#### 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) 00081717 27 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Aurora Martinez NAME Date Received **ELECTRONICALLY FILED** 07/17/2023 NICKNAME LAST **SUFFIX** Jones CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** P.O. Box 82331 MAILING Receipt # Amount **ADDRESS** Change of Address Austin, TX 78708 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Virginia NAME NICKNAME LAST **SUFFIX** Ginny Agnew **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER** 1204 Castle Hill St. **ADDRESS** (Residence or Business) Austin, TX 78703 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 473-2375 **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** Day Month Year χ Primary Runoff Other 03/05/2024 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE

**GO TO PAGE 2** 

District Judge District 126

District Judge District 126 Travis

## JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM JC/OH COVER SHEET PG 2

2 of 27

13 C / OH NAME	Jones, Aurora Martin	ez (The Honorable)	<b>14</b> Filer ID 00081717	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	cal expenditures made by political c lade without the candidate's or offic is information only if they receive no	eholder's knowledge or	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASUR	ER NAME	
		COMMITTEE CAMPAIGN TREASUR	ER ADDRESS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS(C ES OF LOANS, OR CONTRIBUTIONS		\$ 0.00
		ICAL CONTRIBUTIONS	CC OF LOANS)	\$ 9,580.00
EXPENDITURE TOTALS	`	PLEDGES, LOANS, OR GUARANTEE ZED POLITICAL EXPENDITURES	S OF LOANS)	\$ 0.00
	4. TOTAL POLIT	CAL EXPENDITURES		<b>\$</b> 4,638.57
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED A RIOD	S OF THE LAST DAY OF THE	\$ 24,667.35
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING TING PERIOD	LOANS AS OF THE LAST DAY	\$ 6,000.00
17 AFFIDAVIT				
			under penalty of perjury, that the ac Id includes all information required ction Code.	
		ТІ	he Honorable Aurora Martinez	Jones
			Signature of Candidate or Officeho	older
AFFIX NO	TARY STAMP / SEAL AB	DVE		
		aid		day
of	, 20, to co	ertify which, witness my hand and seal	of office.	
Signature of office	cer administering oath	Printed name of officer administe	ering oath Title of office	er administering oath

## **SUBTOTALS - JC/OH**

## FORM JC/OH COVER SHEET PG 3

			C	OVER SHEET	<b>PG 3</b> 3 of 27
	R NAN	(Ethics Commission I	Filers)		
		E SUBTOTALS SCHEDULE		SUBTOTAL AM	OUNT
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	9,580.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	4,638.57
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.	X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	112.41

	MONET	ARY POLITICAL CONTR		SCHEDULE A(J)1		
	The Instru	ction Guide explains how to comp	lete this form.	l l	al pages Schedule A(J)1: n: 1/9 Rpt: 4/27	
2	FILER NAME			3 File	r ID (Ethics Commission	n Filers)
	Jones, Auro	ra Martinez (The Honorable)		000	081717	
4	Date	5 Full name of contributor  ut-of-st	ate PAC (ID#:	) <b>7</b> Am	ount of Contribution (\$)	
	06/29/2023	Bressi, Nicholas				\$500.00
		6 Contributor address; City; State; Zip Cod	le			
		Austin, TX 78716				
8	Contributor's	Principal Occupation	9 Contributor's Jo	b Title		
	Lawyer		Owner			
10	Contributor's	employer/law firm	11 Law firm of con	tributor's spouse (if	any)	
	Law Office of	f Nicholas Bressi				
12	! If contributor i	s a child, law firm of parent(s) (if any)				
F	Date	Full name of contributor out-of-st	ate PAC (ID#:	) Am	ount of Contribution (\$)	
	06/29/2023	Brown, Marilyn			, ,	\$100.00
		Contributor address; City; State; Zip Cod	le			
		Austin, TX 78746				
	Contributor's	rincipal Occupation	Contributor's Jo	b Title		
	Attorney		Partner			
	Contributor's	employer/law firm	Law firm of con	tributor's spouse (if	any)	
	Jackson Wa	lker				
	If contributor i	s a child, law firm of parent(s) (if any)				
L	5 /				. (0 . 11 . 1 . (0)	
	Date	<del>-</del>	ate PAC (ID#:	)   Am	ount of Contribution (\$)	ቀንደብ ብብ
	06/23/2023	Burke, Cecelia (The Honorable)				\$250.00
		Contributor address; City; State; Zip Coo	16			
		Austin, TX 78731				
	Contributor's	Principal Occupation	Contributor's Jo	h Titlo		
	Not Employe	·	N/A	b Title		
		employer/law firm		tributor's spouse (if	anvi	
	Not Employe		Law IIIII of Con	inbutoi s spouse (ii	any)	
		s a child, law firm of parent(s) (if any)				
	ii contributor i	s a clina, law iiiii or parchi(s) (ii ariy)				
L						

MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
The Instru	ction Guide explains ho	w to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 2/9 Rpt: 5/27
2 FILER NAME	ra Martinez (The Honorable)			3 Filer ID (Ethics Commission Filers) 00081717
4 Date 06/23/2023	Date 5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contribution (\$) \$250.00	
	Austin, TX 78701			
8 Contributor's	Principal Occupation		9 Contributor's Job Title	
Lawyer			Owner	
<b>10</b> Contributor's Ruggero Lav	employer/law firm w Firm PC		11 Law firm of contributor's s	pouse (if any)
	s a child, law firm of parent(s) (i	f any)		
D-t-	Total account and an extension to a			The American Countries (A)
Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/23/2023	Dionne, Lindsey  Contributor address; City; State; Zip Code			\$500.00
	Austin, TX 78745			
Contributor's	Principal Occupation		Contributor's Job Title	
Lawyer			Owner	
Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
Lindsey Dio	nne Attorney at Law PLLC			
If contributor i	s a child, law firm of parent(s) (i	f any)		_
Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/29/2023	DuBose, Leigh			\$250.00
	Contributor address; City;	State; Zip Code		
	Austin, TX 78730			
	Principal Occupation		Contributor's Job Title	
Attorney Attorney				
	employer/law firm		Law firm of contributor's s	pouse (if any)
	of Leigh A. DuBose			
If contributor i	s a child, law firm of parent(s) (i	f any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 3/9 Rpt: 6/27
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Jones, Auro	ra Martinez (The Honorable)				00081717
4	Date 06/29/2023			7	Amount of Contribution (\$) \$200.00	
		Austin, TX 78701				
8	Contributor's I	rincipal Occupation		9 Contributor's Job Title	_	
	Attormey			Owner		
10		employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
	The Ezzell G					
12	! If contributor i	s a child, law firm of parent(s) (i	f any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Π	Amount of Contribution (\$)
	06/20/2023 Heinrich, Allison  Contributor address; City; State; Zip Code			\$40.00		
		Austin, TX 78757				
		Principal Occupation		Contributor's Job Title		
	Political Con			Political Consultant		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Self-Employ					
	If contributor i	s a child, law firm of parent(s) (i	fany)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Π	Amount of Contribution (\$)
	06/28/2023	Henrichson, Kevin			l	\$1,000.00
		Contributor address; City;  Austin, TX 78759	State; Zip Code		•	
$\vdash$	Contributor's I	Principal Occupation		Contributor's Job Title		
	Lawyer	ттори оссиранот		Lawyer		
	Contributor's employer/law firm  Law firm of contributor's s			יווח	se (if any)	
		Alden & Henrichson		Law min or contributor 5 of	, ou	se (ii diiy)
	-	s a child, law firm of parent(s) (i	f any)	1		

