FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00085281 18 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Maria F. NAME Date Received **ELECTRONICALLY FILED** 06/08/2023 NICKNAME LAST **SUFFIX** Aceves CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 3010 LBJ Freeway MAILING Amount Receipt # **ADDRESS** Suite 1200 Change of Address Dallas, TX 75234 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Paul I. NAME NICKNAME LAST **SUFFIX** Wingo **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER** 325 N. Saint Paul **ADDRESS** Ste. 3300 (Residence or Business) Dallas, TX 75201 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (214) 234-7949 **PHONE** 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 Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Day Month Day Year Year **COVERED THROUGH** 01/01/2023 06/30/2023 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 192

Forms provided by Texas Ethics Commission

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Version V3.5.1.a18ea2ca

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 18

13 C / OH NAME	Aceves, Maria F. (Th	e Honorable)	14 Filer ID 00085281	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expend These expenditures may have been made without officeholders are required to report this informat	it the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDR	ESS	
 16 CONTRIBUTION	1. TOTAL UNITEM	ZED POLITICAL CONTRIBUTIONS(OTHER TH	AN PLEDGES, LOANS,	
TOTALS	OR GUARANTE	ES OF LOANS, OR CONTRIBUTIONS MADE EL		\$ 0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOA	.NS)	\$ 21,487.46
EXPENDITURE TOTALS		ZED POLITICAL EXPENDITURES	,	\$ 0.00
	4. TOTAL POLIT	CAL EXPENDITURES		\$ 30,211.16
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 26,154.89
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A TING PERIOD	S OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code	all information required t	companying report is o be reported by me
		The Ho	norable Maria F. Aceve	es
		Signature	of Candidate or Officehol	lder
AFFIX NO	TARY STAMP / SEAL ABO	OVE		
		aid	, this the	day
of	, 20, to ce	rtify which, witness my hand and seal of office.		
Signature of office	cer administering oath	Printed name of officer administering oath	Title of office	r administering oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

				C	OVER	SHEET PG 3 3 of 18
		R NAM	(Ethics (Commission Filers)		
20 S	СНЕ	EDULE	CLI	DIOTAL AMOUNT		
Ν	IAME	E OF S	SCHEDULE		50	BTOTAL AMOUNT
1	.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	20,916.06
2	.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	571.40
3	.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4	.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5	.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	30,211.16
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS						
7	.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8	.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9	.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
1	0.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
1	1.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
1	2.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A(J)1			
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 1/7 Rpt: 4/18		
2	FILER NAME Aceves, Mar	ria F. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085281		
4 Date 02/22/2023 5 Full name of contributor out-of-state PAC (ID#: Abeita, Mitchell 6 Contributor address; City; State; Zip Code Dallas, TX 75201			7 Amount of Contribution (\$) \$100.00			
8	Contributor's F	Principal Occupation	9 Contributor's Job Title			
	Attorney		Attorney			
10	Contributor's 6 Kilgore & Kil	employer/law firm Igore	11 Law firm of contributor's sp	oouse (if any)		
12	If contributor is	s a child, law firm of parent(s) (if any)	1			
	Date	Full name of contributor X out-of-state PAC (ID#	C00395947)	Amount of Contribution (\$)		
02/07/2023 Barnes & Thornburg LLP PAC Contributor address; City; State; Zip Code			\$500.00			
	Contributor's I	Indianapolis, IN 46204 Principal Occupation	Contributor's Job Title			
	Continuator 3 i	Thicipal Occupation	Contributor 3 300 Title			
	Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if any)	1			
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of Contribution (\$)		
	02/09/2023	Bell Nunnally & Martin LLP Contributor address; City; State; Zip Code Dallas, TX 75201		\$1,000.00		
	Contributor's I	Principal Occupation	Contributor's Job Title	<u> </u>		
	Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if any)	1			

