

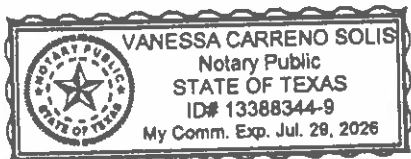
CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME		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)	\$ 750.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,671.48
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$ 512.32
	4. TOTAL POLITICAL EXPENDITURES	\$ 4,669.72
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 491.80
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,790.00

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.

Shirley J. McKellar
Signature of Candidate or Officeholder



Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Shirley Jo McKellar this the 9th day of April, 2026, to certify which, witness my hand and seal of office

Vanessa Solis Signature of officer administering oath
Vanessa Carreno-Solis Printed name of officer administering oath
Assistant to City Attorney Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Shirley J. McKellar, and my date of birth is 10051947
 My address is 2711 Staley Drive NA, Tyler, Texas, 75702, US
(street) (city) (state) (zip code) (country)
 Executed in Smith County, State of Texas, on the _____ day of _____, 2026
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Shirley J. McKellar		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 4,671.48
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 18,000.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00
4. SCHEDULE E: LOANS		\$ 1,790.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 4,669.72
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 1,790.00
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$ 0.00
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$ 0.00
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$ 0.00
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 0.00
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$ 0.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Shirley J. McKellar		3 Filer ID (Ethics Commission Filers)
4 Date 01/06/2026	5 Full name of contributor out-of-state PAC (ID# _____) Pamela Erwin	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 3111 Seaton Street Tyler TX 75701		
8 Principal occupation / Job title (See Instructions) Retired Educator		9 Employer (See Instructions) NA
Date 02/11/2026	Full name of contributor out-of-state PAC (ID# _____) Dr. Chiagozie U. Nwauruba	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 2962 Northlake Circle Tyler TX 75703		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) University of Texas Health Science Center
Date 02/03/2026	Full name of contributor out-of-state PAC (ID# _____) Glynda Mayo Hall	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 14301 Winding Woods Court Centerville VA 20120		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/27/2026	Full name of contributor out-of-state PAC (ID# _____) Liz-Mary Wilson	Amount of contribution (\$) 1,000.00
Contributor address; City; State; Zip Code 8588 Pleasant Hill Circle Tyler TX 75707		
Principal occupation / Job title (See Instructions) Retired U. S. Army		Employer (See Instructions) NA

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Shirley J. McKEEVAR</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2/21/26</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>AMELIA DAVIS</i>	7 Amount of contribution (\$) <i>30.00</i>
6 Contributor address; City; State; Zip Code <i>Post Office 120345 Tyler TX 75712</i>		
8 Principal occupation / Job title (See Instructions) <i>NA</i>		9 Employer (See Instructions) <i>NA</i>
Date <i>3/24/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Cash Deposit</i>	Amount of contribution (\$) <i>116.00</i>
Contributor address; City; State; Zip Code <i>JAR</i>		
Principal occupation / Job title (See Instructions) <i>NA</i>		Employer (See Instructions) <i>NA</i>
Date <i>48.14</i> <i>2/25/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>ACTBLUE</i>	Amount of contribution (\$) <i>48.14</i>
Contributor address; City; State; Zip Code <i>ST-POY2 EX 7M 7EO CCD</i>		
Principal occupation / Job title (See Instructions) <i>NA</i>		Employer (See Instructions) <i>NA</i>
Date <i>2/3/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>ACTBLUE</i>	Amount of contribution (\$) <i>967.27</i>
Contributor address; City; State; Zip Code <i>ST-L5 N2V5N 1C N8 CCD</i>		
Principal occupation / Job title (See Instructions) <i>NA</i>		Employer (See Instructions) <i>NA</i>