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A(J)1		
	The Instru	ction Guide explains how to comp	olete this f	orm.	ı	Total pages Schedule A(J)1: Sch: 4/9 Rpt: 7/27		
2	FILER NAME Jones, Auro	ra Martinez (The Honorable)			ı	Filer ID (Ethics Commission 00081717	ı Filers)	
4	Date 06/29/2023			7	Amount of Contribution (\$)	\$500.00		
8	Contributor's I	I Principal Occupation		9 Contributor's Job Title	<u> </u>			
	Attorney			Owner				
10		employer/law firm h Law Group		11 Law firm of contributor's sp	ouse	e (if any)		
12	If contributor is	s a child, law firm of parent(s) (if any)						
	Date	Full name of contributor out-of-s	tate PAC (ID#:_	)		Amount of Contribution (\$)		
06/29/2023 Hopkins, Franklin  Contributor address; City; State; Zip Code				\$50.00				
	Contributor's F	Austin, TX 78704 Principal Occupation		Contributor's Job Title				
Attorney Principal								
		employer/law firm		Law firm of contributor's sp	ouse	e (if any)		
	Germer Bea	man & Brown PLLC						
	If contributor is	s a child, law firm of parent(s) (if any)						
	Date	Full name of contributor out-of-si	tate PAC (ID#:_	)		Amount of Contribution (\$)		
	06/29/2023	Israel, Celia (The Honorable)  Contributor address; City; State; Zip Co  Austin, TX 78745	de				\$40.00	
	Contributor's I	Principal Occupation		Contributor's Job Title				
	Realtor Realtor							
Contributor's employer/law firm Law firm of contributor's sp			ouse	e (if any)				
	Self-Employ							
	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 ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 5/9 Rpt: 8/27		
2	FILER NAME				3 Filer ID (Ethics Commission Filers)		
	Jones, Auro	ra Martinez (The Honorable	)		00081717		
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)		
	06/28/2023	Jackson Walker L.L.P.	PAC		\$1,000.00		
		6 Contributor address; City;	State; Zip Code				
		Dallas, TX 75201					
8	Contributor's	Principal Occupation		9 Contributor's Job Title			
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)		
12	! If contributor i	s a child, law firm of parent(s) (	if any)	1			
H	Date	Full name of contributor	out-of-state PAC (ID#:	1	Amount of Contribution (\$)		
	06/29/2023	Lalk, Margaret	out of state 1 AO (ID#.	<i>)</i>	\$100.00		
		Contributor address; City;	State: Zip Code		·· <del>·</del>		
		Austin, TX 78731					
	Contributor's	Principal Occupation		Contributor's Job Title			
	Not Employe			N/A			
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)		
	N/A						
	If contributor i	s a child, law firm of parent(s) (	if any)				
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)		
	06/30/2023	Luck, Angela	_		\$80.00		
		Contributor address; City;	State; Zip Code				
		Austin, TX 78723					
		Principal Occupation		Contributor's Job Title			
				Owner & Managing Pa			
		employer/law firm		Law firm of contributor's s	pouse (if any)		
	Copia Cons						
	If contributor i	s a child, law firm of parent(s) (	if any)				
l							

MONET	ARY POLITICAL	. CONTRIBUTIO	ONS	SCHEDULE A(J)1
The Instru	ction Guide explains h	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 6/9 Rpt: 9/27
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Jones, Auro	ra Martinez (The Honorable	e)		00081717
4 Date 06/23/2023			7 Amount of Contribution (\$) \$250.00	
	Austin, TX 78738			
8 Contributor's	Principal Occupation		9 Contributor's Job Title	L
Attorney			Partner	
10 Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)
Gordon Ree	es Scully Mansukhani, LLP			
12 If contributor	is a child, law firm of parent(s)	(if any)	1	
Date	Full name of contributor	out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
06/29/2023	Mims, Lisa	_		\$40.00
	Contributor address; City  Austin, TX 78705	; State; Zip Code		
Contributor's	Principal Occupation		Contributor's Job Title	
Attorney	т ппораг Оссаралоп		Attorney	
	employer/law firm		Law firm of contributor's s	nouse (if any)
	of Lisa Mims		Eaw limit of contributor 5 5	pouse (ii arry)
	is a child, law firm of parent(s)	(if any)		
Date	Full name of contributor	out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
06/30/2023	Mitchell, John			\$40.00
	Contributor address; City  Austin, TX 78756	r; State; Zip Code		
Contributor's	Principal Occupation		Contributor's Job Title	I
Not Employe			N/A	
Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
N/A				
If contributor	is a child, law firm of parent(s)	(if any)	•	