	MONET	ARY POLITICAL CONTRIBU	JTIC	DNS		SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete	this f	form.	ı	Total pages Schedule A(J)1: Sch: 2/7 Rpt: 5/18
	FILER NAME Aceves, Maria F. (The Honorable)					Filer ID (Ethics Commission Filers) 00085281
	Date 02/03/2023	5 Full name of contributor out-of-state PAG Carroll, Christina 6 Contributor address; City; State; Zip Code Duncary illa, TX 75107	C (ID#:_		7	Amount of Contribution (\$) \$100.00
_	O - ratificata da la	Duncanville, TX 75137		O Contributorio 1-b Title		
	Attorney	Principal Occupation		9 Contributor's Job Title Attorney		
		employer/law firm		11 Law firm of contributor's sp	01100	o (if any)
	Greenberg 7			Law IIIII of Contributor's Sp	ouse	e (ii ariy)
12	If contributor i	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor out-of-state PAG	C (ID#:_)		Amount of Contribution (\$)
	02/15/2023	Cox, Sean		\$250.00		
		Contributor address; City; State; Zip Code Dallas, TX 75313				
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse	e (if any)
	Law Offices	of Sean Cox				
	If contributor i	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor out-of-state PAG	C (ID#:_)		Amount of Contribution (\$)
	02/16/2023	Dunn Sheehan LLP				\$1,000.00
		Contributor address; City; State; Zip Code Dallas, TX 75206				
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributorio	omployayllayı firm		Low firm of contributor's on		o (if any)
	Continuators	employer/law firm		Law firm of contributor's sp	ouse	s (ii diiy)
	If contributor i	s a child, law firm of parent(s) (if any)				

	MONET	TARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains how to complete this	form.	1	ges Schedule A(J)1 ' Rpt: 6/18	L:
2	FILER NAME Aceves, Mar	ria F. (The Honorable)		3 Filer ID 0008528	(Ethics Commissi 81	on Filers)
4	Date 02/07/2023	5 Full name of contributor out-of-state PAC (ID#:) Frank L Branson PC 6 Contributor address; City; State; Zip Code		7 Amount o	of Contribution (\$)	\$2,000.00
R	Contributor's	Dallas, TX 75205 Principal Occupation	9 Contributor's Job Title			
U	Continuator 5 .	-ппорагоссирацоп	5 Continuator 5 555 Title			
10	Contributor's 6	employer/law firm	11 Law firm of contributor's sp	pouse (if any)		
12	! If contributor is	is a child, law firm of parent(s) (if any)				
	Date	Full name of contributor uut-of-state PAC (ID#:)	Amount o	of Contribution (\$)	
	02/16/2023 Gray Reed & McGraw LLP Contributor address; City; State; Zip Code					\$500.00
		Dallas, TX 77056				
	Contributor's F	Principal Occupation	Contributor's Job Title			
	Contributor's 6	employer/law firm	Law firm of contributor's sp	pouse (if any)		
	If contributor is	is a child, law firm of parent(s) (if any)				
	Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount o	of Contribution (\$)	
	02/13/2023	Hunton Andrews Kurth PAC				\$2,500.00
Contributor address; City; State; Zip Code Houston, TX 77002						
	Contributor's F	Principal Occupation	Contributor's Job Title			
	Contributor's 6	employer/law firm	Law firm of contributor's sp	pouse (if any)		
	If contributor is	is a child, law firm of parent(s) (if any)				

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A(J)1			
	The Instru	ction Guide explains how to compl	ete this f	orm.	ı	otal pages Schedule A(J)1: Sch: 4/7 Rpt: 7/18			
2	FILER NAME Aceves, Mar	ia F. (The Honorable)				iler ID (Ethics Commission Filers) 0085281			
4 Date 01/17/2023 5 Full name of contributor out-of-state PAC (ID#:			7 A	smount of Contribution (\$) \$1,000.00					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	<u> </u>				
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	ouse	(if any)			
12	If contributor is	s a child, law firm of parent(s) (if any)							
Date Full name of contributor out-of-state PAC 02/05/2023 Kent, David Contributor address; City; State; Zip Code				А	smount of Contribution (\$) \$104.15				
		Dallas, TX 75243							
		Principal Occupation		Contributor's Job Title					
	Attorney	and a sall as		Attorney		(if any)			
		employer/law firm ker Biddle & Reath LLP		Law firm of contributor's sp	ouse	(II dily)			
		s a child, law firm of parent(s) (if any)							
	Date	Full name of contributor out-of-stat	te PAC (ID#:_)	A	mount of Contribution (\$)			
	03/03/2023	Lynn Pinker Hurst & Schwegmann LL Contributor address; City; State; Zip Code Dallas, TX 75201				\$2,500.00			
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>				
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse	(if any)			
	If contributor is	s a child, law firm of parent(s) (if any)							

