryl</i> MI NICKNAME LAST <i>Scott-Taylor</i> SUFFIX		Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged								
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE										
8 CAMPAIGN TREASURER PHONE	AREA CODE () PHONE NUMBER _____ EXTENSION										
9 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)										
10 PERIOD COVERED	Month Day Year <i>01 / 01 / 2026</i> THROUGH Month Day Year <i>06 / 30 / 2026</i>										
11 ELECTION	ELECTION DATE Month Day Year <i>11 / 3 / 2026</i> ELECTION TYPE ☐ Primary ☐ Runoff ☐ Other Description ☒ General ☐ Special										
12 OFFICE	OFFICE HELD (if any) <i>Fort Bend ISD - Trustee</i>	13 OFFICE SOUGHT (if known) <i>Fort Bend County Clerk</i>									
14 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. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 20%; padding: 5px;">COMMITTEE TYPE</td> <td style="padding: 5px;">COMMITTEE NAME</td> </tr> <tr> <td style="padding: 5px;">☐ GENERAL</td> <td style="padding: 5px;">COMMITTEE ADDRESS</td> </tr> <tr> <td style="padding: 5px;">☐ SPECIFIC</td> <td style="padding: 5px;">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td style="padding: 5px;"></td> <td style="padding: 5px;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>			COMMITTEE TYPE	COMMITTEE NAME	☐ GENERAL	COMMITTEE ADDRESS	☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS
COMMITTEE TYPE	COMMITTEE NAME										
☐ GENERAL	COMMITTEE ADDRESS										
☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME										
	COMMITTEE CAMPAIGN TREASURER ADDRESS										

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME <u>Sonya Jones</u>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ <u>500.00</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>600.00</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ <u>0</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>99.27</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>1000.73</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>7483.00</u>

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

Sonya Jones
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Sonya Jones, and my date of birth is 2-26-75.
My address is 5222 Avalon Pointe Missouri City, TX 77591 US.
(street) (city) (state) (zip code) (country)
Executed in Harris County, State of Texas, on the 15th day of July, 20 26.
(month) (year)
Sonya Jones
Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME <i>Sonya Jones</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>660.00</i>
2.	☐ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	☐ SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	☒ SCHEDULE E: LOANS	\$ <i>7483.60</i>
5.	☒ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>6345.96</i>
6.	☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	☐ SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	☒ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ <i>2569.45</i>
9.	☒ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ <i>800.00</i>
10.	☐ SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	☐ SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	☐ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 1 of 1
2 FILER NAME Sonya Jones		3 Filer ID (Ethics Commission Filers)
4 Date 5/13/26	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Linda Kane	7 Amount of contribution (\$) \$500
6 Contributor address; City; State; Zip Code 25722 Kingsland Blvd Katy, TX 77494		
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) CB&A.
Date 10/12/25	Full name of contributor ☐ out-of-state PAC (ID#: _____) Susana Soto	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1000 Louisiana St. Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) H.U.L.
Date	Full name of contributor ☐ out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor ☐ out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
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: 1 of 3	
2 FILER NAME Sonya Jones		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 12,785.00	
5 Date 3/30	6 Full name of contributor ☐ out-of-state PAC (ID#: _____) ALL In Transportation LLC	8 Amount of Contribution \$ 330.00	9 In-kind contribution description Advertising Expense/Pushpins
7 Contributor address; City; State; Zip Code 3710 Legion Houston, TX 77026		☐ Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Owner		11 Employer (FOR NON-JUDICIAL)(See Instructions) ALL In Transportation	
12 Contributor's principal occupation (FOR JUDICIAL) N/A		13 Contributor's job title (FOR JUDICIAL)(See Instructions) N/A	
14 Contributor's employer/law firm (FOR JUDICIAL) N/A		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) N/A	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) N/A			