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A(J)1		
	The Instru	ction Guide explains how to c	omplete this f	orm.	1	ges Schedule A(J)1: 9 Rpt: 10/27		
2	FILER NAME Jones, Auro	ra Martinez (The Honorable)			3 Filer ID 000817	(Ethics Commissio	n Filers)	
4	Date 06/29/2023			7 Amount	of Contribution (\$)	\$450.00		
8	Contributor's F	I Principal Occupation		9 Contributor's Job Title	<u> </u>			
	Attorney	. [		Attorney				
10	Contributor's	employer/law firm If Nadine Orrell, PLLC		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 ou	it-of-state PAC (ID#:	)	Amount	of Contribution (\$)		
	Date Full name of contributor out-of-state PAC (ID#:)  Pennington, Julie  Contributor address; City; State; Zip Code  Austin, TX 78759				οι σοιαπραίου (φ)	\$250.00		
	Contributor's F	I Principal Occupation		Contributor's Job Title				
Attorney Attorney								
		employer/law firm		Law firm of contributor's sp	ouse (if anv)	<u> </u>		
		of Julie Pennington			( ),			
		s a child, law firm of parent(s) (if any)						
	Date	Full name of contributor ou	ıt-of-state PAC (ID#:_	)	Amount	of Contribution (\$)		
06/29/2023 Reeser, Rose  Contributor address; City; State; Zip Code  West Lake Hills, TX 78746					\$50.00			
	Contributor's I	Principal Occupation		Contributor's Job Title				
	Not Employed N/A			N/A				
Contributor's employer/law firm  Law firm of contributor's s  N/A			Law firm of contributor's sp	ouse (if any)	1			
	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 ho	ow to complete this	form.	1	Total pages Schedule A(J)1: Sch: 8/9 Rpt: 11/27
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Jones, Auro	ra Martinez (The Honorable	)			00081717
4	Date 06/26/2023	5 Full name of contributor Richards, Rodriguez &	out-of-state PAC (ID#	)	7	Amount of Contribution (\$) \$1,000.00
		6 Contributor address; City;				
		Austin, TX 78701				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's s	spous	se (if any)
12	! If contributor i	s a child, law firm of parent(s) (i	if any)	<u> </u>		
_	Date	Full name of contributor	out-of-state PAC (ID#	· )	T	Amount of Contribution (\$)
	06/27/2023	Rick Freeman, PC				\$1,000.00
	00/21/2020	Contributor address; City;	State; Zip Code			¥2,000.00
		Austin, TX 78746				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's s	spous	se (if any)
	If contributor i	s a child, law firm of parent(s) (i	if any)			
_	Date	Full name of contributor	out-of-state PAC (ID#	:)	Ī	Amount of Contribution (\$)
	06/29/2023	Salinas, Carlos	_			\$100.00
		Contributor address; City;	State; Zip Code		"	
		Austin, TX 78759				
	Contributor's I	Principal Occupation		Contributor's Job Title	•	
	Attorney Partner					
	Contributor's employer/law firm Law firm of contributor's sp					
		Salinas Londergan, LLP		The Law Office of Rac	hel I	Moyle
	If contributor i	s a child, law firm of parent(s) (i	fany)			

