CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM JCOR-C/OH

1	Filer ID (Eth	ics Commission Filors)	2 Total pages filed:			0==:0=	105 01111
_	00081652	ics Commission Filers)	20				JSE ONLY
3	CANDIDATE /	MS / MRS / MR	FIRST		MI	Date Received ELECTRONIC	
	OFFICEHOLDER	The Honorable	Alexander H			07/16/2023	ALLY FILED
	NAME	NICKNAME	LAST		SUFFIX		
		Alex	Kim			Date Hand delivered	- Data Dantus ada d
4	ORIGINAL	January 15	Runoff	Other (s	specify)	Date Hand-delivered o	r Date Postmarked
	REPORT TYPE	X July 15	Exceeded modified	reporting limit		Receipt #	Amount
		30th day before election	15th day after camp				
		8th day before election	appointment (office	• •		Date Processed	
5	ORIGINAL PERIOD	Month Day Yea	ar	Month Day	Year	Date Imaged	
-	COVERED	01/01/2023	THROUGH	06/30/2023		Date imaged	
6	EXPLANATION OF C	CORRECTION					
		ees withheld by anedot, an					
	individual transaction	fees, the largest individual	fee being \$39.30. I rep	oorted the fees in aggr	egate per the a	advice given by the	TEC.
	This correction is made	de prior to the filing deadlin	e for the July Semi-anr	nual report of Monday,	July 17, 2023.		
_	AEEID AV // T						
1	AFFIDAVIT		Isw	ear, or affirm, under p	enalty of perjur	y, that this correcte	d report is true
			and	correct.			
			Che	ck the box next to any	and all applica	able statements:	
			X	Semiannual reports	s: I swear, or	r affirm that the orig	inal report
				was made in good fa			d or to
				misrepresent the info	omation contal	med in the report.	
				Other reports: 1 s			
			_	report not later than that the report as ori			
				swear, or affirm, that			
				filed was made in go	ood faith.		
				The F	Honorable Ale	exander H Kim	
				Signatu	re of Candidate	e or Officeholder	
	AFFIX NOTARY ST	AMP / SEAL ABOVE					
	Consum to available	wile ad leafene were levels	ما		ale: ·	No. o	ale: ·
	Sworn to and subsc	ribed before me, by the sai	Utituubiob_uuitmaaa_maa_t	hand and soal of office	, this t	rue	day
	of	, 20, to cer	uiy wnich, withess my l	nand and seal of office	÷.		
	Signature of office	er administering oath	Printed name of of	ficer administering oa	th	Title of officer admi	nistering oath
	Signature of office	2. Administrating oddin	tog rigino of of	aa.iiiiiotoiiiig oa		o. omoor dami	g oan

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

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) 00081652 20 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Alexander H NAME Date Received **ELECTRONICALLY FILED** 07/16/2023 NICKNAME LAST **SUFFIX** Alex Kim CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 1121 Garden Ln. MAILING Amount Receipt # **ADDRESS** Keller, TX 76262 Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Monty NAME NICKNAME LAST **SUFFIX** Bonnett STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 14185 Dallas Pkwy **ADDRESS** (Residence or Business) Dallas, TX 75254 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (972) 490-9600 **PHONE** REPORT TYPE January 15 30th day before election 15th day after campaign treasurer Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit

Month

Month

Day

Day

OFFICE HELD (if any)

ELECTION DATE

01/01/2023

Year

Year

Family District Court Judge District 323 Tarrant

PERIOD

10 ELECTION

11 OFFICE

COVERED

THROUGH

Primary

General

Month

ELECTION TYPE

Runoff

Special

Day

06/30/2023

12 OFFICE SOUGHT (if known)

Year

Other

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

3 of 20

13 C / OH NAME	Kim, Alexander H (Th	ne Honorable)	14 Filer ID 00081652	(Ethics Commission Filers)		
This box is for notice of political contributions accepted or political expenditures made by political committees to support candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.						
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC	COMMITTEE ADDICESS				
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS			
16 CONTRIBUTION TOTALS		I IZED POLITICAL CONTRIBUTIONS(OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00		
2. TOTAL POLITICAL CONTRIBUTIONS				\$ 11,410.00		
EXPENDITURE TOTALS	(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$ 0.00		
	4. TOTAL POLIT	\$ 2,005.31				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 37,281.09		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF	PAL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 96,000.00		
17 AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.				
		The Hono	orable Alexander H K	üm		
		Signature of	f Candidate or Officeho	lder		
AFFIX NO	TARY STAMP / SEAL AB	OVE				
		aid	, this the	day		
of	, 20, to c	ertify which, witness my hand and seal of office.				
Signature of offi	cer administering oath	Printed name of officer administering oath	Title of office	er administering oath		
Signature or one	cer auministening vatil	rinited name of onicer administering Odin	Title of office	aummistering Udtii		