Date 4/4/26	Full name of contributor ☐ out-of-state PAC (ID#: _____) ALL In Transportation LLC	Amount of Contribution \$ 3360	In-kind contribution description (Banners) Advertising Expense
Contributor address; City; State; Zip Code 3710 Legion Houston TX 77026		☐ Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Owner		Employer (FOR NON-JUDICIAL)(See Instructions) ALL In Transportation	
Contributor's principal occupation (FOR JUDICIAL) N/A		Contributor's job title (FOR JUDICIAL)(See Instructions) N/A	
Contributor's employer/law firm (FOR JUDICIAL) N/A		Law firm of contributor's spouse (if any) (FOR JUDICIAL) N/A	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) N/A			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 2 of 13	
2 FILER NAME Sergio Jones		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 12,785.00	
5 Date 4/6/2020	6 Full name of contributor ☐ out-of-state PAC (ID#: ALL IN Transportation LLC	8 Amount of Contribution \$ \$1200	9 In-kind contribution description Campaign Solicitation (Blockwalkers) Expense.
7 Contributor address; City; State; Zip Code 3710 Legion Houston TX 77026		☐ Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Owner		11 Employer (FOR NON-JUDICIAL)(See Instructions) ALL IN Transportation	
12 Contributor's principal occupation (FOR JUDICIAL) N/A		13 Contributor's job title (FOR JUDICIAL)(See Instructions) N/A	
14 Contributor's employer/law firm (FOR JUDICIAL) N/A		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) N/A	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) N/A			
Date 4/5/2020	Full name of contributor ☐ out-of-state PAC (ID#: ALL IN Transportation LLC	Amount of Contribution \$ \$175.00	In-kind contribution description PAID Signs Advertising Expense
Contributor address; City; State; Zip Code 3710 Legion Houston TX 77026		☐ Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Owner		Employer (FOR NON-JUDICIAL)(See Instructions) ALL IN Transportation	
Contributor's principal occupation (FOR JUDICIAL) N/A		Contributor's job title (FOR JUDICIAL)(See Instructions) N/A	
Contributor's employer/law firm (FOR JUDICIAL) N/A		Law firm of contributor's spouse (if any) (FOR JUDICIAL) N/A	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) N/A.			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <i>Sonyu Jones</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ <i>12,785.⁰⁰</i>	
5 Date <i>5/16/2026</i>	6 Full name of contributor ☐ out-of-state PAC (ID#: <i>CGI Strategic Communications Group</i>	8 Amount of Contribution \$ <i>\$10,720</i>	9 In-kind contribution description <i>Political Consulting, P.R. Management, Mktg. & Social Media Mgmt.</i>
7 Contributor address; City; State; Zip Code <i>2000 K. St. N.W. Washington, DC 20006</i>		☐ Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <i>OWNER</i>		11 Employer (FOR NON-JUDICIAL)(See Instructions) <i>CGI</i>	
12 Contributor's principal occupation (FOR JUDICIAL) <i>N/A</i>		13 Contributor's job title (FOR JUDICIAL)(See Instructions) <i>N/A</i>	
14 Contributor's employer/law firm (FOR JUDICIAL) <i>N/A</i>		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) <i>N/A</i>	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) <i>N/A</i>			

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

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

LOANS

SCHEDULE E

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: <u>1 of 3</u>	
2 FILER NAME <u>Sonyu Jones</u>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED LOANS		\$ <u>7483.00</u>	
5 Date of loan <u>8-31-2025</u>	7 Name of lender ☐ out-of-state PAC (ID#: _____) <u>Sonyu Jones</u>	9 Loan Amount (\$) <u>4533.00</u>	
6 Is lender a financial Institution? Y ☒ N	8 Lender address; City; State; Zip Code <u>6140 Hwy 6 Ste 3260</u> <u>Missouri City, TX 77459</u>	10 Interest rate <u>—</u>	
		11 Maturity date <u>—</u>	
12 Principal occupation / Job title (See Instructions) <u>—</u>		13 Employer (See Instructions) <u>—</u>	
14 Description of Collateral ☒ none		15 ☒ Check if personal funds were deposited into political account (See Instructions)	
16 GUARANTOR INFORMATION <u>N/A</u> ☒ not applicable	17 Name of guarantor <u>N/A</u>	19 Amount Guaranteed (\$) <u>N/A</u>	
18 Guarantor address; City; State; Zip Code <u>N/A</u>			
20 Principal Occupation (See Instructions) <u>N/A</u>		21 Employer (See Instructions) <u>N/A</u>	

Date of loan <u>9-30-25</u>	Name of lender ☐ out-of-state PAC (ID#: _____) <u>Sonyu Jones</u>	Loan Amount (\$) <u>\$450</u>
Is lender a financial Institution? Y ☒ N	Lender address; City; State; Zip Code <u>6140 Hwy 6 Ste. 3260</u> <u>Missouri City, TX 77459</u>	Interest rate <u>—</u>
		Maturity date <u>—</u>
Principal occupation / Job title (See Instructions) <u>—</u>		Employer (See Instructions) <u>—</u>
Description of Collateral ☒ none		☒ Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION ☒ not applicable	Name of guarantor <u>N/A</u>	Amount Guaranteed (\$) <u>N/A</u>
Guarantor address; City; State; Zip Code <u>N/A</u>		
Principal Occupation (See Instructions) <u>N/A</u>		Employer (See Instructions) <u>N/A</u>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS

SCHEDULE E

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

The Instruction Guide explains how to complete this form.				1 Total pages Schedule E: <u>2 of 3</u>	
2 FILER NAME <u>Sonja Jones</u>				3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED LOANS				\$ <u>7483.00</u>	
5 Date of loan <u>3/30/26</u>	7 Name of lender ☐ out-of-state PAC (ID#: _____) <u>Sonja Jones</u>			9 Loan Amount (\$) <u>\$200</u>	
6 Is lender a financial Institution? Y ☐ N ☒	8 Lender address; City; State; Zip Code <u>6140 Hawyle Ste. 3260</u> <u>Missouri City, TX 77459</u>			10 Interest rate <u>—</u>	
				11 Maturity date <u>—</u>	
12 Principal occupation / Job title (See Instructions) <u>—</u>			13 Employer (See Instructions) <u>—</u>		
14 Description of Collateral ☒ none			15 ☒ Check if personal funds were deposited into political account (See Instructions)		
16 GUARANTOR INFORMATION <u>N/A</u> ☒ not applicable		17 Name of guarantor <u>N/A</u>		19 Amount Guaranteed (\$) <u>N/A</u>	
		18 Guarantor address; City; State; Zip Code <u>N/A</u>			
20 Principal Occupation (See Instructions) <u>N/A</u>			21 Employer (See Instructions) <u>N/A</u>		