	MONET	ARY POLITICAL CONTRIBUTI	SCHEDULE A(J)1		
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 9/9 Rpt: 12/27	
2	FILER NAME			3 Filer ID (Ethics Commission Filers)	
	Jones, Auro	ra Martinez (The Honorable)		00081717	
4	Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7 Amount of Contribution (\$)	
	06/23/2023	Terrazas, Kevin		\$1,000.00	
		6 Contributor address; City; State; Zip Code			
		Austin, TX 78746			
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)	
	Terrazas PL	LC			
12	If contributor i	s a child, law firm of parent(s) (if any)			
	Date	Full name of contributor out-of-state PAC (ID#	<i>‡</i> : )	Amount of Contribution (\$)	
	06/29/2023	Wooten, Kennon		\$40.00	
		Contributor address; City; State; Zip Code			
3,,					
		Austin, TX 78704			
	Contributor's	l Principal Occupation	Contributor's Job Title		
	Attorney		Partner		
_		employer/law firm	Law firm of contributor's s	pouse (if any)	
		ass & McConnico LLP		, , , , , , , , , , , , , , , , , , , ,	
_		s a child, law firm of parent(s) (if any)			
H	Date	Full name of contributor  out-of-state PAC (ID#	#: )	Amount of Contribution (\$)	
	06/29/2023	Young, Marc	,	\$500.00	
		Contributor address; City; State; Zip Code			
		Dripping Springs, TX 78620			
	Contributor's	Principal Occupation	Contributor's Job Title		
	Lawyer Founding Principal				
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)	
	Cokinos You	ung			
	If contributor i	s a child, law firm of parent(s) (if any)			

### 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 Legal Services

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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: 1/12 Rpt: 13/27	Jones, Aurora Martinez (The Honorable) 00081717
4	Date	5 Payee name
	04/20/2023	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$227.31	410 Terry Ave N
		Seattle, WA 98109
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Office Furniture
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	'	
	Date	Payee name
L	05/02/2023	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$33.55	410 Terry Ave N
l		Seattle, WA 98109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Office Furniture
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/02/2023	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.81	410 Terry Ave N
	,	
		Seattle, WA 98109
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		Office Supplies
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiulture to beliefft C/OI	1

### 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 co	omple	ete this form.		
1	Total pages Schedule F1:	2	FILER NAME		3	iler ID	(Ethics Commission Filers)
	Sch: 2/12 Rpt: 14/27	,	Jones, Aurora Martinez (The Honorable)			00081717	
4	Date	5	Payee name		•		
	05/04/2023	/	Amazon				
6	Amount (\$)	7	Payee address; City; State; Zip Co	ode			
	\$34.62	4	110 Terry Ave N				
		:	Seattle, WA 98109				
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		
	_				Check if Austin, TX, of Office Supplies	fficeholder living	expense
					Office Supplies		
9	Complete ONLY if direct	C	andidate/Officeholder name Office so	laht		Office he	eld
ľ	expenditure to benefit C/O		and date, of moetholder thanks	agiit		011100 110	
_	Date	Ι.	Payee name				
	05/09/2023	l	Amazon				
	Amount (\$)	_	Payee address; City; State; Zip Co	ode			
	\$36.78	l	410 Terry Ave N	ouc			
	400.10		120 1011 7 110 11				
		,	Seattle, WA 98109				
	PURPOSE	├		(h)	Description		
	OF		Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense	(0)	Description Check if travel outside	e of Texas. Com	olete Schedule T.
	EXPENDITURE	`	Onice Overneau/Nental Expense		Check if Austin, TX, o		
					Office Supplies		
	Complete ONLY if direct expenditure to benefit C/OH		andidate/Officeholder name Office sou	ught		Office he	eld
	experiditure to benefit C/Or						
	Date		Payee name				
	05/09/2023	,	Amazon				
	Amount (\$)		Payee address; City; State; Zip Co	ode			
	\$20.56	4	410 Terry Ave N				
		;	Seattle, WA 98109				
	PURPOSE	(a) (	Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	(	Office Overhead/Rental Expense		Check if travel outside		
	_				Check if Austin, TX, of Office Supplies	fficeholder living	expense
					Office Supplies		
$\vdash$	Complete ONLY if direct	C	andidate/Officeholder name Office sou	<u>l</u> uaht		Office he	eld
	expenditure to benefit C/O		Since 300	y		2.1100 110	· <del>-</del>

