### JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to o	complete this form.	1 Filer ID (Ethics Comm 00066111	,	2 Total pages	s filed:
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		
OFFICEHOLDER NAME	The Honorable	Bonnie L.			OFFICE Date Received	E USE ONLY
						CALLY FILED
					01/16/2024	ONCE THEED
	NICKNAME	LAST		SUFFIX	01/10/2024	
		Goldstein				
4 CANDIDATE /	ADDRESS / PO BOX;	APT / SUITE #; CI	TY;	ZIP CODE	Date Hand-delivere	d or Date Postmarked
OFFICEHOLDER						
MAILING ADDRESS		2E4 0212 COV/IT	CODE		Receipt #	Amount
	REDACTED PER	254.0313, GOV'T (	CODE			
Change of Address					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER	Mr.	Thomas				
NAME	1011.	momas				
	NICKNAME	LAST			SUFFIX	
	Tom	Melsheimer				
6 CAMPAIGN	STREET ADDRESS (NO	O PO BOX PLEASE);	AP	T / SUITE #; CITY;	S	STATE; ZIP CODE
TREASURER						
ADDRESS		254 0212 COV/T				
(Residence or Business)	REDACTED PER	254.0313, GOV'T (	CODE			
7 CAMPAIGN	AREA CODE P	HONE NUMBER	EXTENSION			
TREASURER			EXTENSION			
PHONE	(214) 929-1443					
8 REPORT TYPE		20th day befor		Dunoff	1 Eth day, aftar	compaign tracquirer
	X January 15	30th day befor	e election	Runoff		campaign treasurer officeholder only)
	July 15	8th day before	election	Exceeded modified	Final Report (/	Attach C/OH-FR)
				reporting limit	```	,
9 PERIOD	Month Day Y	ear		Month Day	Year	
COVERED	07/01/2023		HROUGH	12/31/202		
	01/01/2023			12/31/202	5	
		_ 1				
10 ELECTION	ELECTION DAT			ELECTION TYPE	_	
	,	ear X	Primary	Runoff	Other	
	03/05/2024		General	Special		
					(if long to the long)	
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
	Court Of Appeals, Jus	suce Place 3 Distric	a 5 Dallas	Supreme Court 3	Justice Place 6	)
		<b>~</b> ~				
		GO	TO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.e	thics.state.tx.u	S	Ve	ersion V3.5.1.0bfcfb6

### JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 11

I

13 C / OH NAME	Goldstein, Bonnie L.	(The Honorable)	14 Filer ID 00066111	(Ethics Com	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expend These expenditures may have been made withou officeholders are required to report this informati	it the candidate's or offic	eholder's kno	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDR	ESS		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS(OTHER TH ES OF LOANS, OR CONTRIBUTIONS MADE EL		\$	0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOA		\$	0.00
EXPENDITURE	NS)	\$	0.00		
TOTALS					0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		\$	13,348.69
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$	37,767.86
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A TING PERIOD	S OF THE LAST DAY	\$	0.00
17 AFFIDAVIT					
		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code	all information required	ccompanying to be reporte	report is d by me
			rable Bonnie L. Golds		
		Signature	of Candidate or Officeho	older	
AFFIX NO	TARY STAMP / SEAL AB	DVE			
Sworn to and subs	cribed before me, by the s	aid	, this the		day
of	, 20, to c	ertify which, witness my hand and seal of office.			
Signature of offic	cer administering oath	Printed name of officer administering oath	Title of office	er administeri	ng oath
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us		Version V	'3.5.1.0bfcfb67

# FORM JC/OH COVER SHEET PG 3

3 0	of 11
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18 FILER NAM	E	(Ethics Commission Filers)	
	Bonnie L. (The Honorable)	00066111	1
20 SCHEDULE NAME OF S			SUBTOTAL AMOUNT
1.	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$
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 CONTRIBUTION	5	<b>\$</b> 13,348.69
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 TO FILER	RETURNED	\$