Date of loan <u>3/30/26</u>	Name of lender ☐ out-of-state PAC (ID#: _____) <u>Sonja Jones</u>	Loan Amount (\$) <u>\$1300</u>
Is lender a financial Institution? Y ☐ N ☒	Lender address; City; State; Zip Code <u>6140 Hawyle Ste. 3260</u> <u>Missouri City, TX 77459</u>	Interest rate <u>—</u>
		Maturity date <u>—</u>
Principal occupation / Job title (See Instructions) <u>—</u>		Employer (See Instructions) <u>—</u>
Description of Collateral ☒ none		☒ Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION ☒ not applicable	Name of guarantor <u>N/A</u>	Amount Guaranteed (\$) <u>N/A</u>
	Guarantor address; City; State; Zip Code <u>N/A</u>	
Principal Occupation (See Instructions) <u>N/A</u>		Employer (See Instructions) <u>N/A</u>

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

LOANS

SCHEDULE E

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 3 of 3	
2 FILER NAME Sonja Jones		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED LOANS		\$ 7483.00	
5 Date of loan 4/6/26	7 Name of lender ☐ out-of-state PAC (ID#: _____) Sonja Jones	9 Loan Amount (\$) \$1000	
6 Is lender a financial Institution? Y ☐ N ☒	8 Lender address; City; State; Zip Code 6140 Hwy 6 Ste. 3260 Missouri City, TX 77459	10 Interest rate	
		11 Maturity date	
12 Principal occupation / Job title (See Instructions) —		13 Employer (See Instructions) —	
14 Description of Collateral ☒ none		15 ☒ Check if personal funds were deposited into political account (See Instructions)	
16 GUARANTOR INFORMATION ☒ not applicable	17 Name of guarantor N/A		19 Amount Guaranteed (\$) N/A
	18 Guarantor address; City; State; Zip Code N/A		
20 Principal Occupation (See Instructions) N/A		21 Employer (See Instructions) N/A	

Date of loan	Name of lender ☐ out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial Institution? Y ☐ N ☐	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral ☐ none		☐ Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION ☐ not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
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: <u>9/10</u>		2 FILER NAME <u>Sonya Jones</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>9/2/25</u>		5 Payee name <u>Home Depot</u>			
6 Amount (\$) <u>\$23.47</u>		7 Payee address; City; State; Zip Code <u>5900 Highway 6</u> <u>Missouri City, TX 77459</u> ☐ Check if individual's residence address.			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>		(b) Description <u>T- Stakes</u>		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name <u>Sonya Jones</u>		Office sought <u>County Clerk</u>	
				Office held <u>Trustee</u>	
Date <u>9/2/25</u>		Payee name <u>Elyse Bailey</u>			
Amount (\$) <u>\$1180.00</u>		Payee address; City; State; Zip Code <u>P.O. Box 107</u> <u>Kingshill, VI 00851</u> ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>		Description <u>Graphics Design</u>		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name <u>Sonya Jones</u>		Office sought <u>County Clerk</u>	
				Office held <u>Trustee</u>	
Date <u>9/10/25</u>		Payee name <u>Banners On The Cheap</u>			
Amount (\$) <u>\$78.80</u>		Payee address; City; State; Zip Code <u>11550 Stonehollow Dr.</u> <u>Austin TX 78758</u> ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>		Description <u>Retractable Banner</u>		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name <u>Sonya Jones</u>		Office sought <u>County Clerk</u>	
				Office held <u>Trustee</u>	

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: <u>10</u>		2 FILER NAME <u>Sonya Jones</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>9/10/25</u>		5 Payee name <u>Milli Reed</u>			
6 Amount (\$) <u>\$500.00</u>		7 Payee address; City; State; Zip Code ☐ Check if individual's residence address.			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Event Expense</u>		(b) Description <u>Campaign Kickoff Decor.</u>		
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name <u>Sonya Jones</u>			
		Office sought <u>County Clerk</u>		Office held <u>Trustee</u>	
Date <u>9/12/25</u>		Payee name <u>Amazon</u>			
Amount (\$) <u>\$14.99</u>		Payee address; City; State; Zip Code ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Event Expense</u>		Description <u>Adjustable Microphone Stand</u>		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name <u>Sonya Jones</u>			
		Office sought <u>County Clerk</u>		Office held <u>Trustee</u>	
Date <u>9/17/25</u>		Payee name <u>Amazon</u>			
Amount (\$) <u>\$83.63</u>		Payee address; City; State; Zip Code ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Event Expense</u>		Description <u>Podium Stand and Microphone</u>		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name <u>Sonya Jones</u>			
		Office sought <u>County Clerk</u>		Office held <u>Trustee</u>	

