#### 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) 00081710 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Kirsten B. NAME Date Received **ELECTRONICALLY FILED** 07/14/2023 NICKNAME LAST **SUFFIX** Cohoon CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 179 South Main MAILING Receipt # Amount **ADDRESS** Ste. 102 Boerne, TX 78006 Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Tommy NAME NICKNAME LAST **SUFFIX** Mathews STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE: **TREASURER** 106 Busby Rd. **ADDRESS** (Residence or Business) Boerne, TX 78006 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (210) 602-2569 **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 451 Kendall

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# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM JC/OH COVER SHEET PG 2

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13 C / OH NAME	Cohoon, Kirsten B. (1	he Honorable)	14 Filer ID 00081710	(Ethics Commission Filers)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder. These expenditures may have been made without the candidate's or officed consent. Candidates and officeholders are required to report this information only if they receive not				
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURE	R NAME		
		COMMITTEE CAMPAIGN TREASURER	R ADDRESS		
 16 CONTRIBUTION		ZED POLITICAL CONTRIBUTIONS(OTI			
TOTALS		ES OF LOANS, OR CONTRIBUTIONS M	IADE ELECTRONICALLY)	\$ 0.00	
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES	OF LOANS)	\$ 0.00	
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00	
	4. TOTAL POLIT	CAL EXPENDITURES		<b>\$</b> 577.33	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS RIOD	OF THE LAST DAY OF THE	\$ 23,342.67	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING L TING PERIOD	OANS AS OF THE LAST DAY	\$ 0.00	
17 AFFIDAVIT		Laurer er effirm un	day panelty of paying, that the co		
			der penalty of perjury, that the acc includes all information required t on Code.		
		Т	he Honorable Kirsten B. Coho	oon	
		Si	gnature of Candidate or Officehol	lder	
AFFIX NO	TARY STAMP / SEAL AB	OVE			
Sworn to and subso	cribed before me, by the s	aid	, this the	day	
Sworn to and subscribed before me, by the said, this the, this the, to certify which, witness my hand and seal of office.				, , , , , , , , , , , , , , , , , , ,	
Signature of office	er administering oath	Printed name of officer administering	ng oath Title of office	r administering oath	

### **SUBTOTALS - JC/OH**

# FORM JC/OH COVER SHEET PG 3

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			3 01 /
<b>18</b> FILER NAME Cohoon, Ki	(Ethics Commission Filers)		
20 SCHEDULE NAME OF S	SUBTOTAL AMOUNT		
1. X	X SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$ 0.00
2. X	. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 0.00
3. X	3. X SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$ 0.00
4. X	4. X SCHEDULE E(J): LOANS (JUDICIAL)		
5. X	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		<b>\$</b> 577.33
6. X	6. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		
7. X	7. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS		
8. X	8. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 0.00
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$
	12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$
			•

PLEDGED CONTRIBUTIONS (JUDICIAL)		SCHE	DULE B(J)		
The Instruction Guide explains how to complete this form.		Total pages Schedule B(J):     Sch: 1/1 Rpt: 4/7			
2 FILER NAME Cohoon, Kirsten B. (The Honorable)	<b>3</b> Filer ID (	Ethics Commis	ssion Filers)		
TOTAL OF UNITEMIZED PLEDGES		0.00			
5 Date 6 Full name of pledgor out-of-state PAC (ID#:	8 Amount of pledge (\$)	9 In-kir (If	nd description applicable)		
7 Pledgor Address; City; State; Zip Code					
40 Pladada principal according	Check if travel	outside of Texa	as. Complete Schedule T.		
10 Pledgor's principal occupation 11 Pledgor's job title					
12 Pledgor's employer/law firm 13 Law firm of pledgor	r's spouse (if any)				
14 If pledgor is a child, law firm of parent(s) (if any)					

	LOANS (J	UDICIAL)				SCHEE	OULE E	(J)
	The Instruction Guide explains how to complete this form				ages Schedule E(J): /1 Rpt: 5/7			
2	2 FILER NAME Cohoon, Kirsten B. (The Honorable)			1	Filer ID	(Ethics Con	ımission Fil	ers)
4	TOTAL OF UN	IITEMIZED LOANS				0.00		
5	Date of loan	7 Name of lender out-of-state Pr	AC (ID#:		)	9 Loan Am	ount (\$)	
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code			10 Interest F		
					<b>11</b> Maturity	Date		
12	Lender's Principal	Occupation	13 Lender's Job Title			•		
14	Lender's Employe	r/Law Firm	15 Law Firm of lender's spous	se (if	any)			
16	6 If lender is child, la	w firm of parent(s) (if any)	1					
17	Description of Coll	ateral	18 Check if personal funds were deposited into political account (See Instructions)					
19	GUARANTOR INFORMATION	20 Name of guarantor				22 Amount	Suaranteed	l (\$)
23	not applicable  not applicable  Guarantor's Princi	21 Guarantor address; City; State; oal Occupation	Zip Code  24 Guarantor's Job Title					
25 Guarantor's Employer/Law Firm			26 Law Firm of guarantor's spouse (if any)					
			20 200 7 mm 0. gaa.a.no. 0 0p					
27	If guarantor is child	d, law firm of parent(s) (if any)						

### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### 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

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:	
L	Sch: 1/2 Rpt: 6/7	Cohoon, Kirsten B. (The Honorable) 00081710
4	Date 06/26/2023	5 Payee name GoDaddy
6	Amount (\$) \$32.16	7 Payee address; City; State; Zip Code 14455 North Hayden Road Suite 100 Scottsdale, AZ 85260
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  Website Hosting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/07/2023	GoDaddy
	Amount (\$) \$20.17	Payee address; City; State; Zip Code 14455 North Hayden Road Suite 100 Scottsdale, AZ 85260
	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  Website Hosting
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	04/14/2023	Las Palapas
	Amount (\$) \$40.00	Payee address; City; State; Zip Code 114 Herff Rd.
		Boerne, TX 78006
	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 Food for Staff
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### 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 Comm 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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		ot listed above)
1	Total pages Schedule F1: Sch: 2/2 Rpt: 7/7	1: 2 FILER NAME Schoon, Kirsten B. (The Honorable) 3 Filer ID (Ethics of O0081710)	Commission Filers)
4	Date 04/03/2023	5 Payee name Lupe Tortilla	
6	Amount (\$) \$101.00	7 Payee address; City; State; Zip Code 5838 Worth Parkway	
L		San Antonio, TX 78257	
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)  Check if Austin, TX, officeholder living expense  Lunch for Staff Appreciation Day.	dule T.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		
Г	Date	Payee name	
	01/30/2023	Rotary Club of Boerne	
	Amount (\$) \$384.00	Payee address; City; State; Zip Code  17 Old San Antonio Road	
		Boerne, TX 78006	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule)  Check if Austin, TX, officeholder living expense  Rotary Club Event	dule T.
	Complete ONLY if direct expenditure to benefit C/Ol		