#### JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to com	plete this form.	1 Filer ID (Ethics Comm 00088037	,	2 Total page	s filed: 20
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		
OFFICEHOLDER NAME	The Honorable	Christine A.			OFFIC Date Received	E USE ONLY
						ICALLY FILED
					01/17/2024	
	NICKNAME	LAST Nowak		SUFFIX	01/17/2024	
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	ΓY;	ZIP CODE	Date Hand-deliver	ed or Date Postmarked
OFFICEHOLDER	PO Box 31					
MAILING ADDRESS					Receipt #	Amount
Change of Address	McKinney, TX 75070					
	wickliney, 1X 75070				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER NAME		Christopher				
INAME						
	NICKNAME	LAST			SUFFIX	
		Kratovil			001111	
		Ratovi				
6 CAMPAIGN	STREET ADDRESS (NO PC			T / SUITE #; CITY;		STATE; ZIP CODE
TREASURER	1717 Main Street	DON PLEASE),	AP	1/30ITE#, CITT,		STATE, ZIP CODE
ADDRESS						
(Residence or Business)	Suite 4200					
	Dallas, TX 75201					
7 CAMPAIGN	AREA CODE PHO	NE NUMBER	EXTENSION			
TREASURER	(214) 462-6400					
PHONE						
8 REPORT		_	_		_	
TYPE	X January 15	30th day befor	e election	Runoff		r campaign treasurer (officeholder only)
	July 15	8th day before	election	Exceeded modified	-	(Attach C/OH-FR)
				reporting limit		,
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2023	ТІ	HROUGH	12/31/202	3	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		Primary	Runoff	Other	
	03/05/2024					
			General	Special		
				1		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
	District Judge District 493	Collin		District Judge Di	strict 493	
		GO <sup>-</sup>	TO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.e	thics.state.tx.u	IS	V	ersion V3.5.1.0bfcfb67

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

FORM JC/OH COVER SHEET PG 2 2 of 20

13 C / OH NAME	Nowak, Christine A. (	The Honorable)	14 Filer ID ( 00088037	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without I officeholders are required to report this information	the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION		ZED POLITICAL CONTRIBUTIONS(OTHER THAN		
TOTALS	OR GUARANTE	ES OF LOANS, OR CONTRIBUTIONS MADE ELE	CTRONICALLY)	<b>\$</b> 0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	<b>\$</b> 39,263.10
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		<b>\$</b> 0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		<b>\$</b> 8,607.80
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	<b>\$</b> 31,919.12
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	<b>\$</b> 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.		
		The Llenger	able Christine A. Nov	
			able Christine A. Nov	
		Signature of	Canalate of Onicentor	uci
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
		aid	, this the	day
of	, 20, to ce	ertify which, witness my hand and seal of office.		
Signature of offic	cer administering oath	Printed name of officer administering oath	Title of officer	r administering oath
Forms provided by Te	xas Ethics Commission	www.ethics.state.tx.us		Version V3.5.1.0bfcfb67

#### FORM JC/OH COVER SHEET PG 3

3 of 20

18 FILER NAME	19 Filer ID	(Ethics Commission Filers)
Nowak, Christine A. (The Honorable)	00088037	1
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. X SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		<b>\$</b> 37,008.96
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		<b>\$</b> 2,254.14
3. SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$
4. SCHEDULE E(J): LOANS (JUDICIAL)		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	<b>\$</b> 5,500.89
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. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 3,106.91
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	ONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

SUBTOTALS - JC/OH

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/8 Rpt: 4/20	
2 FILER NAME Nowak, Christine A	. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088037
11/24/2023 Ab	5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contribution (\$) \$1,500.00
Мс	Kinney, TX 75069		
8 Contributor's Principal Attorney	Occupation	9 Contributor's Job Title Attorney	
<b>10</b> Contributor's employe Abernathy Roeder	r/law firm	11 Law firm of contributor's sp	ouse (if any)
<b>12</b> If contributor is a child	, law firm of parent(s) (if any)		
11/08/2023 Arr	Full name of contributor       out-of-state PAC (ID#:)         Armstrong, Rebecca       Ontributor address; City; State; Zip Code		Amount of Contribution (\$) \$2,604.48
Contributor's Principal	no, TX 75024 Occupation	Contributor's Job Title	
Attorney Contributor's employe Armstrong Divorce If contributor is a child		Managing Partner Law firm of contributor's sp	ouse (if any)
11/06/2023 Bel	name of contributor out-of-state PAC (ID#:_ den, Micah ntributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$1,000.00
Sh	erman, TX 75090		
Contributor's Principal Attorney	Occupation	Contributor's Job Title Attorney	
Contributor's employe Law Office of Micah		Law firm of contributor's sp	ouse (if any)
If contributor is a child	, law firm of parent(s) (if any)		
	as Ethics Commission www.ethics		Version V3.5.1.0bfcfb67