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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: 9/10		2 FILER NAME Sonya Jones		3 Filer ID (Ethics Commission Filers)	
4 Date 9-17-25		5 Payee name Office Depot			
6 Amount (\$) \$33.61		7 Payee address; City; State; Zip Code 5766 Highway 6 Missouri City TX 77459 ☐ Check if individual's residence address.			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense Advertising Expense		(b) Description Campaign Kickoff Flyers.		
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held Sonya Jones County Clerk Trustee			
Date 9/17/25		Payee name Universal Signs & Banners			
Amount (\$) \$90.00		Payee address; City; State; Zip Code 7825 Highway 6. Houston TX 77083 ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Campaign Banner		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held Sonya Jones County Clerk Trustee			
Date 9/22/25		Payee name Universal Signs & Banners			
Amount (\$) \$25.00		Payee address; City; State; Zip Code 7825 Highway 6 Houston TX 77083 ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Replacement Sticker		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held Sonya Jones County Clerk Trustee			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 9/10		2 FILER NAME Sonya Jones		3 Filer ID (Ethics Commission Filers)	
4 Date 9/23/25		5 Payee name Universal Sign			
6 Amount (\$) \$27.00		7 Payee address; City; State; Zip Code 7825 Highway 6 Houston TX 77083 ☐ Check if individual's residence address.			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Change Order.		
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check If Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Sonya Jones Office sought County Clerk Office held Trustee			
Date 9/23/25		Payee name U2 Marketing			
Amount (\$) \$26.95		Payee address; City; State; Zip Code 5900 Bingle Rd. Houston TX 77092 ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Sign Purchase		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check If Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Sonya Jones Office sought County Clerk Office held Trustee			
Date 9/25/25		Payee name Anytime Mailbox			
Amount (\$) \$10.81		Payee address; City; State; Zip Code 6140 Highway 6 Missouri City TX 77459 ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other		Description Postal		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check If Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Sonya Jones Office sought County Clerk Office held Trustee			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: <u>010</u>		2 FILER NAME <u>Sonya Jones</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>9/25/25</u>		5 Payee name <u>Anytime Mailbox</u>			
6 Amount (\$) <u>\$25.00</u>		7 Payee address; City; State; Zip Code <u>6140 Highway 6</u> ☐ Check if individual's residence address. <u>Missouri City TX 77459</u>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Other</u>		(b) Description <u>Postal Verification and Notary.</u>		
	(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 <u>Sonya Jones</u>			
		Office sought <u>County Clerk</u>		Office held <u>Trustee</u>	
Date <u>9/30/25</u>		Payee name <u>Royal Branding</u>			
Amount (\$) <u>\$220.00</u>		Payee address; City; State; Zip Code ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>		Description <u>T-SHIRTS</u>		
	☐ 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 <u>Sonya Jones</u>			
		Office sought <u>County Clerk</u>		Office held <u>Trustee</u>	
Date <u>9/31/25</u>		Payee name <u>Go Daddy</u>			
Amount (\$) <u>\$9.48</u>		Payee address; City; State; Zip Code ☐ Check if individual's residence address. <u>100 S. Mill Ave</u> <u>Tempe AZ 85281</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>		Description <u>Web Mail Hosting</u>		
	☐ 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 <u>Sonya Jones</u>			
		Office sought <u>County Clerk</u>		Office held <u>Trustee</u>	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: <u>10</u>		2 FILER NAME <u>Sonya Jones</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>10/14/25</u>		5 Payee name <u>LIZ Marketing</u>			
6 Amount (\$) <u>\$118.62</u>		7 Payee address: <u>5900 Bingle Rd</u> City: State: Zip Code			
		☐ Check if individual's residence address.			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <u>Advertising</u>		(b) Description <u>Push Cards</u>	
		(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 <u>Sonya Jones</u>		Office sought <u>County Clerk</u>	
				Office held <u>Trustee</u>	
Date <u>10/15/25</u>		Payee name <u>A'Lings Restaurant</u>			