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Shirley J. McKEWBAR</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>1/7/2026</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>ATM Cash Deposit</i>	7 Amount of contribution (\$) <i>80.00</i>
6 Contributor address; City; State; Zip Code <i>140 S. Southwest Loop Tyler TX 75761</i>		
8 Principal occupation / Job title (See Instructions)		9 <input checked="" type="checkbox"/> Employer (See Instructions)
Date <i>2/19/2026</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>ACT BLUE ST-GOB 2X 2R 9.1087</i>	Amount of contribution (\$) <i>48.14</i>
Contributor address; City; State; Zip Code <i>CCD ID: 1800948598</i>		
Principal occupation / Job title (See Instructions) <i>NA</i>		Employer (See Instructions) <i>NA</i>
Date <i>2/2/2026</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>ACT BLUE ST-Y6G9D2B3A5CB</i>	Amount of contribution (\$) <i>212.39</i>
Contributor address; City; State; Zip Code <i>ID: 1800948598</i>		
Principal occupation / Job title (See Instructions) <i>NA</i>		Employer (See Instructions) <i>NA</i>
Date <i>1/23/2026</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>ACT BLUE ST-K878Z3V.115.Z011.2</i>	Amount of contribution (\$) <i>96.52</i>
Contributor address; City; State; Zip Code <i>CCD ID: 1800948598</i>		
Principal occupation / Job title (See Instructions) <i>NA</i>		Employer (See Instructions) <i>NA</i>
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Shirley J. McKEBBAR</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>1/15/2025</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>ACT BLUE ST-951466R9D6L9</i>	7 Amount of contribution (\$) <i>23.95</i>
6 Contributor address; City; State; Zip Code <i>CCD ID: 1800948598</i>		
8 Principal occupation / Job title (See Instructions) <i>NA</i>		9 Employer (See Instructions) <i>NA</i>
Date <i>1/9/2026</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Deposit ID Number 144949</i>	Amount of contribution (\$) <i>400.00</i>
Contributor address; City; State; Zip Code <i>Rent - Graves</i>		
Principal occupation / Job title (See Instructions) <i>NA</i>		Employer (See Instructions) <i>NA</i>
Date <i>3/25/2026</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>ACT BLUE ST-Y06BX8W4M9L9</i>	Amount of contribution (\$) <i>23.95</i>
Contributor address; City; State; Zip Code <i>CCD ID: 1800948598</i>		
Principal occupation / Job title (See Instructions) <i>NA</i>		Employer (See Instructions) <i>NA</i>
Date <i>3/24/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>ACT BLUE</i>	Amount of contribution (\$) <i>36.00</i>
Contributor address; City; State; Zip Code <i>140 S. Southwest Loop 323 Tyler TX 75701</i>		
Principal occupation / Job title (See Instructions) <i>NA</i>		Employer (See Instructions) <i>NA</i>
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Shirley J. McKeelbar</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/24/2026</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>ATM Cash Deposit</i>	7 Amount of contribution (\$) <i>40.00</i>
6 Contributor address; City; State; Zip Code <i>140 S. SW Loop 323 Tyler TX 75701</i>		
8 Principal occupation / Job title (See Instructions) <i>NA</i>		9 Employer (See Instructions) <i>NA</i>
Date <i>3/24/2026</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>ATM Cash Deposit</i>	Amount of contribution (\$) <i>80.00</i>
Contributor address; City; State; Zip Code <i>140 S SW Loop 323 Tyler TX 75701</i>		
Principal occupation / Job title (See Instructions) <i>NA</i>		Employer (See Instructions) <i>NA</i>
Date <i>3/11/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Deposit ID Number 897083</i>	Amount of contribution (\$) <i>750.00</i>
Contributor address; City; State; Zip Code <i>140 S SW Loop 323 Tyler TX 75701</i>		
Principal occupation / Job title (See Instructions) <i>NA</i>		Employer (See Instructions) <i>NA</i>
Date <i>3/4/26</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>ACT BLUE ST-69NDR4B8H6F4</i>	Amount of contribution (\$) <i>19.12</i>
Contributor address; City; State; Zip Code <i>CCD ID: 1800948598</i>		
Principal occupation / Job title (See Instructions) <i>NA</i>		Employer (See Instructions) <i>NA</i>
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | 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: 9	2 FILER NAME Shirley J. McKellar	3 Filer ID (Ethics Commission Filers)
4 Date: 1/27/2026	5 Payee name: CCI Constant Contact Debit Card	
6 Amount (\$): 37.31	7 Payee address; City; State; Zip Code 855-2295506 MA <input type="checkbox"/> Check if individual's residence address.	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) POLLING EXPENSE	(b) Description EMAILING
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: Shirley J. McKellar Office sought: Mayor Office held: Former City Council	
Date: 1/13/2026	Payee name: Wal Mart Super Center	
Amount (\$): 33.30	Payee address; City; State; Zip Code 5700 S. BROADWAY Tylen TX 75701 <input type="checkbox"/> Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) POLLING EXPENSES	Description GAS
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: Shirley J. McKellar Office sought: Mayor Office held: Former City Council	
Date: 1/8/2026	Payee name: Sam's Club	
Amount (\$): 60.95	Payee address; City; State; Zip Code # 8284 SAVID CAMPBELL PKWY Tylen TX 75701 <input type="checkbox"/> Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) POLLING EXPENSES	Description GAS
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: Shirley J. McKellar Office sought: Mayor Office held: Former City Council	