SUBTOTALS - JC/OH

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Cor	Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense nmittee Legal Services The Instruction Guide expla	Office O Polling E Printing Salaries	verhea Expens Expen /Wage	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 1/8 Rpt: 4/11		Goldstein, Bonnie L. (The Honorab	le)				00066111			
4	Date	5	Payee name								
	07/04/2023		American Bar Association								
6	Amount (\$)	7	Payee address; City; S								
	\$695.00		321 North Clark Street								
	Chicago, IL 60654										
8	PURPOSE	(a)	Category (See Categories listed at the top of thi	ia ashadula)	(b)	Description					
Ĩ	OF	(,	Event Expense	is schedule)	(,		outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE					Check if Austin	ı, ТХ,	, officeholder living expense			
								ABA 2023 AJEI Summit in			
						Washington,	D.C	J.			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office so	ught			Office held			
		1									
	Date		Payee name								
	11/16/2023		Arts District Mansion 2520								
	Amount (\$)		Payee address; City; S	tate; Zip C	ode						
	\$73.26		2101 Ross Ave.								
			Dallas, TX 75201								
	PURPOSE	(a)	Category (See Categories listed at the top of the	is schedule)	(b)	Description					
	OF EXPENDITURE		Event Expense Check if travel outside of Texas. Complete Schedule T.								
								, officeholder living expense			
						and staff atto					
	Complete ONLY if direct		Candidate/Officeholder name	Office so	ught			Office held			
	expenditure to benefit C/OI	Н			Ū						
	Date		Payee name								
	10/19/2023		Arts District Mansion 2520								
	Amount (\$)		Payee address; City; S	tate; Zip C	ode						
	\$38.25		2101 Ross Ave.	uuo, <u>Lip</u> e	.000						
	\$00.20										
			Dallas, TX 75201								
-	PURPOSE	(a)	Category (See Categories listed at the top of thi	is schedulo)	(b)	Description					
	OF		Food/Beverage Expense	is scriedule)			outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE							, officeholder living expense			
								and CLE for 5th Circuit Panel			
						Appenate Se		on and DBA, Judge & Staff Attorney			
	Complete ONLY if direct		Candidate/Officeholder name	Office so	ught			Office held			
	expenditure to benefit C/OI	н									