Amount (\$) <u>\$500.00</u>		Payee address: <u>6542 Highway 90</u> City: State: Zip Code			
		☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <u>Food/Beverage Expense</u> <u>Event Expense</u>		Description <u>Campaign kickoff Catering</u>	
		☐ 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 <u>Sonya Jones</u>		Office sought <u>County Clerk</u>	
				Office held <u>Trustee</u>	
Date <u>10/20/25</u>		Payee name <u>Bank of Texas</u>			
Amount (\$) <u>\$5.60</u>		Payee address: <u>5500 Kirby</u> City: State: Zip Code			
		☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <u>Accounting / Banking</u>		Description <u>Service Fee</u>	
		☐ 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 <u>Sonya Jones</u>		Office sought <u>County Clerk</u>	
				Office held <u>Trustee</u>	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 9/10		2 FILER NAME Sonya Jones		3 Filer ID (Ethics Commission Filers)	
4 Date 11/17/25		5 Payee name Civitech			
6 Amount (\$) \$53.63		7 Payee address; 21750 Hardy Oak Blvd. City; State; Zip Code San Antonio TX 78258 ☐ Check if individual's residence address.			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description Campaign Canvassing.		
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Sonya Jones		Office sought County Clerk	
				Office held Trustee	
Date 11/17/25		Payee name Anytime Mail box			
Amount (\$) \$13.34		Payee address; 6140 Highway 6 City; State; Zip Code Missouri City TX 77459 ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other		Description Postal Expense		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Sonya Jones		Office sought County Clerk	
				Office held Trustee	
Date 11/20/25		Payee name Bank of Texas			
Amount (\$) \$5.00		Payee address; 5500 Kirby City; State; Zip Code Houston TX 77008 ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking		Description Service Fee		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Sonya Jones		Office sought County Clerk	
				Office held Trustee	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 10		2 FILER NAME Sonya Jones		3 Filer ID (Ethics Commission Filers)	
4 Date 11/21/25		5 Payee name Fort Bend Democratic Party/			
6 Amount (\$) \$1250.00		7 Payee address; 13515 Southwest Fwy. City; State; Zip Code Sugar Land TX 77478 ☐ Check if individual's residence address.			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Filing Fee		
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Sonya Jones Office sought County Clerk Office held Trustee			
Date 11/21/25		Payee name Bank of Texas			
Amount (\$) \$10.00		Payee address; 5500 Kieby City; State; Zip Code Houston TX 77008 ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting / Banking		Description Cashier's Check Fee		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Sonya Jones Office sought County Clerk Office held Trustee			
Date 12/17/25		Payee name Civitech			
Amount (\$) \$53.63		Payee address; 21750 Hardy Oak Blvd. City; State; Zip Code San Antonio, TX 78258 ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting		Description Campaign Canvassing.		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Sonya Jones Office sought County Clerk Office held Trustee			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: <u>7/0</u>		2 FILER NAME <u>Sonya Jones</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>12/17/25</u>		5 Payee name <u>Bank of Texas</u>			
6 Amount (\$) <u>\$5.00</u>		7 Payee address; City; State; Zip Code <u>5500 Kirby</u> <u>Houston TX 77008</u> ☐ Check if individual's residence address.			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Accounting/Banking</u>		(b) Description <u>Service Fee</u>		
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name <u>Sonya Jones</u> Office sought <u>County Clerk</u> Office held <u>Trustee</u>					
Date <u>1/21/26</u>		Payee name <u>Bank of Texas</u>			
Amount (\$) <u>\$5.00</u>		Payee address; City; State; Zip Code <u>5500 Kirby</u> <u>Houston TX 77008</u> ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Accounting/Banking</u>		Description <u>Service Fee</u>		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name <u>Sonya Jones</u> Office sought <u>County Clerk</u> Office held <u>Trustee</u>					
Date <u>1/25/26</u>		Payee name <u>Anytime Mailbox</u>			
Amount (\$) <u>\$13.34</u>		Payee address; City; State; Zip Code <u>6140 Hwy 6</u> <u>Missouri City TX 77459</u> ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Other</u>		Description <u>Postal Expense</u>		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name <u>Sonya Jones</u> Office sought <u>County Clerk</u> Office held <u>Trustee</u>					