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			4 of 20	
18 FILER Kim, A	(Ethics Commission Filers)			
	20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			
1.	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$ 11,410.00	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$ 2,005.31	
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		\$	
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

	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: 1/10 Rpt: 5/20
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Kim, Alexan	der H (The Honorable)		00081652
4	Date 01/09/2023	 Full name of contributor	:)	7 Amount of Contribution (\$) \$25.00
		Haltom City, TX 76137		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
	Retired		Retired	
10	Contributor's Retired	employer/law firm	11 Law firm of contributor's s	pouse (if any)
12		s a child, law firm of parent(s) (if any)		
12	z ii contributor i	s a criliu, law liffil of parefil(s) (ii arry)		
	Date	Full name of contributor ut-of-state PAC (ID#	:)	Amount of Contribution (\$)
	06/06/2023	Bennett, Montgomery		\$5,000.00
		Contributor address; City; State; Zip Code		
		Dallas, TX 75254		
	Contributor's	I Principal Occupation	Contributor's Job Title	
	Hospitality		President	
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
	Ashford Hos	spitality Trust, Inc		
	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor ut-of-state PAC (ID#	:)	Amount of Contribution (\$)
	03/02/2023	Bill, de Decker		\$100.00
		Contributor address; City; State; Zip Code		<u>"</u>
		Arlington, TX 76012		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Consultant		Consultant	
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
	C&D Associ	ates		
	If contributor i	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL CON	ITRIBUTIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to c	omplete this form.	1 Total pages Schedule A(J)1: Sch: 2/10 Rpt: 6/20
2	FILER NAME	der H (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081652
4	Date 03/02/2023	5 Full name of contributor out Carr, Alice 6 Contributor address; City; State; Zi	7 Amount of Contribution (\$) \$25.00	
		Krum, TX 76249		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	,
	Transportati		Bus Driver	
10	Contributor's Krum ISD	employer/law firm	11 Law firm of contributo	r's spouse (if any)
12	! If contributor i	s a child, law firm of parent(s) (if any)		
Date Full name of contributor out-of-state PAC (ID# 01/19/2023 DeOtte, Richard		it-of-state PAC (ID#:	Amount of Contribution (\$) \$1,000.00	
		Contributor address; City; State; Zi Southlake, TX 76092	p Code	
	Contributor's	I Principal Occupation	Contributor's Job Title	<u> </u>
	Civil Engine		Civil Engineer	
	Contributor's DeOtte, Inc.	employer/law firm	Law firm of contributo	r's spouse (if any)
		s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor ou	ut-of-state PAC (ID#:) Amount of Contribution (\$)
	03/02/2023	Dickison, Lisa		\$25.00
		Contributor address; City; State; Zi	p Code	
		Waco, TX 76710		
		Principal Occupation	Contributor's Job Title	
		ort Specialist	Senior Support Spe	
	Contributor's American In	employer/law firm	Law firm of contributo	r's spouse (if any)
		s a child, law firm of parent(s) (if any)		