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 5/7 Rpt: 8/18
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Aceves, Ma	ria F. (The Honorable)		00085281
4	4 Date 5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contribution (\$)	
	03/08/2023	Madden, Mitchell		\$1,038.73
		6 Contributor address; City; State; Zip Code		
		Dallas, TX 75254		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
	Attorney		Attorney	
10	Contributor's	employer/law firm	11 Law firm of contributor's s	pouse (if any)
	Law Offices	of Mitchell Madden		
12	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (ID#	t:)	Amount of Contribution (\$)
	02/22/2023	McClain, Dan		\$123.18
		Contributor address; City; State; Zip Code		
		Dallas, TX 75219		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Attorney		Attorney	
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
	Farmers Ins	urance		
	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (ID#	t:)	Amount of Contribution (\$)
	02/23/2023	Modjarrad, Sean		\$1,000.00
		Contributor address; City; State; Zip Code		··· <mark> </mark>
		Richardson, TX 75081		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Attorney		Attorney	
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
	MAS Law Fi	rm		
	If contributor i	s a child, law firm of parent(s) (if any)	•	

	MONET	ARY POLITICAL CONTRIBUT	IONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule A(J)1: Sch: 6/7 Rpt: 9/18
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Aceves, Ma	ria F. (The Honorable)		00085281
4	Date 02/02/2023	Full name of contributor	#:)	7 Amount of Contribution (\$) \$100.00
		Dallas, TX 75209		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
	Attorney		Attorney	
10	O Contributor's	employer/law firm	11 Law firm of contributor's s	spouse (if any)
	Lynn Pinker	Hurst & Schwegmann		
12	2 If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (ID	D#:)	Amount of Contribution (\$)
	02/23/2023	Ramey, Hardin		\$500.00
		Contributor address; City; State; Zip Code	···	
		Dallas, TX 75220		
	Contributor's	I Principal Occupation	Contributor's Job Title	<u> </u>
	Attorney		Attorney	
		employer/law firm	Law firm of contributor's s	spouse (if any)
	Ramey Law			, , , , , ,
		s a child, law firm of parent(s) (if any)		
-	Date	Full name of contributor ut-of-state PAC (ID	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Amount of Contribution (\$)
	02/08/2023	Rawson, Brian) [#])	\$1,000.00
	02/00/2020	Contributor address; City; State; Zip Code		
		Contributor address, City, State, 2ip Code		
		Dallas, TX 75231		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Attorney		Attorney	
		employer/law firm	Law firm of contributor's s	spouse (if any)
	Hartline Bar	ger LLP		
	If contributor	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 7/7 Rpt: 10/18
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Aceves, Ma	ria F. (The Honorable)			00085281
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	03/08/2023	Reese, Joel			\$5,000.00
		6 Contributor address; City;			
		Dallas, TX 75201		_	
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
	Attorney			Attorney	
10	Contributor's	employer/law firm		11 Law firm of contributor's s	spouse (if any)
	Reese Mark	etos LLP			
12	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	02/11/2023	Terrie, Bryan	_		\$100.00
		Contributor address; City;	···· <mark> </mark>		
		Dallas, TX 75225			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Property Ma			Property Manager	
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	Self Employ	ed			
	If contributor i	s a child, law firm of parent(s) (if any)		
H	Date	Full name of contributor	out-of-state PAC (ID#:	,	Amount of Contribution (\$)
	02/06/2023	Thompson, Rhonda			\$500.00
		• · · · · · · · · · · · · · · · · · · ·	State: 7in Code		
		Continuator address, sity,	State, 2.p Sode		
		Dallas, TX 75201			
-	Contributor's	I Principal Occupation		Contributor's Job Title	
	Attorney	· ····o.pa. • • • • • • • • • • • • • • • • • • •		Attorney	
		employer/law firm		Law firm of contributor's s	snouse (if any)
	Thompson (Law iiiii or oonalbator o c	opease (ii aiiy)
_	-	s a child, law firm of parent(s) (if any)		
	ii continuator i	o a orma, law mm or parom(o) ((3.19)		
L					