			EXPEND	ITURE CATEGOR	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mittee Legal Services	morials Expense	Office Over Polling Exp Printing Exp Salaries/Wa	ense ges/Contract Labor		Travel in District Travel Out of District	oment & Related Expense
_		1_		ion Guide explains ł	how to con	plete this form.	1_		··· - · · · - · · ·
1	Total pages Schedule F1: Sch: 2/8 Rpt: 5/11		FILER NAME Goldstein, Bonnie L. (1	he Honorable)			3	Filer ID (E 00066111	Ethics Commission Filers)
4	•			ne nonorable)				00000111	
4	08/01/2023		Payee name Beto & Son						
6	Amount (\$) \$147.96		Payee address; City; 3011 Gulden Lane, #1 Dallas, TX 75212		; Zip Cod	e			
8	PURPOSE OF EXPENDITURE		Category <sub>(See Categories lis</sub> Food/Beverage Expen		edule) (	Check if Austin Lunch with in	n, ⊤x, nteri	ide of Texas. Complete , officeholder living exp n K. Panjwani, Doug Frobese a	and staff attorneys
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder nar	ne C	Office soug	ht		Office held	
	Date		Payee name						
	10/29/2023		Dallas Bar Association						
	Amount (\$)		Payee address; City;	State;	; Zip Cod	e			
	\$680.00		2101 Ross Ave. Dallas, TX 75201						
	PURPOSE OF EXPENDITURE		Category <sub>(See Categories lis</sub> Event Expense	ted at the top of this sche	edule)	Check if Austin Purchase of t	n, ⊤x, tick		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder na	ne C	Office soug	ht		Office held	
	Date		Payee name						
	11/13/2023		Democracy Toolbox						
	Amount (\$) \$5,000.00		Payee address; City; 8552 Royal County Do		; Zip Cod	e			
			McKinney, TX 75070						
	PURPOSE OF EXPENDITURE		Category (See Categories lis Consulting Expense	ted at the top of this sche	edule) (			ide of Texas. Complete , officeholder living exp	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder na	ne C	Office soug	ht		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-	Offic Polli Print Sala	e Overhe ng Expen ting Exper ting S/Wage	ise s/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 explair	is now t	o comp	lete this form.	-			
1	Total pages Schedule F1:						3	Filer ID (Ethics Commission Filers	5)	
	Sch: 3/8 Rpt: 6/11		Goldstein, Bonnie L. (The Honorable	)				00066111		
4	Date		Payee name							
	10/17/2023		Ifratelli Pizza							
6	Amount (\$)	Amount (\$) 7 Payee address; City; State; Zip Code								
	\$152.58 1001 Ross Ave.									
		Dallas, TX 75202								
8	PURPOSE	<u> </u>			(h	Description			_	
ľ	OF		Category (See Categories listed at the top of this s Food/Beverage Expense	schedule)			outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE					Check if Austin	, TX,	, officeholder living expense		
						Beginning of court staff.	teri	m lunch for Chambers, panel and		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office	sought			Office held		
	Date		Payee name							
	11/14/2023		Ifratelli Pizza							
	Amount (\$)		Payee address; City; Sta	te; Zip	Code					
	\$74.58		1001 Ross Ave.							
			Dallas, TX 75202							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this s Food/Beverage Expense	schedule)	(b)	Check if Austin	, TX,	ide of Texas. Complete Schedule T. , officeholder living expense unch for Panel and staff		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office	sought			Office held		
	Date		Payee name							
	11/05/2023		JW Marriott Hotel							
	Amount (\$)		Payee address; City; Sta	te: Zin	Code				_	
	\$1,793.12		1331 Pennsylvania Ave. N.W.							
			Washington, DC 20004							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this s Travel Out of District	schedule)	(b)	Check if Austin	, тх, s fo	ide of Texas. Complete Schedule T. , officeholder living expense or AJEI 2023 conference in		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office	sought			Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/f Gift/Av Ittee Legal	Expense Beverage Expense wards/Memorials Expe Services Instruction Guide		Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Exp	
1	Tatal pages Sebadula E1			Instruction Guide	explains			12		(Ethics Commission	n Filore)
1	Total pages Schedule F1:				-rabla)			3	Filer ID	(Ethics Commission	n Filers)
	Sch: 4/8 Rpt: 7/11			ie L. (The Hond	Jianej				00066111		
4	Date 10/12/2023		ayee name as Palmas								
6	Amount (\$)	<b>7</b> Pa	ayee address;	City;	State;	Zip Co	le				
	\$53.84	27	708 Routh St.								
			allas, TX 7520								
8	PURPOSE OF			egories listed at the top	o of this sche	edule)	(b) Description	outei	ide of Texas. Com	niata Sabadula T	
	EXPENDITURE	FC	ood/Beverage	Expense							
		Check if Austin, TX, officeholder living expense Lunch with Court of Appeals former la Veca to celebrate passing the Bar.								former law clerk	< D.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officehol	der name	0	Dffice sou	jht		Office he	eld	
	Date	Pá	ayee name								
	07/25/2023	Li	uby's Culinary	Services							
	Amount (\$)	Pa	ayee address;	City;	State;	Zip Co	le				
	\$23.80		00 Commerce			•					
			allas, TX 7520								
	PURPOSE OF EXPENDITURE		ategory <sub>(See Cate</sub> bod/Beverage	egories listed at the top Expense	) of this sche	edule)		n, TX,	ide of Texas. Com , officeholder living attorneys F.	expense	
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officehol	der name	0	Dffice sou	ıht		Office he	eld	
	Date	Pa	ayee name								
	07/27/2023		uby's Culinary	Services							
	Amount (\$)	Pa	ayee address;	City;	State;	Zip Co	le				
	\$30.15		00 Commerce	-		•					
	_		allas, TX 7520								
	PURPOSE OF EXPENDITURE		ategory <sub>(See Cate</sub> ood/Beverage	egories listed at the top Expense	) of this sche	edule)	Check if Austir	n, TX,	ide of Texas. Com , officeholder living attorneys F.		Casada.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officehol	der name	0	Office sou	ıht		Office he	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awa Legal Se	rerage Expense ds/Memorials Expense	Office Ov Polling Ex Printing E Salaries/V	erhead kpense xpens Vages	e /Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expens	e
1	Total pages Schedule F1:	2 FIL	ER NAME					3	Filer ID	(Ethics Commission Fi	lers)
	Sch: 5/8 Rpt: 8/11			L. (The Honorab	le)				00066111		
4	Date 11/02/2023		vee name I Ebbitt Grill								
6	Amount (\$) \$29.66	67	vee address; 5 15th St. NW ashington, DC 2		tate; Zip Co	ode					
8	PURPOSE OF EXPENDITURE		egory <sub>(See Catego</sub> od/Beverage Ex	ries listed at the top of th (PENSE	is schedule)	(b)	Check if Austin,	, тх,	de of Texas. Com officeholder living ages while a		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		lidate/Officeholde	er name	Office sou	ught			Office he	eld	
	Date	Pay	vee name								
	10/25/2023	Re	naissance Wor	hington Hotel							
	Amount (\$) \$256.10	200	vee address; ) Main Street		tate; Zip Co	ode					
	PURPOSE OF EXPENDITURE	<b>(a)</b> Cat	t Worth, TX 76 egory (See Catego avel Out of Distr	ries listed at the top of th	is schedule)	(b)	Check if Austin,	, тх, <b>Wo</b> i	- ,		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		lidate/Officeholde	er name	Office sou	ught			Office he	ld	
	Date 10/31/2023	-	vee name quoia DC								
	Amount (\$) \$81.00		vee address; 00 K St. NW	City; S	tate; Zip Co	ode					
		Wa	shington, DC 2	0007							
	PURPOSE OF EXPENDITURE		egory <sub>(See Catego</sub> od/Beverage E	ries listed at the top of th	is schedule)	(b)		, TX,	de of Texas. Compofficeholder living ages for AJE	expense	
	Complete ONLY if direct expenditure to benefit C/OF		lidate/Officeholde	er name	Office sou	ught			Office he	eld	