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 10	2 FILER NAME Songyi Jones	3 Filer ID (Ethics Commission Filers)
4 Date 1/29/26	5 Payee name Elyse Bailey	
6 Amount (\$) \$50.00	7 Payee address: P.O. Box 107 ☐ Check if individual's residence address.	City; State; Zip Code Kingshill, VI 00851
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Custom design sign & upload to homepage
	(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 Songyi Jones	Office sought County Clerk
		Office held Trustee
Date 1/29/26	Payee name U2 Marketing	
Amount (\$) \$122.34	Payee address: 5900 Bingle Rd ☐ Check if individual's residence address.	City; State; Zip Code Houston TX 77092
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Push Cards
	☐ 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 Songyi Jones	Office sought County Clerk
		Office held Trustee
Date 1/31/26	Payee name Go Daddy	
Amount (\$) \$9.48	Payee address: 160 S. Mill Ave ☐ Check if individual's residence address.	City; State; Zip Code Tempe AZ 85281
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Web Mail Hosting
	☐ 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 Songyi Jones	Office sought County Clerk
		Office held Trustee

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: <u>1 of 10</u>		2 FILER NAME <u>Sonya Jones</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>2-22-2026</u>		5 Payee name <u>Bank of Texas</u>			
6 Amount (\$) <u>\$5.00</u>		7 Payee address; City; State; Zip Code <u>5500 Kirby</u> <u>Houston</u> <u>TX</u> <u>77008</u> ☐ Check if individual's residence address.			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Accounting/Banking</u>		(b) Description <u>Service Fee</u>		
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name <u>Sonya Jones</u>		Office sought <u>County Clerk</u>	Office held <u>Trustee</u>
Date <u>2-25-26</u>		Payee name <u>Anytime Mailbox</u>			
Amount (\$) <u>\$13.34</u> <u>\$122.34</u>		Payee address; City; State; Zip Code <u>6140 Hwy 6.</u> <u>Missouri City</u> <u>TX</u> <u>77459</u> ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Other-Postal</u>		Description <u>Postal Expense</u>		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name <u>Sonya Jones</u>		Office sought <u>County Clerk</u>	Office held <u>Trustee</u>
Date <u>2-22-2026</u>		Payee name <u>Civitech</u>			
Amount (\$) <u>\$53.63</u>		Payee address; City; State; Zip Code <u>21750 Hardy Oak Blvd</u> <u>SAN Antonio, TX</u> <u>78258</u> ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Consulting</u>		Description <u>Campaign Canvassing</u>		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name <u>Sonya Jones</u>		Office sought <u>County Clerk</u>	Office held <u>Trustee</u>

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 of 2		2 FILER NAME Sonya Jones		3 Filer ID (Ethics Commission Filers)	
4 Date 2-28-26		5 Payee name Go Daddy			
6 Amount (\$) \$9.48		7 Payee address; 100 S. Mill		City; State; Zip Code Tempe AZ 85281	
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Web email Hosting	
		(c) ☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Sonya Jones		Office sought County Clerk	
				Office held Trustee	
Date 3-21-2026		Payee name Civitech			
Amount (\$) \$53.63		Payee address; 21750 Hardy Oak Blvd.		City; State; Zip Code San Antonio TX 78258	
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting		Description Campaign Canvassing	
		☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Sonya Jones		Office sought County Clerk	
				Office held Trustee	
Date 3-22-2026		Payee name Anytime mailbox			
Amount (\$) \$13.34		Payee address; 6140 Highway 6		City; State; Zip Code Missouri City TX 77459	
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Other - Postal		Description Postal Expense	
		☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Sonya Jones		Office sought County Clerk	
				Office held Trustee	

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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: 3 of 3		2 FILER NAME Sonya Jones		3 Filer ID (Ethics Commission Filers)	
4 Date 3-23-2026		5 Payee name Bank of Texas			
6 Amount (\$) \$5.00		7 Payee address; City; State; Zip Code 5500 Kirby Houston TX 77008 ☐ Check if individual's residence address.			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Service Fee		
	(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 Sonya Jones		Office sought County Clerk	
				Office held Trustee	
Date 3-28-26		Payee name Go Daddy			
Amount (\$) \$9.48		Payee address; City; State; Zip Code 100 S. Mill Tempe AZ 85281 ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Webmail Hosting		
	☐ 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 Sonya Jones		Office sought County Clerk	
				Office held Trustee	
Date 4-1-26		Payee name LIZ Marketing			
Amount (\$) \$43.72		Payee address; City; State; Zip Code 5900 Bingle Rd. Houston TX 77092 ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description 4x8 Sign Purchase		
	☐ 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 Sonya Jones		Office sought County Clerk	
				Office held Trustee	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4 of 8		2 FILER NAME Sonya Jones		3 Filer ID (Ethics Commission Filers)	
4 Date 4-1-2026		5 Payee name U2 Marketing			
6 Amount (\$) \$103.16		7 Payee address: 5900 Bingle		City; Houston	State; Zip Code TX 77092
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Push cards	
		(c) ☐ Check if individual's residence address.			
		☐ 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 Sonya Jones		Office sought County Clerk	Office held Trustee
Date 4/1/2026		Payee name Amazon			
Amount (\$) \$16.83		Payee address:		City;	State; Zip Code
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description Zip Ties	
		☐ Check if individual's residence address.			
		☐ 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 Sonya Jones		Office sought County Clerk	Office held Trustee
Date 4/6/2026		Payee name U2 Marketing			
Amount (\$) \$766.17		Payee address: 5900 Bingle		City; Houston	State; Zip Code TX 77092
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Signs		Description 4x4 Sign Purchase	
		☐ Check if individual's residence address.			
		☐ 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 Sonya Jones		Office sought County Clerk	Office held Trustee

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5 of 8		2 FILER NAME Sonya Jones		3 Filer ID (Ethics Commission Filers)	
4 Date 4-6-2026		5 Payee name U2 Marketing			
6 Amount (\$) \$127.49		7 Payee address; City; State; Zip Code 5900 Bingle Houston TX 77092 ☐ Check if individual's residence address.			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description 4x8 Signs		
	☐ 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 Sonya Jones		Office sought County Clerk	Office held Trustee
Date 4-9-2026		Payee name Amazon			
Amount (\$) \$64.32		Payee address; City; State; Zip Code ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description T- Post Driver Equipment.		
	☐ 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 Sonya Jones		Office sought County Clerk	Office held Trustee
Date 4-10-2026		Payee name Dollar Tree			
Amount (\$) \$17.86		Payee address; City; State; Zip Code 20228 Fort Bend Pkwy Missouri City, TX 77459 ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Zipties & Patriotic Bows		
	☐ 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 Sonya Jones		Office sought County Clerk	Office held Trustee