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food, Gift/A nmittee Legal	Expense  Beverage Expense wards/Memorials Expe Services  Instruction Guide	ense	Office Over Polling Exp Printing Exp Salaries/Wa	rhead ense pense ages	e /Contract Labor		Travel in District Travel Out of Dis	Equipment & Related Expense
1	Total pages Schedule F1:	2			•		÷		3	Filer ID	(Ethics Commission Filers)
	Sch: 3/12 Rpt: 15/27	ı	Jones, Aurora N	/lartinez (The H	lonorable	·)			3	00081717	(Lunes Commission Filers)
4	Date	5	Payee name								
	06/05/2023		American Bar F	oundation							
6	Amount (\$) \$300.00		Payee address; 750 North Lake Chicago, IL 606		State;	Zip Coo	de				
8	PURPOSE OF EXPENDITURE		Category (See Cat Fees	egories listed at the top	p of this sched	dule)	(b)	므		de of Texas. Com officeholder livinç	plete Schedule T. g expense
9	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeho	lder name	Of	ffice soug	ght			Office he	eld
	Date		Payee name	· · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·			
	04/26/2023		Arturo's Cafe								
	Amount (\$)		Payee address;	City;	State;	Zip Coo	de				
	\$76.86		314 W. 17th St Austin, TX 7870	01							
	PURPOSE OF EXPENDITURE		Category <sub>(See Cat</sub> Food/Beverage		p of this sched	dule)		<b>=</b>	, TX,	officeholder living	
	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeho	lder name	Of	ffice soug	ght			Office he	eld
	Date 06/05/2023	ı	Payee name Austin Bar Asso	ociation							
	Amount (\$) \$200.00		Payee address; 712 W. 16th St Austin, TX 7870	City;	State;	Zip Coo	de				
	PURPOSE		<u> </u>	egories listed at the top	n of this sakes	dulo)	(b)	Description			
	OF EXPENDITURE	ı	Fees	egones hsteu at the top	ρ οι uiis sched	uule)		Check if travel		de of Texas. Com officeholder livinç	plete Schedule T. g expense
	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeho	lder name	Of	ffice soug	ght			Office he	eld

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

	Candidate/Officeholder/Politica Credit Card Payment	Il 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: 4/12 Rpt: 16/27	Jones, Aurora Martinez (The Honorable) 00081717
4	Date	5 Payee name
	02/21/2023	Austin Black Lawyers Association
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$131.42	P.O. Box 13321
L		Austin, TX 78711
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		Landricon opensoreinp
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
⊨	Date	Payee name
	06/23/2023	Austin Convention Center
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$26.00	500 E. Cesar Chavez St
		Austin, TX 78701
	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  Parking for CLE
		Taking for SEE
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	06/26/2023	Austin Convention Center
	Amount (\$) \$10.00	Payee address; City; State; Zip Code 500 E. Cesar Chavez St
	\$10.00	500 E. Cesai Chavez St
		A
		Austin, TX 78701
	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
		Parking for CLE
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
l		

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

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### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_		· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1: Sch: 6/12 Rpt: 18/27	2 FILER NAME Jones, Aurora Martinez (The Honorable) 3 Filer ID (Ethics Commission Filers) 00081717
4	Date	5 Davida nama
4	04/27/2023	5 Payee name H-E-B
6	Amount (\$)	7 Payee address; City; State; Zip Code
ľ	\$30.26	646 S. Flores St
	φ30.20	040 3. FIDIES 31
		San Antonio, TX 78204
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Refreshments for Office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>1</del>
	Date	Payee name
	05/22/2023	Hobby Lobby
	Amount (\$)	Payee address; City; State; Zip Code
	\$43.25	7707 S.W. 44th St
		Oklahoma City, OK 73179
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Office Furniture
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	04/12/2023	National Association of Drug Court Professionals
	Amount (\$)	Payee address; City; State; Zip Code
	\$60.00	625 N. Washington St
		Ste. 212
		Alexandria, VA 22314
	DUDDOOF	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Dues
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		