I	MONET	ARY POLITICAL CON	ITRIBUTIONS	SCHEDULE A(J)1
7	Γhe Instru	ction Guide explains how to c	omplete this form.	1 Total pages Schedule A(J)1: Sch: 3/10 Rpt: 7/20
2 F	ILER NAME			3 Filer ID (Ethics Commission Filers)
ŀ	Kim, Alexan	der H (The Honorable)		00081652
	Date 03/02/2023 5 Full name of contributor out-of-state PAC (ID#:) Dodson, George 6 Contributor address; City; State; Zip Code			7 Amount of Contribution (\$) \$50.00
		Colleyville, TX 76034		
8 (Contributor's	Principal Occupation	9 Contributor's Job	Title
	Computer C	·	Retired	
10 (employer/law firm	11 Law firm of contri	butor's spouse (if any)
		s a child, law firm of parent(s) (if any)	L	
	N-4-		t-of-state PAC (ID#:	Amount of Operation (D)
	Date Nevoevanaa	<u> </u>	Amount of Contribution (\$)	
(06/08/2023 Graham, Joshua Contributor address; City; State; Zip Code			\$500.00
		NRH, TX 76180		
(Contributor's	Principal Occupation	Contributor's Job	Title
A	Attorney		Attorney	
(Contributor's	employer/law firm	Law firm of contri	butor's spouse (if any)
J	Ioshua Gral	nam Trial Lawyers		
li	f contributor i	s a child, law firm of parent(s) (if any)	•	
	Date	Full name of contributor ou	t-of-state PAC (ID#:	Amount of Contribution (\$)
C	03/02/2023	H.B., Wise		\$50.00
		Contributor address; City; State; Zi Arlington, TX 76012	p Code	
	Contributor's		Contributor's Job	Title
	Mechanic	Principal Occupation	Manager	Tiue
		employer/law firm		butor's spouse (if any)
	Self	simployer/iaw iiiii	Eaw IIIII of contri	bator 5 spouse (ii arry)
li	f contributor i	s a child, law firm of parent(s) (if any)		

ľ	MONET	ARY POLITICAL CO	ONTRIBUTIO	DNS	SCHEDULE A(J)1
7	Γhe Instru	ction Guide explains how to	o complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 4/10 Rpt: 8/20
	FILER NAME Kim, Alexan	der H (The Honorable)			3 Filer ID (Ethics Commission Filers) 00081652
4 C	Date 03/08/2023 5 Full name of contributor uut-of-state PAC (ID#:) Hall, Phillip 6 Contributor address; City; State; Zip Code			7 Amount of Contribution (\$) \$500.00	
		Fort Worth, TX 76102			
8 C	Contributor's	Principal Occupation		9 Contributor's Job Title	
	Attorney			Attorney	
	Contributor's Phillip Hall, A	employer/law firm Attorney		11 Law firm of contributor's s	pouse (if any)
12 If	f contributor i	s a child, law firm of parent(s) (if any)		
	Date 03/02/2023	Full name of contributor Hall, Ray	out-of-state PAC (ID#:_		Amount of Contribution (\$) \$250.00
	33,02,2020	Contributor address; City; State Haltom City, TX 76117	e; Zip Code		\$250.00
	Contributor's	Principal Occupation		Contributor's Job Title	
	Attorney	inisipai eesapailen		Attorney	
C	Contributor's	employer/law firm		Law firm of contributor's s	oouse (if any)
L	aw Office o	f Ray Hall Jr.			
lf	f contributor i	s a child, law firm of parent(s) (if any)		
С	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
0	03/02/2023	Hayes, Brenda			\$50.00
		Contributor address; City; State Mansfield, TX 76063	e; Zip Code		
	Contributor's	Principal Occupation		Contributor's Job Title	
	President	····o.pai o ocapation		President	
C	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
lı	nterquest D	etection Canines of North Texa			
lf	f contributor i	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL (CONTRIBUTIO	DNS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 5/10 Rpt: 9/20
2	FILER NAME Kim, Alexand	der H (The Honorable)			3 Filer ID (Ethics Commission Filers) 00081652
4	Date 03/08/2023	5 Full name of contributor out-of-state PAC (ID#:) 7		7 Amount of Contribution (\$) \$2,000.00	
		Fort Worth, TX 76102		Γ	
8	Contributor's I Attorney	Principal Occupation		Contributor's Job Title Attorney	
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	pouse (if any)
		ernandez, Attorney			
12	If contributor is	s a child, law firm of parent(s) (if a	any)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	03/03/2023 Hoover, Jeff Contributor address; City; State; Zip Code			\$300.00	
	Canadurila uta ula I	Fort Worth, TX 76102		Contributor's Job Title	
	Attorney	Principal Occupation		Attorney	
		employer/law firm		Law firm of contributor's sp	acusa (if am)
		of Jeff Hoover		Law IIIII of Contributor 5 Sp	ouse (ii ariy)
		s a child, law firm of parent(s) (if a	any)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	03/08/2023	Janiak, Stephanie	_		\$150.00
		Contributor address; City; St Fort Worth, TX 76126	ate; Zip Code		
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>
	Chiropractor			Chiropractor	
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	Essential Pa	in Relief			
	If contributor is	s a child, law firm of parent(s) (if a	nny)		