				EXPENDITU	JRE CATEGO	RIES FOF	R BO	X 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage Exp Gift/Awards/Memori Legal Services <b>The Instruction</b>	als Expense	Office Ove Polling Ex Printing Ex Salaries/W	erhead pense xpense Vages/	e 'Contract Labor		Transportation Travel in Distric Travel Out of D	
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 6/8 Rpt: 9/11			onnie L. (The	Honorable)					00066111	
4	Date 07/31/2023	5	Payee name State Bar of	Texas CLE							
6	Amount (\$)	7	Payee addres	s; City;	State	; Zip Co	de				
	\$25.46		1414 Colora			· •					
		Austin, TX 78701									
8	PURPOSE OF	(a)	Category (Se	e Categories listed a	at the top of this sch	nedule)	(b)	Description			
	EXPENDITURE		Fees								mplete Schedule T.
	Check if Austin, TX, officeholder living expense MCLE course fee and credit card processing fee fo NYU-IJA conference										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Offic	eholder name	(	Office sou	ght			Office h	neld
	Date		Payee name								
	11/28/2023		Stonewall D	emocrats of D	Dallas						
	Amount (\$)		Payee addres	s; City;	State	; Zip Co	de				
	\$35.00		P.O. Box 19	2305							
			Dallas, TX 7								
	PURPOSE OF EXPENDITURE	(a)	Category <sub>(Se</sub> Fees	e Categories listed a	at the top of this sch	nedule)			, TX,	officeholder livir	mplete Schedule T. ng expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offic	eholder name	(	Office sou	ght			Office h	neld
	Date		Payee name								
	12/24/2023		Texas Bar C	ollege							
	Amount (\$)		Payee addres	s; City;	State	; Zip Co	de				
	\$75.00		P.O. Box 12	487							
			Austin, TX 7	8711							
	PURPOSE OF EXPENDITURE		Category <sub>(Se</sub> Fees	e Categories listed a	at the top of this sch	nedule)			, TX,	officeholder livir	mplete Schedule T. ng expense
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	eholder name	(	Office sou	ght			Office h	neld