### 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	e this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 7/12 Rpt: 19/27	Jones, Aurora Martinez (The Honorable)	00081717
4	Date	5 Payee name	·
	06/20/2023	Office Depot	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$181.96	6600 North Military Trl	
		Boca Raton, FL 33496	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) D	Description
	OF EXPENDITURE	Printing Expense	Check if travel outside of Texas. Complete Schedule T.
		L	Check if Austin, TX, officeholder living expense
		, and the second se	averme Board materials
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
F	Date	Payee name	
	04/26/2023	Sam's Club	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$133.62	2101 Southeast Simple Savings Dr	
l	¥200.02		
l		Bentonville, AR 72712	
┝	PURPOSE		No exercised to as
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description  Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	T God/Deverage Expense	Check if Austin, TX, officeholder living expense
		F	Refreshments for Court Event
L			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L			
	Date	Payee name	
L	04/26/2023	Sam's Club	
l	Amount (\$)	Payee address; City; State; Zip Code	
	\$7.96	2101 Southeast Simple Savings Dr	
L		Bentonville, AR 72712	
l	PURPOSE OF	· · · · · · · · · · · · · · · · · · ·	Description
	EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		L   F	Cleck in Austin, 12, oincertoider living expense
			<del></del>
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
l			

### 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 (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 8/12 Rpt: 20/27	Jones, Aurora Martinez (The Honorable) 00081717
4	Date	5 Payee name
	04/27/2023	Starbucks
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5.47	2401 Utah Ave S
		S-CR1
		Seattle, WA 98134
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Refreshement for Staff
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/12/2023	State Bar of Texas
	Amount (\$)	Payee address; City; State; Zip Code
	\$520.00	1414 Colorado 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
		CLE
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payeo namo
	04/12/2023	Payee name State Bar of Texas
	Amount (\$)	Payee address; City; State; Zip Code 1414 Colorado St
	\$20.00	1414 Colorado 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
		Dues
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### 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 Expens Legal Services

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	d 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: 9/12 Rpt: 21/27	Jones, Aurora Martinez (The Honorable) 00081717	
4	Date	5 Payee name	
	05/02/2023	Target	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$32.48	1000 Nicollet Mall	
		Missopplie MN FF 402	
		Minneapolis, MN 55403	
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	
		Office Furniture	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	
	Date	Payee name	_
	05/02/2023	Target	
	Amount (\$)		
	` '		
	\$6.81	1000 Nicollet Mall	
		Minneapolis, MN 55403	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Office Overhead/Rental Expense	
	EXPENDITURE	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	H	
	Date	Payee name	_
	04/11/2023	Texas Bar Foundation	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$300.00		
	Φ300.00	515 Congress Ave	
		Ste. 1755	
		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.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Dues	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	
			_

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

	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: 10/12 Rpt: 22/27	Jones, Aurora Martinez (The Honorable) 00081717
4	Date	5 Payee name
	06/05/2023	Texas Bar Foundation
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	515 Congress Ave
		Ste. 1755
		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  Dues
		Dues
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/03/2023	Texas Board of Legal Specialization
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	505 E. Huntland Dr
		Suite 400, LB 28
		Austin, TX 78752
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Board Certification Fees
L	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
H	Date	Davies norma
	01/04/2023	Payee name Texas Latinx Judges
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	P.O. Box 90683
		San Antonio, TX 78209
	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
		Dues
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
T		

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

Printing Expense

	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: 11/12 Rpt: 23/27	Jones, Aurora Martinez (The Honorable) 00081717
4	Date	5 Payee name
	05/05/2023	Tiff's Treats
6	Amount (\$) \$39.98	7 Payee address; City; State; Zip Code 8310-1 N. Capital of Texas Hwy Ste. 110
		Austin, TX 78731
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Refreshments for Staff
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/14/2023	Travis County Women Lawyers
	Amount (\$) \$206.00	Payee address; City; State; Zip Code P.O. Box 160334
		Austin, TX 78716
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if Austin, TX, officeholder living expense Luncheon Sponsorship
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/13/2023	Wix.com
	Amount (\$) \$285.78	Payee address; City; State; Zip Code 500 Terry A Francois Blvd
		San Francisco, CA 94158
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign Website
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