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 11/18 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Aceves, Maria F. (The Honorable) 00085281 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 03/29/2023 Haynes and Boone LLP \$571.40 Cost of event catering 7 Contributor address; City; State; Zip Code covered by law firm Dallas, TX 75219 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

bursement Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment			Legal Services	s Expense	Salaries/V		e /Contract Labor		OTHER (enter	a category not listed ab	ove)
	orean out a tyment			The Instruction G	Suide explains	how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commiss	ion Filers)
	Sch: 1/7 Rpt: 12/18		Aceves, Ma	ria F. (The Hor	norable)					00085281		
4	Date	5	Payee name									
	01/16/2023		Aceves, Mai	ria								
6	Amount (\$)	7	Payee addres	ss; City;	State;	; Zip Co	de					
	\$20,000.00		3010 LBJ F	wy Ste 1200								
			Dallas, TX 7	5234								
8	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE			ment/Reimbur				=			nplete Schedule T.	
								—		of political	g expense expenditures fro	om
											of 2022 campa	
9	Complete ONLY if direct	<u> </u>		ceholder name		Office sou	aht			Office h		
9	expenditure to benefit C/OI		zandidate/Onic	cholder flame		Jilice 30u	grit			Office fi	eiu	
_	Date	Г	Doves name									
	01/08/2023		Payee name Capital Grille	2								
		L			Ctata	7:- 0-	-d					
	Amount (\$)		Payee addres		State;	; Zip Co	ue					
	\$5,000.00		500 Crescer	II CI								
			D. II	VE004								
			Dallas, TX 7									
	PURPOSE OF	(a)		e Categories listed at	the top of this sch	edule)	(b)	Description	. -:	df.T O	onlata Calcadula T	
	EXPENDITURE		Food/Bevera	age Expense				<u></u>		officeholder livin	nplete Schedule T. a expense	
								Dinner with si				
									•			
	Complete ONLY if direct		Candidate/Offic	ceholder name	C	Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	01/12/2023		Culinaire									
	Amount (\$)		Payee addres	ss; City;	State;	; Zip Co	de					
	\$1,172.35		2101 Ross A	Ave								
			Dallas, TX 7	5201								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Event Exper			,		Check if travel of			nplete Schedule T.	
	LAPENDITORE							ш		officeholder livin	g expense	
								Catering for in	ive	suture		
	Complete ONLY if direct	Ļ	Candidata/Offi	oholder neme		Office age:	abt			Office h	old	
	Complete ONLY if direct expenditure to benefit C/OI		zai iuiuale/OIII(ceholder name	C	Office sou	yııı			Onice n	EIU	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
•	Sch: 2/7 Rpt: 13/18	Aceves, Maria F. (The Honorable)
4	Date	5 Payee name
	01/03/2023	Dallas County Democratic Party
6	Amount (\$) \$60.00	7 Payee address; City; State; Zip Code 1414 N Washington
		Dallas, TX 75204
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Ticket to event
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/08/2023	Donorbox
	Amount (\$)	Payee address; City; State; Zip Code
	` ,	
	\$469.38	5 3rd St, Suite 900
		San Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Transaction fees for online donations during the reporting period
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/17/2023	Frazier, Veretta
	Amount (\$)	Payee address; City; State; Zip Code
	\$91.60	4145 Beltline Rd Ste 212-122
		Addison, TX 75001
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	LAFLINDITORL	Check if Austin, TX, officeholder living expense
		Reimburse for portion of event entertainment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/7 Rpt: 14/18	Aceves, Maria F. (The Honorable) 00085281
4	Date	5 Payee name
	06/08/2023	Hodge, Terri
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$95.00	7106 Abrams Rd,
		Dallas, TX 75231
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Event ticket
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/14/2023	HomeGoods
	Amount (\$)	Payee address; City; State; Zip Code
	\$997.90	8818 Park Lane Ste 1
		Dallas, TX 75231
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Office supplies
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	01/25/2023	Lucid Private Offices
	Amount (\$)	Payee address; City; State; Zip Code
	\$63.87	3010 LBJ Fwy Ste 1200
		Dallas, TX 75234
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Virtual office
		Virtual Office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	Committee 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 3 Filer ID (Ethics Commission Filers)		
	Sch: 4/7 Rpt: 15/18	Aceves, Maria F. (The Honorable) 00085281		
4	Date	5 Payee name		
	02/28/2023	Lucid Private Offices		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$63.87	3010 LBJ Fwy Ste 1200		
		Dallas, TX 75234		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Office Overhead/Rental Expense		
		Check if Austin, TX, officeholder living expense Virtual office		
		Vii tuai onice		
_	Complete ONLY if direct	Condidate/Officeholder name Office cought		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
_				
	Date	Payee name		
	03/23/2023	Lucid Private Offices		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$63.87	3010 LBJ Fwy Ste 1200		
		Dallas, TX 75234		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense Virtual office		
		Virtual office		
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/O			
\vdash	Date	Payee name		
	05/08/2023	Payee name Lucid Private Offices		
_				
	Amount (\$)	Payee address; City; State; Zip Code		
	\$63.87	3010 LBJ Fwy Ste 1200		
L		Dallas, TX 75234		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		Virtual office		
		Virtual office		
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/O			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
	Sch: 5/7 Rpt: 16/18	Aceves, Maria F. (The Honorable) 00085281		
4	Date	5 Payee name		
	05/24/2023	Lucid Private Offices		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$70.26	3010 LBJ Fwy Ste 1200		
		Dallas, TX 75234		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense Virtual office		
		Viituai Onice		
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
9	expenditure to benefit C/O			
			_	
	Date	Payee name		
	05/04/2023	National Association of Women Judges		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$255.00	1001 Connecticut Ave NW Ste 1138		
		Washington, DC 20036		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		Membership fees		
		I monasticing reco		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_	
	expenditure to benefit C/O			
H	Data		_	
	Date	Payee name Sam's Club		
	04/10/2023			
	Amount (\$)	Payee address; City; State; Zip Code		
	\$496.93	4062 LBJ Fwy		
		Dallas, TX 75244		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Office Overhead/Rental Expense		
		Check if Austin, TX, officeholder living expense		
		Office supply		
	0 1: 0 1: 0			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H		