	MONET	ARY POLITICAL CONTR	RIBUTIC	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains how to comp	lete this f	orm.	1	ges Schedule A(J)1: 10 Rpt: 10/20	
2	FILER NAME Kim, Alexand	der H (The Honorable)			3 Filer ID 000816	(Ethics Commission 652	n Filers)
4	Date 03/02/2023	5 Full name of contributor			7 Amount	of Contribution (\$)	\$25.00
8	Contributor's I	Arlington, TX 76018 Principal Occupation		9 Contributor's Job Title	<u> </u>		
Ū	Sonographe			Sonographer			
10	Contributor's	employer/law firm ealth System		11 Law firm of contributor's sp	oouse (if any)		
12		s a child, law firm of parent(s) (if any)		<u> </u>			
	Date	Full name of contributor out-of-st	ate PAC (ID#:_)	Amount	of Contribution (\$)	
	03/02/2023 King, Sheridan Contributor address; City; State; Zip Code				(,	\$100.00	
	Contributorio	Bedford, TX 76021		Contributor's Job Title	<u> </u>		
	Retired	Principal Occupation		Retired			
		employer/law firm		Law firm of contributor's sp	ouse (if any)		
	retired	employer/law iiim		Law IIIII of Contributor's Sp	ouse (II ally)		
	If contributor is	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out-of-st	ate PAC (ID#:_		Amount	of Contribution (\$)	
	03/02/2023	Markham, Joseph Contributor address; City; State; Zip Cod	de				\$100.00
	Canadurila uta ula I	Keller, TX 76248		Constributed to Joh Title			
	Firefighter	Principal Occupation		Contributor's Job Title Firefighter			
		employer/law firm		Law firm of contributor's sp	nouse (if anv)	1	
	City of Arling			Law IIIII of Contributor 3 3p	ouse (ii aiiy)		
		s a child, law firm of parent(s) (if any)		<u> </u>			

	MONET	ARY POLITICAL CONTRIBU	TIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete th	nis form.	1 Total pages Schedule A(J)1: Sch: 7/10 Rpt: 11/20
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Kim, Alexan	der H (The Honorable)		00081652
4	Date	5 Full name of contributor ut-of-state PAC	(ID#:)	7 Amount of Contribution (\$)
	03/08/2023	Mogged, Chuck		\$50.00
		6 Contributor address; City; State; Zip Code		
		Colleyville, TX 76034		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
	Retired		Retired	
10	Contributor's	employer/law firm	11 Law firm of contributor's s	spouse (if any)
	Retired			
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 (\$)
	03/08/2023	Puente, Vince		\$250.00
		Contributor address; City; State; Zip Code		··
		Fort Worth, TX 76112		
	Contributor's	l Principal Occupation	Contributor's Job Title	
	President		President	
	Contributor's	employer/law firm	Law firm of contributor's s	spouse (if any)
		Office Systems		
		s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC	(ID#·)	Amount of Contribution (\$)
	03/02/2023	Reddy, Stacey	(\$100.00
		Contributor address; City; State; Zip Code		
		Richland Hills, TX 76118		
-	Contributor's	Principal Occupation	Contributor's Job Title	
	Information		Secure Mail Architect	
		employer/law firm	Law firm of contributor's s	spouse (if any)
	MTA Securit			(* 5.7)
_		s a child, law firm of parent(s) (if any)		
_				