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <i>Shirley J. McKellar</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>1/7/2026</i>		5 Payee name <i>DOLLAR-GENERAL</i>			
6 Amount (\$) <i>30.03</i>		7 Payee address: <i>#3453 STORE</i>		City: <i>Tyler</i>	State: <i>TX</i>
		Zip Code <i>75702</i>		Check if individual's residence address.	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Event Expense</i>		(b) Description <i>Decorations, Etc.</i>		
	(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 <i>Shirley J. McKellar</i>		Office sought <i>Mayor</i>	Office held <i>Former City Council</i>
Date <i>1/6/2026</i>		Payee name <i>Murphy USA</i>			
Amount (\$) <i>46.25</i>		Payee address: <i>7841 S. BROADWAY</i>		City: <i>Tyler</i>	State: <i>TX</i>
		Zip Code <i>75701</i>		Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>POLLING EXPENSES</i>		Description <i>GAS</i>		
	(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 <i>Shirley J. McKellar</i>		Office sought <i>(Mayor)</i>	Office held <i>Former City Council</i>
Date <i>1/6/2026</i>		Payee name <i>GRAVES COMPANY</i>			
Amount (\$) <i>400.00</i>		Payee address: <i>1717 W. Gentry #100</i>		City: <i>Tyler</i>	State: <i>TX</i>
		Zip Code <i>75702</i>		Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>OFFICE SPACE</i>		Description <i>RENT</i>		
	(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 <i>Shirley J. McKellar</i>		Office sought <i>Mayor</i>	Office held <i>Former City Council</i>

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Shirley J. McKeelbar</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>02/26/2026</i>	5 Payee name <i>Wal Mart Neighborhood Market</i>	
6 Amount (\$) <i>31.55</i>	7 Payee address; City; State; Zip Code <i>2151 Frankston Highway Tyler TX 75701</i> <small>Check if individual's residence address.</small>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>TRAVEL IN DISTRICT</i>	(b) Description <i>GAS</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Shirley J. McKeelbar</i>	Office sought <i>Mayor</i>
		Office held <i>Former City Council</i>
Date <i>02/27/2026</i>	Payee name <i>Village BAKERY</i>	
Amount (\$) <i>48.88</i>	Payee address; City; State; Zip Code <i>111 E. 8th Street Tyler TX 75701</i> <small>Check if individual's residence address.</small>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>FOOD/BEVERAGE EXPENSE</i>	Description <i>CAKE - Volunteer Huddle</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Shirley J. McKeelbar</i>	Office sought <i>Mayor of Tyler</i>
		Office held <i>Former City Council</i>
Date <i>1/8/2026</i>	Payee name <i>Sam's Club</i>	
Amount (\$) <i>66.32</i>	Payee address; City; State; Zip Code <i>2025 SSW Loop 323 Tyler TX 75701</i> <small>Check if individual's residence address.</small>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>TRAVEL IN DISTRICT</i>	Description <i>GAS - Campaign Manager</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Shirley J. McKeelbar</i>	Office sought <i>Mayor of Tyler</i>
		Office held <i>Former City Council</i>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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:		2 FILER NAME <i>Shirley J. McKellar</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>2/17/2026</i>		5 Payee name <i>Ruby's Mexican Restaurant</i>		City: <i>Tyler TX</i> Zip Code: <i>75701</i>	
6 Amount (\$) <i>74.34</i>		7 Payee address: <i>1400 S. VINE STREET</i>		City: <i>Tyler TX</i> Zip Code: <i>75701</i>	
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <i>FOOD/BEVERAGE EXPENSE</i>		(b) Description <i>Volunteer Huddle</i>	
		(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 <i>Shirley J. McKellar</i>		Office sought <i>Mayor of Tyler</i>	
				Office held <i>Former City Council</i>	
Date <i>2/24/2026</i>		Payee name <i>Murphy USA 7597</i>		City: <i>187 W. South Town</i>	
Amount (\$) <i>33.00</i>		Payee address: <i>187 W. South Town Drive</i>		City: <i>Tyler TX</i> Zip Code: <i>75703</i>	
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>TRAVEL IN DISTRICT</i>		Description <i>GAS- Campaigning</i>	
		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 <i>Shirley J. McKellar</i>		Office sought <i>Mayor of Tyler</i>	
				Office held <i>Former City Council</i>	
Date <i>02/24/2026</i>		Payee name <i>China Star Express</i>		City: <i>Tyler TX</i> Zip Code: <i>75702</i>	
Amount (\$) <i>14.05</i>		Payee address: <i>510 S. SW LOOP 323</i>		City: <i>Tyler TX</i> Zip Code: <i>75702</i>	
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>FOOD/BEVERAGE EXPENSE</i>		Description <i>Campaigning</i>	
		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 <i>Shirley J. McKellar</i>		Office sought <i>Mayor of Tyler</i>	
				Office held <i>Former City Council</i>	