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/8 Rpt: 5/20	
2 FILER NAME Nowak, Christine A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088037	
4 Date 11/08/2023	5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contribution (\$) \$1,000.00
	McKinney, TX 75070		
	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's e		<b>11</b> Law firm of contributor's sp	oouse (if any)
	/alsh & Beard		
<b>12</b> If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
11/13/2023	Buehrle, Russell		\$50.00
	Contributor address; City; State; Zip Code		
	The Woodlands, TX 77380		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's e	mployer/law firm	Law firm of contributor's sp	oouse (if any)
GeoSoutherr	n Energy Corporation		
If contributor is	s a child, law firm of parent(s) (if any)		
Date 11/08/2023	Full name of contributor out-of-state PAC (ID#:_ Burke Bogdanowicz PLLC Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$500.00
	Dallas, TX 75270		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
	hu Tayaa Ethiaa Commission		Varaian V2 E 1 0kfafb67

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/8 Rpt: 6/20	
2 FILER NAME Nowak, Chris	stine A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088037
4 Date 11/06/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#:_ Cowles Thompson</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$1,500.00
2 Octobility dayler	Plano, TX 75093		
	Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	mployer/law firm	<b>11</b> Law firm of contributor's sp	ouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date 11/08/2023	Full name of contributor out-of-state PAC (ID#:_ Duffee, Lisa Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$1,000.00
Constributorio	Dallas, TX 75219	Contributorio Job Title	
Attorney	Principal Occupation	Contributor's Job Title Attorney	
_	mployer/law firm ren, LLP	Law firm of contributor's sp	ouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date 11/01/2023	Full name of contributor out-of-state PAC (ID#:_ Koons Fuller PC Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$2,500.00
	Dallas, TX 75202		
Contributor's F	rincipal Occupation	Contributor's Job Title	
Contributor's e	mployer/law firm	Law firm of contributor's sp	ouse (if any)
If contributor is a child, law firm of parent(s) (if any)			
	by Toyas Ethics Commission	s state ty us	Varsian V/2 5 1 Obfefb67

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/8 Rpt: 7/20	
2 FILER NAME Nowak, Chris	stine A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088037
4 Date 11/06/2023			<ul><li>7 Amount of Contribution (\$)</li><li>\$2,500.00</li></ul>
	6 Contributor address; City; State; Zip Code		
	Dallas, TX 75225		
8 Contributor's F	rincipal Occupation	9 Contributor's Job Title	
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	ouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)	I	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
11/15/2023	McNellie, Scarlet		\$5,000.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75201		
	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
	mployer/law firm Fulbright US	Law firm of contributor's sp	ouse (if any)
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)
11/06/2023	Orsinger, Nelson, Downing & Anderson LLP		\$1,500.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75225		
Contributor's F	Principal Occupation	Contributor's Job Title	I
Contributor's employer/law firm		Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 5/8 Rpt: 8/20
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Nowak, Chri	stine A. (The Honorable)		00088037
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
11/06/2023	Pfister & Associates		\$1,000.00
	6 Contributor address; City; State; Zip Code		
	Frisco, TX 75034		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
11/01/2023	Plunk Smith PLLC		\$5,000.00
	Contributor address; City; State; Zip Code		
	Frisco, TX 75034		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)
11/29/2023	Rispoli, Stephen		\$250.00
	Contributor address; City; State; Zip Code		
Constributorio	Dallas, TX 75201	Constributorilo Joh Title	
Attorney	Principal Occupation	Contributor's Job Title Attorney	
-	employer/law firm	Law firm of contributor's sp	oouco (if op))
Mayer LLP			
-	s a child, law firm of parent(s) (if any)		
	s a child, law littl of parent(s) (ii any)		
Eorms provided	hy Texas Ethics Commission www.ethic	rs state tx us	Version V3 5 1 0hfcfh67

The Instruc	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/8 Rpt: 9/20
2 FILER NAME Nowak, Chris	stine A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088037
4 Date 11/06/2023	5       Full name of contributor       out-of-state PAC (ID#:)         023       Scheef & Stone         6       Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$1,000.00
	Frisco, TX 75034		
8 Contributor's F	rincipal Occupation	9 Contributor's Job Title	
10 Contributor's e	mployer/law firm	<b>11</b> Law firm of contributor's sp	oouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date 11/06/2023	Full name of contributor out-of-state PAC (ID#: Scheef, John Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$500.00
Contributor's F	Frisco, TX 75034 Principal Occupation	Contributor's Job Title	
Attorney	· ·	Attorney	
Contributor's e Scheef & Sto	employer/law firm one	Law firm of contributor's sp	ouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date 11/01/2023	Full name of contributor out-of-state PAC (ID#:_ Suster Law Group PLLC Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$2,500.00
Contributor's F	Plano, TX 75093 Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is a child, law firm of parent(s) (if any)			
	hu Toyoo Ethioo Commission		