MONET	ARY POLITICAL CONT	RIBUTIONS	SCHEDULE A(J)1
The Instru	ction Guide explains how to com	nplete this form.	1 Total pages Schedule A(J)1: Sch: 8/10 Rpt: 12/20
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Kim, Alexan	der H (The Honorable)		00081652
4 Date 03/02/2023			7 Amount of Contribution (\$) \$10.00
	Hurst, TX 76054		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
Student		Student	
10 Contributor's	employer/law firm	11 Law firm of contributor's s	pouse (if any)
N/A			
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 (\$)
03/08/2023	Sanders, Robert	\$50.00	
	Contributor address; City; State; Zip C	ode	
	Euless , TX 76039		
	Principal Occupation	Contributor's Job Title	
Legal Intern		Intern	
Contributor's of Self	employer/law firm	Law firm of contributor's s	pouse (if any)
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 (\$)
03/08/2023	Schneider, Michael		\$500.00
	Contributor address; City; State; Zip C	ode	
	FW, TX 76102		
Contributor's	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
	employer/law firm	Law firm of contributor's s	pouse (if any)
Schneider L	aw		
If contributor i	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	1	Total pages Schedule A(J)1: Sch: 9/10 Rpt: 13/20		
2	FILER NAME Kim. Alexan	der H (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081652
4	Date 03/02/2023	5 Full name of contributor out-of-state PAC (ID#:) 7		7	Amount of Contribution (\$) \$25.00	
		Euless, TX 76039				
8		Principal Occupation		9 Contributor's Job Title		
10	Retired	and a conflored finance		Retired		on (if any)
10	Retired	employer/law firm		11 Law firm of contributor's sp	ous	se (II any)
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)	I		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)
	03/06/2023	Sutton, Jim Contributor address; City;	State; Zip Code			\$25.00
		Haltom, TX 76137		I		
	Software En	Principal Occupation		Contributor's Job Title Software Engineer		
L		employer/law firm		Law firm of contributor's sp	יחווי	se (if any)
	Lockheed/M			Law mm or contributor 5 of	Jour	oo (ii aiiy)
	If contributor is	s a child, law firm of parent(s) (i	f any)	I.		
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	03/08/2023	Tipton, Ty Contributor address; City; Irving, TX 75061	State; Zip Code			\$50.00
H	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Sales			Sales		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Tipton Insura	ance				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	SCH	SCHEDULE A(J)1				
	The Instru	ction Guide explains how to complete this f		Total pages Sche Sch: 10/10 Rpt			
2	FILER NAME			1	Filer ID (Ethics	Commission	Filers)
	Kim, Alexand	der H (The Honorable)			00081652		
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contri	bution (\$)	
	03/02/2023	Wilson, Rowland					\$100.00
		6 Contributor address; City; State; Zip Code					
		Bedford, TX 76021					
Ω	Contributor's F	Principal Occupation	9 Contributor's Job Title				
o	Retired	Tincipal Occupation	Retired				
10		employer/law firm	11 Law firm of contributor's sp	00US	e (if anv)		
	Retired	· · · · · · · · · · · · · · · · · · ·		, , , , , , , , , , , , , , , , , , , ,	- (·· -· ·· <i>y)</i>		
12		s 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 C

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
OTHER (order a category not listed above)

	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: 1/5 Rpt: 15/20	Kim, Alexander H (The Honorable) 00081652
4	Date	5 Payee name
	06/30/2023	Anedot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$79.99	1920 McKinney Ave
		Dallas, TX 75201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		processing fees
<u>_</u>	Operation ONE VIII II	On didn't 10 ff a halden game
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/23/2023	Rocket Science Group
	Amount (\$)	Payee address; City; State; Zip Code
	\$255.84	675 Ponce De Leon Ave NE
		5000
		Atlanta, GA 30308
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Mailchimp
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiantare to benefit or of	
	Date	Payee name
	02/23/2023	Rocket Science Group
	Amount (\$)	Payee address; City; State; Zip Code
	\$255.84	675 Ponce De Leon Ave NE
		5000
		Atlanta, GA 30308
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Mailchimp
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiorare to belief C/OI	