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Gift/Awards/Mer

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/7 Rpt: 17/18	Aceves, Maria F. (The Honorable) 00085281
4	Date	5 Payee name
	05/31/2023	Sam's Club
6	Amount (\$) \$297.26	7 Payee address; City; State; Zip Code 4062 LBJ Fwy
		Dallas, TX 75244
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Complete Schedule Top of
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office supply
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/04/2023	State Bar of Texas
	Amount (\$)	Payee address; City; State; Zip Code
	\$240.00	1414 Colorado St
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Membership fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/26/2023	Texas Center for the Judiciary
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	1210 San Antonio St
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fee for CLE
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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 3 Filer ID (Ethics Commission Filers)
	Sch: 7/7 Rpt: 18/18	Aceves, Maria F. (The Honorable) 00085281
4	Date	5 Payee name
	06/01/2023	Texas Center for the Judiciary
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$400.00	1210 San Antonio St
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Fee for judicial conference
		Tee for judicial conference
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	05/23/2023	Texas Justice Democrats
H	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	6333 Mockingbird Ln. Ste. 147 Box 800
	Ψ130.00	0333 Wockingshu En. Ste. 147 Box 000
		Dolloo TV 75214
	5,155,055	Dallas, TX 75214
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Advertising sponsorship of event
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/09/2023	Tony Grimes Photography
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.00	PO Box 166176
		Irving, TX 75016
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Investiture photography
lacksquare	Complete ONII V if allow	Condidate Office helder name
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
ldash		