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 6 of 8.		2 FILER NAME Sonya Jones		3 Filer ID (Ethics Commission Filers)	
4 Date 4-10-26		5 Payee name Civitech			
6 Amount (\$) \$53.63		7 Payee address; 21750 Hardy Oak		City; State; Zip Code San Antonio TX 78258	
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Campaign Canvassing	
		(c) ☐ Check if individual's residence address.		☐ Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Sonya Jones		Office sought County Clerk	
				Office held Trustee	
Date 4-12-2026		Payee name Amazon			
Amount (\$) \$13.93		Payee address;		City; State; Zip Code	
		☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description Mailing Labels	
		☐ 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 Sonya Jones		Office sought County Clerk	
				Office held Trustee	
Date 4.22.26		Payee name Bank of Texas			
Amount (\$) \$5.00		Payee address; 5500 Kirby		City; State; Zip Code Houston TX 77008	
		☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description Service Fee	
		☐ 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 Sonya Jones		Office sought County Clerk	
				Office held Trustee	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7 of 8		2 FILER NAME Sonya Jones		3 Filer ID (Ethics Commission Filers)	
4 Date 4-21-26		5 Payee name Campaign Verify			
6 Amount (\$) \$95.00		7 Payee address; City; State; Zip Code 1215 31st N.W. Washington DC 20007 ☐ Check if individual's residence address.			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising/Consulting Expense		(b) Description National Campaign Verification and Validation		
	(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 Sonya Jones		Office sought County Clerk		Office held Trustee	
Date 4-22-26		Payee name U2C Marketing			
Amount (\$) \$145.45		Payee address; City; State; Zip Code 5900 Bingle Houston TX 77092 ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description 4x8 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 Sonya Jones		Office sought County Clerk		Office held Trustee	
Date 4-28-26		Payee name Go Daddy			
Amount (\$) \$9.48		Payee address; City; State; Zip Code 100 S.mill Tempe AZ 85281 ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Webmail Hosting		
	☐ 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 Sonya Jones		Office sought County Clerk		Office held Trustee	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: <u>8 of 8</u>		2 FILER NAME <u>Sonyia Jones</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>5-10-2026</u>		5 Payee name <u>Civitech</u>			
6 Amount (\$) <u>\$53.63</u>		7 Payee address; <u>21750 Hardy Oak Blvd</u> City; State; Zip Code <u>SAN Antonio TX 78258</u> ☐ Check if individual's residence address.			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Consulting Expense</u>		(b) Description <u>Campaign Canvassing</u>		
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name <u>Sonyia Jones</u> Office sought <u>County Clerk</u> Office held <u>Trustee</u>					
Date <u>5-8-2026</u>		Payee name <u>Raise the Money</u>			
Amount (\$) <u>\$11.00</u>		Payee address; <u>1215 31st. Street N.W.</u> City; State; Zip Code <u>Washington, DC 20001</u> ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Fees</u>		Description <u>Service Fee</u>		
	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name <u>Sonyia C. Jones</u> Office sought <u>County Clerk</u> Office held <u>Trustee</u>					
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name Office sought Office held					

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 9 of 10		2 FILER NAME Sonya Jones		3 Filer ID (Ethics Commission Filers)	
4 Date 6-10-2026		5 Payee name Civitech			
6 Amount (\$) \$53.63		7 Payee address; City; State; Zip Code 21750 Nardy Oak Blvd SAN ANTONIO, TX 78258 ☐ Check if individual's residence address.			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description Canvassing		
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Sonya Jones		Office sought County Clerk	Office held Trustee
Date 5-28-26		Payee name Go Daddy			
Amount (\$) \$948		Payee address; City; State; Zip Code 100 S. Mill Tempe AZ 85281 ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Webmail Hosting		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Sonya Jones		Office sought County Clerk	Office held Trustee
Date 5-22-26		Payee name Anytime Mailbox			
Amount (\$) \$13.34		Payee address; City; State; Zip Code 6140 Highway 6 Missouri City, TX 77459 ☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other Postal		Description Postal Expense		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Sonya Jones		Office sought County Clerk	Office held Trustee