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Shirley J. McKellar</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>2/5/2026</i>	5 Payee name <i>Williams Chicken</i>	
6 Amount (\$) <i>60.88</i>	7 Payee address; City; State; Zip Code <i>West Gentry Parkway Tyler TX 75702</i> <small>Check if individual's residence address.</small>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Food</i>	(b) Description <i>Meeting</i>
	(c) <small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Shirley J. McKellar</i>	Office sought <i>Mayor</i>
		Office held <i>Former City Council</i>
Date <i>2/5/2026</i>	Payee name <i>Sam's Club</i>	
Amount (\$) <i>35.00</i>	Payee address; City; State; Zip Code <i># 8284 Loop 323 Tyler TX 75703</i> <small>Check if individual's residence address.</small>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Office Supplies</i>	Description <i>GAS - Supplies (etc)</i>
	<small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Shirley J. McKellar</i>	Office sought <i>Mayor</i>
		Office held <i>Former City Council</i>
Date <i>2/17/2026</i>	Payee name <i>Freddy's</i>	
Amount (\$) <i>49.88</i>	Payee address; City; State; Zip Code <i>2743 EARL CAMPBELL PKWY Tyler TX 75701</i> <small>Check if individual's residence address.</small>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Food/Beverage</i>	Description <i>CAMPaigning</i>
	<small>Check if travel outside of Texas. Complete Schedule T.</small> <small>Check if Austin, TX, officeholder living expense</small>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Shirley J. McKellar</i>	Office sought <i>Mayor</i>
		Office held <i>Former Council</i>

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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:	2 FILER NAME <i>Shirley J. McKellar</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>2/4/2026</i>	5 Payee name <i>DESIGNED GRAPHICS</i>	
6 Amount (\$) <i>1000.00</i>	7 Payee address; City; State; Zip Code <i>12404 Hwy 155 Tyler TX 75703</i> <small>Check if individual's residence address.</small>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Printing Expense</i>	(b) Description <i>Signs</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Shirley J. McKellar</i>	Office sought <i>Mayor</i>
		Office held <i>Former City Council</i>
Date <i>2/4/2026</i>	Payee name <i>DESIGNED GRAPHICS</i>	
Amount (\$) <i>613.14</i>	Payee address; City; State; Zip Code <i>12404 Hwy 155 Tyler TX 75703</i> <small>Check if individual's residence address.</small>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Printing Expenses</i>	Description <i>CAR MAGNETS STAKES Digital Signs</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Shirley J. McKellar</i>	Office sought <i>Mayor</i>
		Office held <i>Former City Council</i>
Date <i>2/2/2026</i>	Payee name <i>GO DADDY</i>	
Amount (\$) <i>31.95</i>	Payee address; City; State; Zip Code <i>Online - ARIZONA</i> <small>Check if individual's residence address.</small>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Website</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Shirley J. McKellar</i>	Office sought <i>Mayor</i>
		Office held <i>Former City Council</i>

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Shirley J. McKellam</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>3/12/2026</i>	5 Payee name <i>DNA GODADDY</i>	
6 Amount (\$) <i>23.44</i>	7 Payee address; City; State; Zip Code <i>ARIZONA</i> <small>Check if individual's residence address.</small>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	(b) Description <i>Website</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Shirley J. McKellam</i>	Office sought <i>Mayor</i>
		Office held <i>Former City Council</i>
Date <i>3/13/2026</i>	Payee name <i>ABC Printing</i>	
Amount (\$) <i>225.00</i>	Payee address; City; State; Zip Code <i>Online Account</i> <small>Check if individual's residence address.</small>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Printing Expenses</i>	Description <i>BUTTONS CHECK # 1020</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Shirley J. McKellam</i>	Office sought <i>Mayor</i>
		Office held <i>Former City Council</i>
Date <i>2/27/2026</i>	Payee name <i>Walmart Supercenter</i>	
Amount (\$) <i>31.55</i>	Payee address; City; State; Zip Code <i>5700 S. BROADWAY Tylan TX 75701</i> <small>Check if individual's residence address.</small>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Gift/Award/Memorial</i>	Description <i>Decorations</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Shirley J. McKellam</i>	Office sought <i>Mayor</i>
		Office held <i>Former City Council</i>