				EXPENDIT	URE CATEGOR	RIES FOR	BO	X 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Event Expense Fees Food/Beverage Ex Gift/Awards/Memo Legal Services The Instructior		Office Ove Polling Exp Printing Ex Salaries/W	rhead/ pense pense ages/0	Contract Labor		Travel in District Travel Out of Di	Equipme t strict	Expense nt & Related Expense ry not listed above)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethi	cs Commission Filers)
	Sch: 7/8 Rpt: 10/11				e Honorable)					00066111		
4	Date 12/24/2023		Payee name Texas Bar F	oundation								
6	Amount (\$) \$250.00		Payee addres 515 Congre Austin, TX 7	ss Ave.	State;	; Zip Co	de					
8	PURPOSE OF EXPENDITURE			e Categories listed 'Memorials E	at the top of this sch XPENSE	edule)	[	Check if Austin,	, тх, to Т		g expens	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offic	ceholder name	e (	Office sou	ght			Office h	eld	
	Date		Payee name									
	12/24/2023		Texas Bar F	oundation								
	Amount (\$) \$25.00		Payee addres 515 Congre	ss Ave.	State;	; Zip Co	de					
	PURPOSE OF EXPENDITURE	(a)	Austin, TX 7 Category <sub>(Se</sub> Fees		at the top of this sch	edule)	[	Check if Austin,	, TX,	de of Texas. Com officeholder living port fee for S	g expens	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offic	ceholder name	e C	Office sou	ght			Office h	eld	
	Date		Payee name									
	12/04/2023		Texas Demo	ocratic Party								
	Amount (\$) \$3,750.00		Payee addres 4818 East B		State; /d., Suite 104	; Zip Co	de					
			Austin, TX 7	8781								
	PURPOSE OF EXPENDITURE		Category <sub>(Se</sub> Fees	e Categories listed	at the top of this sch	iedule)	[		, TX,	de of Texas. Com officeholder living Dreme Cour	g expens	se
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offic	ceholder name	e C	Office sou	ght			Office h	eld	

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		EXPENDITURE CATE Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expl	Loan Repayı Office Overh Polling Expe Printing Expe Salaries/Wag	nent/Reimbursement ead/Rental Expense nse ense ges/Contract Labor	Transport Travel in I Travel Ou	n/Fundraising Expense ation Equipment & Rela District t of District enter a category not liste	ited Expense
			-					
1	Total pages Schedule F1: Sch: 8/8 Rpt: 11/11		E Bonnie L. (The Honorat	ole)		3 Filer ID 000661	-	mission Filers)
4	Date	5 Payee name	2					
	10/25/2023	The Origin	al Del Norte					
6	Amount (\$) \$58.93		ess; City; S n Main Street , TX 76164	State; Zip Code	9			
8	PURPOSE OF EXPENDITURE		See Categories listed at the top of the <b>rage Expense</b>	nis schedule) (I	Check if Austin	n, TX, officeholde t. Worth Ju	s. Complete Schedule T er living expense stices Birdwell a eview in Ft. Wor	and Walker
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Office sough	nt	Offi	ce held	