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <i>10 of 10</i>		2 FILER NAME <i>Sonyu Jones</i>		3 Filer ID (Ethics Commission Filers)				
4 Date <i>6-22-26</i>		5 Payee name <i>Anytime Mailbox</i>						
6 Amount (\$) <i>\$13.34</i>		7 Payee address; City; State; Zip Code <i>6140 Highway 16 Missouri City TX 77459</i> ☐ Check if individual's residence address.						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Postal</i>		(b) Description <i>Postal Expense</i>					
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense							
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;">Candidate / Officeholder name <i>Sonyu Jones</i></td> <td style="width:33%; border: none;">Office sought <i>County Clerk</i></td> <td style="width:33%; border: none;">Office held <i>Trustee</i></td> </tr> </table>						Candidate / Officeholder name <i>Sonyu Jones</i>	Office sought <i>County Clerk</i>	Office held <i>Trustee</i>
Candidate / Officeholder name <i>Sonyu Jones</i>	Office sought <i>County Clerk</i>	Office held <i>Trustee</i>						
Date <i>6-28-26</i>		Payee name <i>Go Daddy</i>						
Amount (\$) <i>\$9.48</i>		Payee address; City; State; Zip Code <i>100 S. Milwauwaukee WI 53228</i> ☐ Check if individual's residence address.						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>		Description <i>Web Mail Hosting</i>					
	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense							
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;">Candidate / Officeholder name <i>Sonyu Jones</i></td> <td style="width:33%; border: none;">Office sought <i>County Clerk</i></td> <td style="width:33%; border: none;">Office held <i>Trustee</i></td> </tr> </table>						Candidate / Officeholder name <i>Sonyu Jones</i>	Office sought <i>County Clerk</i>	Office held <i>Trustee</i>
Candidate / Officeholder name <i>Sonyu Jones</i>	Office sought <i>County Clerk</i>	Office held <i>Trustee</i>						
Date <i>7-10-2026</i>		Payee name <i>Civitech</i>						
Amount (\$) <i>\$53.63</i>		Payee address; City; State; Zip Code <i>21750 Hardy Oak San Antonio TX 78258</i> ☐ Check if individual's residence address.						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Consulting Expense</i>		Description <i>Canvassing</i>					
	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense							
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;">Candidate / Officeholder name <i>Sonyu Jones</i></td> <td style="width:33%; border: none;">Office sought <i>County Clerk</i></td> <td style="width:33%; border: none;">Office held <i>Trustee</i></td> </tr> </table>						Candidate / Officeholder name <i>Sonyu Jones</i>	Office sought <i>County Clerk</i>	Office held <i>Trustee</i>
Candidate / Officeholder name <i>Sonyu Jones</i>	Office sought <i>County Clerk</i>	Office held <i>Trustee</i>						

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4: 1 of 1	2 FILER NAME Songu Jones	3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 2569.45
5 CREDIT CARD ISSUER	Name of financial institution American Express	
6 PAYMENT	(a) Amount Charged \$ 69.45	(b) Date Expenditure Charged 3/30/26
	(c) Date(s) Credit Card Issuer Paid 4/26/2026	
7 PAYEE	(a) Payee name UZ Marketing	(b) Payee address; City, State, Zip Code 5900 Bingle Houston, TX 77092
	☐ Check if individual's residence address.	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Road Signs
☒ Political ☐ Non-Political	(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 Songu Jones	
	Office Sought FBC Clerk	Office Held FBISD - Trustee
PAYMENT	(a) Amount Charged \$ 2500	(b) Date Expenditure Charged 5/13/26
	(c) Date(s) Credit Card Issuer Paid	
PAYEE	(a) Payee name Connecto	(b) Payee address; City, State, Zip Code 11331 Richmond Houston, TX 77082
	☐ Check if individual's residence address.	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description SMS Campaign
☒ Political ☐ Non-Political	(c) ☐ 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 Songu Jones	
	Office Sought FBC-CLERK	Office Held FBISD - Trustee
PAYMENT	(a) Amount Charged \$	(b) Date Expenditure Charged
	(c) Date(s) Credit Card Issuer Paid	
PAYEE	(a) Payee name	(b) Payee address; City, State, Zip Code
	☐ Check if individual's residence address.	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
☐ Political ☐ Non-Political	(c) ☐ 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 PERSONAL FUNDS

SCHEDULE G

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: <u>(1)</u>		2 FILER NAME <u>Sonyal Jones</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>5/16/2026</u>		5 Payee name <u>Rise Virtual Staffing</u>			
6 Amount (\$) <u>\$800.00</u> ☐ Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code <u>649 Surrey Lane Flower Mound TX 75022</u> ☐ Check if individual's residence address.			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>		(b) Description <u>Virtual Assistants & A.I. Phone Banking</u>		
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name <u>Sonyal Jones</u>		Office sought <u>FBC-Clerk</u>	
				Office held <u>FBIISD - Trustee</u>	
Amount (\$)		Payee address;		City; State; Zip Code	
☐ Reimbursement from political contributions intended		☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name		Office sought	
				Office held	
Amount (\$)		Payee address;		City; State; Zip Code	
☐ Reimbursement from political contributions intended		☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name		Office sought	
				Office held	
Amount (\$)		Payee address;		City; State; Zip Code	
☐ Reimbursement from political contributions intended		☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name		Office sought	
				Office held	
Amount (\$)		Payee address;		City; State; Zip Code	
☐ Reimbursement from political contributions intended		☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

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