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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:		2 FILER NAME <i>Shirley J. McKellan</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>3/31/2025</i>		5 Payee name <i>Go Daddy</i>			
6 Amount (\$) <i>39.18 55.33 23.44 19.15</i>		7 Payee address; City; State; Zip Code <i>Online - Arizona</i> <small>Check if individual's residence address.</small>			
8 Total: \$135.10 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>		(b) Description <i>Website</i>	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Shirley J. McKellan</i>		Office sought <i>Mayor</i>	
				Office held <i>Former City Council</i>	
Date <i>3/18/2026</i>		Payee name <i>Church's Chicken</i>			
Amount (\$) <i>28.42</i>		Payee address; City; State; Zip Code <i>West Gentry Parkway Tyler TX 75702</i> <small>Check if individual's residence address.</small>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>Food / Beverage</i>		Description <i>Meeting</i>	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Shirley J. McKellan</i>		Office sought <i>Mayor</i>	
				Office held <i>Former City Council</i>	
Date <i>3/24/2026</i>		Payee name <i>Kimberly Williams</i>			
Amount (\$) <i>40.00</i>		Payee address; City; State; Zip Code <i>1717 W. Gentry Tyler TX 75702</i> <small>Check if individual's residence address.</small>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>Polling Expense</i>		Description <i>Printing</i>	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Shirley J. McKellan</i>		Office sought <i>Mayor</i>	
				Office held <i>Former City Council</i>	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Shirley J. McKellar</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>3/9/2026</i>	5 Payee name <i>PWS (Print-Wraps-Signs)</i>	
6 Amount (\$) <i>839.00</i>	7 Payee address: <i>1625 W. Front Street</i>	City: <i>Tyler</i> State: <i>TX</i> Zip Code: <i>75702</i>
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Printing Expenses</i>	
	(b) Description <i>2500 Hangers 200 Tri-fold</i> <i>Check # 1019 Door Hangers</i>	
(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Shirley J. McKellar</i>	Office sought <i>Mayor of Tyler</i>
		Office held <i>Former City Council</i>
Date <i>3/11/2026</i>	Payee name <i>PWS (Print-Wraps-Signs)</i>	
Amount (\$) <i>159.00</i>	Payee address: <i>1625 W. Front Street</i>	City: <i>Tyler</i> State: <i>TX</i> Zip Code: <i>75702</i>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Printing Expenses</i>	
	Description <i>Changed order (add print)</i>	
(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Shirley J. McKellar</i>	Office sought <i>Mayor</i>
		Office held <i>Former City Council</i>
Date <i>3/4/2026</i>	Payee name <i>GRAVES COMPANY</i>	
Amount (\$) <i>400.00</i>	Payee address: <i>1717 W. Gentry Parkway #100</i>	City: <i>Tyler</i> State: <i>TX</i> Zip Code: <i>75702</i>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Office/Rental</i>	
	Description <i>Check # 1017</i>	
(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Shirley J. McKellar</i>	Office sought <i>Mayor</i>
		Office held <i>Former City Council</i>

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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:
2 FILER NAME Shirley J. McKellar		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan 01/14/2026	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Shirley J. McKellar	9 Loan Amount (\$) 1,790.00
6 Is lender a financial institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8 Lender address; City; State; Zip Code 2711 Staley Drive Tyler TX 75702	10 Interest rate 0.00
		11 Maturity date 06/01/2026
12 Principal occupation / Job title (See Instructions) Retired U.S. Army		13 Employer (See Instructions) NA
14 Description of Collateral none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION not applicable	17 Name of guarantor Shirley J. McKellar	19 Amount Guaranteed (\$) 1,790.00
	18 Guarantor address; City; State; Zip Code 2711 Staley Drive Tyler TX 75702	
20 Principal Occupation (See Instructions) Same		21 Employer (See Instructions) NA
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____)	Loan Amount (\$)
Is lender a financial institution? <input type="checkbox"/> Y <input type="checkbox"/> 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)

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