

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM **JC/OH**
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00086018	2 Total pages filed: 10
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Veronica M.	MI
	NICKNAME	LAST Nelson	SUFFIX
OFFICE USE ONLY			
			Date Received ELECTRONICALLY FILED 07/04/2023
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 7050 Brookhollow West Dr. #41499 Houston, TX 77241		ZIP CODE
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
			Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Gere' N.	MI
	NICKNAME	LAST Cole	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 6112 Wheatley Street Houston, TX 77091		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
(713) 668-3998			
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month	Day	Year
	01/01/2023	THROUGH	06/30/2023
10 ELECTION	ELECTION DATE Month Day Year 01/01/2023		ELECTION TYPE
			<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any) District Judge District 482 Harris		12 OFFICE SOUGHT (if known)

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 10

13 C / OH NAME Nelson, Veronica M. (The Honorable) **14 Filer ID** (Ethics Commission Filers)
00086018

15 NOTICE FROM POLITICAL COMMITTEE(S) 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.

Additional Pages

COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,250.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	1,491.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	5,000.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT

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

The Honorable Veronica M. Nelson

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - JC/OH

18 FILER NAME Nelson, Veronica M. (The Honorable)		19 Filer ID 00086018	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS			SUBTOTAL AMOUNT
NAME OF SCHEDULE			
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	1,250.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	1,491.00
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	3,144.65
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	1.79

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/1 Rpt: 4/10
2 FILER NAME Nelson, Veronica M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086018
4 Date 03/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anastasio, Abigail <hr/> 6 Contributor address; City; State; Zip Code Pasadena, TX 77504	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney
10 Contributor's employer/law firm Ceja Law Firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenlee, Steven <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm Law Offices of Steven Greenlee		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/2 Rpt: 5/10	2 FILER NAME Nelson, Veronica M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086018
4 Date 01/03/2023	5 Payee name Herrera, Placida (Ms.)	
6 Amount (\$) \$225.00	7 Payee address; City; State; Zip Code 3804 Popular St Houston, TX 77087	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) robe	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense robe
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/05/2023	Payee name Hightower, Gary	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 5239 Honeyvine Dr Houston, TX 77048	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sign removal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/24/2023	Payee name Hightower, Gary	
Amount (\$) \$400.00	Payee address; City; State; Zip Code 5239 Honeyvine Dr Houston, TX 77048	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense big sign removal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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: Sch: 2/2 Rpt: 6/10	2 FILER NAME Nelson, Veronica M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086018
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4 Date 05/03/2023	5 Payee name USPS PO Box
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6 Amount (\$) \$166.00	7 Payee address; City; State; Zip Code 7050 Brookhollow west dr HOUSTON, TX 77241
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PO BOX	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense renewal
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/24/2023	Payee name UZ Marketing
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Amount (\$) \$600.00	Payee address; City; State; Zip Code 5900 Bingle Rd Houston, TX 77092
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense investiture expenses
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/2 Rpt: 7/10	2 FILER NAME Nelson, Veronica M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086018
4 Date 04/25/2023	5 Payee name Costco	
6 Amount (\$) 266.12	7 Payee Address; City; State; Zip 1150 Bunker Hill Houston, TX 77055	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) court/jury amenities
Date 05/05/2023	Payee name Costco	
Amount (\$) 207.98	Payee Address; City; State; Zip 1150 Bunker Hill Houston, TX 77055	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) jury amenities
Date 02/15/2023	Payee name Doubletree Hotel	
Amount (\$) 339.32	Payee Address; City; State; Zip 6505 Interstate Highway 35 North Austin, TX 78752	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Transportation Equipment & Related Expense	(b) Description (See instructions regarding type of information required.) CJE training
Date 05/19/2023	Payee name Harris County District Court	
Amount (\$) 50.00	Payee Address; City; State; Zip 1201 franklin street Suite 700 houston, TX 77040	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) bereavement fund

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/2 Rpt: 8/10	2 FILER NAME Nelson, Veronica M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086018
4 Date 06/30/2023	5 Payee name Nelson, Veronica (Ms.)	
6 Amount (\$) 1,765.17	7 Payee Address; City; State; Zip 7050 Brookhollow west dr HOUSTON, TX 77040	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Credit Card Payment	(b) Description (See instructions regarding type of information required.) final reimbursement from personal funds used
Date 05/16/2023	Payee name Texas Center for the Judiciary	
Amount (\$) 70.00	Payee Address; City; State; Zip 1210 San Antonio St Ste 800 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) training fee
Date 05/16/2023	Payee name Texas Center for the Judiciary	
Amount (\$) 70.00	Payee Address; City; State; Zip 1210 San Antonio St Ste 800 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) training
Date 06/09/2023	Payee name Treebeards	
Amount (\$) 376.06	Payee Address; City; State; Zip 1117 Texas Ave Houston, TX 77002	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Consulting Expense	(b) Description (See instructions regarding type of information required.) lunch/ judicial meeting

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

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/2 Rpt: 9/10
2 FILER NAME Nelson, Veronica M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086018
4 Date 01/31/2023	5 Name of person from whom amount is received Greater Texas Credit Union	8 Amount (\$) \$0.33
	6 Address of person from whom amount is received; City; State; Zip Code Houston, TX 77092	
	7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Credit Interest Annual Percentage Yield Earned:	
Date 02/28/2023	Name of person from whom amount is received Greater Texas Credit Union	Amount (\$) \$0.27
	Address of person from whom amount is received; City; State; Zip Code Houston, TX 77092	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Credit Interest Annual Percentage Yield Earned:	
Date 03/31/2023	Name of person from whom amount is received Greater Texas Credit Union	Amount (\$) \$0.33
	Address of person from whom amount is received; City; State; Zip Code Houston, TX 77092	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Credit Interest Annual Percentage Yield Earned:	
Date 04/29/2023	Name of person from whom amount is received Greater Texas Credit Union	Amount (\$) \$0.32
	Address of person from whom amount is received; City; State; Zip Code Houston, TX 77092	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Credit Interest Annual Percentage Yield Earned:	
Date 05/26/2023	Name of person from whom amount is received Greater Texas Credit Union	Amount (\$) \$0.26
	Address of person from whom amount is received; City; State; Zip Code Houston, TX 77092	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Credit Interest Annual Percentage Yield Earned:	

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

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 2/2 Rpt: 10/10
2 FILER NAME Nelson, Veronica M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086018
4 Date 06/30/2023	5 Name of person from whom amount is received Greater Texas Credit Union	8 Amount (\$) \$0.28
	6 Address of person from whom amount is received; City; State; Zip Code Houston, TX 77092	
	7 Purpose for which amount is received Credit Interest Annual Percentage Yield Earned:	<input type="checkbox"/> Check if political contribution returned to filer