	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: 12/12 Rpt: 24/27	Jones, Aurora Martinez (The Honorable) 00081717
4	Date	5 Payee name
	06/27/2023	Wix.com
6	Amount (\$) \$350.73	7 Payee address; City; State; Zip Code 500 Terry A Francois Blvd San Francisco, CA 94158
0	DUDDOCE	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Court Website - CPS Court
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/27/2023	Wix.com
	Amount (\$) \$64.95	Payee address; City; State; Zip Code 500 Terry A Francois Blvd
		San Francisco, CA 94158
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Court Website - CPS Court
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/28/2023	Wix.com
	Amount (\$) \$29.49	Payee address; City; State; Zip Code 500 Terry A Francois Blvd
		San Francisco, CA 94158
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Court Website - Specialty Court
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

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

### SCHEDULE K

	The Instru	pages Schedule K: 1/2 Rpt: 25/27					
2	FILER NAME		3	Filer II	C (Ethics Commission F	ilers)	
	Jones, Auroi	ra Martinez (The Honorable)	1717				
4	Date	5 Name of person from whom amount is received	<u> </u>		8 Amount (\$)		
	01/13/2023	Frost Bank				\$2.13	
		6 Address of person from whom amount is received; City; State; Zip Code			-		
		Address of person from whom amount is received, early, state, Esp code					
		San Antonio, TX 78205					
			olitic	ral cont	ribution returned to filer		
		Interest	Ontic	our com	indution returned to mer		
					1		
	Date	Name of person from whom amount is received			Amount (\$)	00.4.4	
	02/13/2023	Frost Bank				\$2.14	
		Address of person from whom amount is received; City; State; Zip Code					
		0 4 1 5 77 70007					
		San Antonio, TX 78205					
		Purpose for which amount is received	olitio	cal cont	ribution returned to filer		
	Date	Name of person from whom amount is received			Amount (\$)		
	03/13/2023	Frost Bank				\$2.01	
			"[				
		San Antonio, TX 78205					
		Purpose for which amount is received Check if p	olitio	cal cont	ribution returned to filer		
		Interest					
	Date	Name of person from whom amount is received			Amount (\$)		
	04/13/2023	Frost Bank				\$2.18	
		Address of person from whom amount is received; City; State; Zip Code			1		
		San Antonio, TX 78205					
		Purpose for which amount is received Check if p	olitio	cal cont	ribution returned to filer		
		Interest					
_	Date	Name of person from whom amount is received			Amount (\$)		
	05/11/2023	Frost Bank			(4)	\$1.86	
		Address of person from whom amount is received; City; State; Zip Code					
		Address of person from whom amount is received, Oily, State, 219 Gode					
		San Antonio, TX 78205					
			olitio	cal cont	ribution returned to filer		
		Interest					

## INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 2/2 Rpt: 26/27 2 FILER NAME Filer ID (Ethics Commission Filers) Jones, Aurora Martinez (The Honorable) 00081717 8 Amount (\$) Date 5 Name of person from whom amount is received 06/13/2023 \$2.09 Frost Bank 6 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78205 Purpose for which amount is received Check if political contribution returned to filer Interest Amount (\$) Name of person from whom amount is received Date 04/24/2023 Texas Board of Legal Specialization \$100.00 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78752 Purpose for which amount is received Check if political contribution returned to filer Partial refund of overpaid expense Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.a18ea2ca

OUTSTANDING LOANS			SCHEDULE L	
	The Instruction	on Guide explains how to complete this form.	1 Total pages Schedule L: Sch: 1/1 Rpt: 27/27 3 Filer ID (Ethics Commission Filers) 00081717	
2	FILER NAME Jones, Aurora N	Martinez (The Honorable)		
	LENDER INFORMATION	4 Name of lender Martinez Jones, Aurora (The Honorable)	·	
		5 Lender address; City; State; Zip Code		
		Austin, TX 78708		
	GUARANTOR INFORMATION	6 Name of guarantor		
	X not applicable	7 Guarantor address; City; State; Zip Code		