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

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

t 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: Sch: 2/5 Rpt: 16/20	2 FILER NAME Kim, Alexander H (The Honorable) 3 Filer ID (Ethics Commission Filers) 00081652
4	Date 03/23/2023	5 Payee name Rocket Science Group
6	Amount (\$) \$255.84	7 Payee address; City; State; Zip Code 675 Ponce De Leon Ave NE 5000 Atlanta, GA 30308
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 mail chimp
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 04/24/2023	Payee name Rocket Science Group
	Amount (\$) \$255.84	Payee address; City; State; Zip Code 675 Ponce De Leon Ave NE 5000 Atlanta, GA 30308
	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 mail chimp
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 05/23/2023	Payee name Rocket Science Group
	Amount (\$) \$255.84	Payee address; City; State; Zip Code 675 Ponce De Leon Ave NE 5000 Atlanta, GA 30308
	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 mail chimp
	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 Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expens Legal Services The Instruction Guide ex	e Printing Salaries		Contract Labor	Travel in Distric Travel Out of Di OTHER (enter a	
1	Total pages Schedule F1:	2 FILER NAM	 E		-		3 Filer ID	(Ethics Commission Filers)
	Sch: 3/5 Rpt: 17/20		– nder H (The Honorabl	e)			00081652	,
4	Date	5 Payee name	?					
	06/23/2023		ence Group					
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip C	Code			
	\$255.84	675 Ponce	De Leon Ave NE					
		5000						
		Atlanta, GA	A 30308					
8	PURPOSE	(a) Category (s	See Categories listed at the top o	f this schedule)	(b) [Description		
	OF EXPENDITURE	Advertising		,		=	outside of Texas. Con	
	EXI ENDITORE				[_	TX, officeholder livin	g expense
						mail chimp		
9	Complete ONLY if direct	Candidate/Of	ficeholder name	Office so	l l		Office h	ald
Ľ	expenditure to benefit C/O		nocholaci name	Onice 50	ragiit		Onice II	Ciu
	Date	Payee name						
L	01/03/2023	Texas Elite	Custom Printing					
	Amount (\$)	Payee addre	ess; City;	State; Zip C	Code			
	\$266.92	100 Private	e Rd					
L		Covington,	TX 76636					
	PURPOSE OF		See Categories listed at the top o	f this schedule)	(b) [Description		
	EXPENDITURE	Advertising	Expense		[=	outside of Texas. Con TX, officeholder livin	
						Shirts	, sseriolaer iiviii	gpor-roo
Г	Complete ONLY if direct		ficeholder name	Office so	ught		Office h	eld
	expenditure to benefit C/O	1						
	Date	Payee name	<u>,</u>					
	01/30/2023	Wix.com						
	Amount (\$)	Payee addre	ess; City;	State; Zip C	ode			
	\$20.56	PO 248						
		Leander, T	X 78646					
	PURPOSE	(a) Category (s	See Categories listed at the top o	f this schedule)	(b) [Description		
	OF EXPENDITURE	Advertising			[outside of Texas. Con	·
					'	Check if Austin, Webhosting	TX, officeholder livin	g expense
						**CDITOSHING		
\vdash	Complete ONLY if direct	Candidate/Of	ficeholder name	Office so	l ught		Office h	eld
	expenditure to benefit C/O			200 30	g.11		00011	

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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/5 Rpt: 18/20	Kim, Alexander H (The Honorable) 00081652
4	Date	5 Payee name
	03/01/2023	Wix.com
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.56	PO 248
		Leander, TX 78646
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Hosting
		1 losuring
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
⊨	Date	Development
	03/28/2023	Payee name Wix.com
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.56	PO 248
		Leander, TX 78646
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense hosting
		instancy in the second
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	05/01/2023	Wix.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.56	PO 248
	720.00	
		Leander, TX 78646
	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	Check if Austin, TX, officeholder living expense
		hosting
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiulture to beriefft C/Of	1

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

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 com	nplete	e this form.		
1	Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
l	Sch: 5/5 Rpt: 19/20	Kim, Alexander H (The Honorable)			00081652	
4	Date	5 Payee name		<u> </u>		
	05/30/2023	Wix.com				
6	Amount (\$) \$20.56	7 Payee address; City; State; Zip Code PO 248	le			
l						
		Leander, TX 78646				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) [Description		
l	OF EXPENDITURE	Advertising Expense		Check if travel outsid		
			Ļ	Check if Austin, TX, o	officeholder living	expense
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Ļ	Commiste ONII V if disease	Canadidate/Office had day name	. la.t		Office he	I.a.
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	mu		Office he	iu
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l	Date	Payee name				
	06/30/2023	Wix.com				
	Amount (\$)	Payee address; City; State; Zip Code	le			
l	\$20.56	PO 248				
l						
		Leander, TX 78646				
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) [Description		
l	OF EXPENDITURE	Advertising Expense		Check if travel outsid		
l	EXI ENDITORE		Ė	Check if Austin, TX, o	officeholder living	expense
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l	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	mu		Office he	iu
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	OUTSTAN	SCHEDULE L	
	The Instruction	on Guide explains how to complete this form.	1 Total pages Schedule L: Sch: 1/1 Rpt: 20/20
2	FILER NAME Kim, Alexander	H (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081652
	LENDER INFORMATION	4 Name of lender Kim, Alexander	·
		5 Lender address; City; State; Zip Code	
		Fort Worth, TX 76111	
	GUARANTOR INFORMATION	6 Name of guarantor	
	X not applicable	7 Guarantor address; City; State; Zip Code	