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 7/8 Rpt: 10/20
2 FILER NAME Nowak, Chri	stine A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088037
4 Date 11/27/2023	5 Full name of contributorout-of-state PAC (ID#:) Tepera, Steven		7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code		
	Austin, TX 78701		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's e		11 Law firm of contributor's sp	bouse (if any)
Pillsbury Wir	nthrop Shaw Pittman LLP		
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
11/08/2023	The Crowder Law Firm		\$2,604.48
	Contributor address; City; State; Zip Code		1
	Plano, TX 75024		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
11/06/2023	The Law Office of Natalie Gregg		\$1,500.00
	Contributor address; City; State; Zip Code		
	Allen, TX 75013	1	
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
I			

# MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 **1** Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. Sch: 8/8 Rpt: 11/20 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Nowak, Christine A. (The Honorable) 00088037 4 Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 7 11/16/2023 Westhoff, Clint \$1,000.00 6 Contributor address; City; State; Zip Code Dallas, TX 75206 9 Contributor's Job Title Contributor's Principal Occupation 8 Attorney Attorney 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) Goranson Bain Ausley, PLLC 12 If contributor is a child, law firm of parent(s) (if any)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	iction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 1/1 Rpt: 12/20
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	istine A. (The Honorable)		00088037
<sup>4</sup> TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date	6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution
11/08/2023	McCathern		contribution (\$)¦ description \$1,127.07   Food and beverages for
	7 Contributor address; City; State; Zip Code		fundraiser
	Frisco, TX 75034		Check if travel outside of Texas. Complete Schedule T.
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a shild low firm of percent(a) (if any) (FOD 11 DICIAL)		
	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution
11/08/2023	Scheef & Stone	······	contribution (\$) description
	Contributor address; City; State; Zip Code		\$1,127.07   Food and beverages for fundraiser
			lundraiser
	Frisco, TX 75034		Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributorio		Low firm of contribute	r's spouse (if any) (FOR JUDICIAL)
Continuators	employer/law firm (FOR JUDICIAL)	Law IIII of contribute	is spouse (il ally) (FOR JODICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	•	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Fees Office Overhead/Rental Expense Transportation E Food/Beverage Expense Polling Expense Travel in District By - Gitt/Awards/Memorials Expense Printing Expense Travel Out of Dis					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: 1/5 Rpt: 13/20		Nowak, Christine A. (The Honoral	ole)				00088037		
4	Date	5	Payee name							
	11/06/2023		Anedot							
6	Amount (\$)	7	Payee address; City;	State; Zip	Cod	9				
	\$60.30		1340 Poydras Street							
			Suite 1770							
			New Orleans, LA 70112							
8	PURPOSE	(a)	Category (See Categories listed at the top of t	his schedule)	(	b) Description				
	OF EXPENDITURE		Fees					de of Texas. Complete Schedule T.		
	_/					CC Fees	ι, TX,	officeholder living expense		
						CC Fees				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	Office s	ougł	nt		Office held		
	Date		Payee name							
	11/08/2023		Anedot							
	Amount (\$)		Payee address; City;	State; Zip	Cod	e				
	\$40.30		1340 Poydras Street							
			Suite 1770							
			New Orleans, LA 70112							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of t Fees	his schedule)	(1			de of Texas. Complete Schedule T. officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office s	ougl	nt		Office held		
	Date		Payee name							
	11/08/2023		Anedot							
	Amount (\$)		Payee address; City;	State; Zip	Cod	9				
	\$104.48		1340 Poydras Street							
			Suite 1770							
			New Orleans, LA 70112							
	PURPOSE	(a)	Category (See Categories listed at the top of t	his schedule)	(	b) Description				
	OF EXPENDITURE		Fees			Check if travel		de of Texas. Complete Schedule T. officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office s	ougł	nt		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex nmittee Legal Services The Instruction Guid		Office Ove Polling Exp Printing Ex Salaries/W	pense ages/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: 2/5 Rpt: 14/20		Nowak, Christine A. (The Hor	norable)				00088037			
4	Date 11/08/2023	5	Payee name Anedot								
_		<u> </u>									
6	Amount (\$)	7 Payee address; City; State; Zip Code									
	\$104.48	1340 Poydras Street									
			Suite 1770								
			New Orleans, LA 70112								
8	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	edule)	(b) Description					
	OF EXPENDITURE		Fees					ide of Texas. Complete Schedule T.			
							ι, TΧ,	, officeholder living expense			
						CC Fees					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	ght		Office held			
	Date		Payee name								
	11/08/2023		Anedot								
	Amount (\$) Payee address; City; State; Zip Code										
	\$40.30 1340 Poydras Street										
	Suite 1770										
			New Orleans, LA 70112								
	PURPOSE OF	(a)	Category (See Categories listed at the	top of this sch	edule)	(b) Description	:	ide of Taura Consults Ochodula T			
	EXPENDITURE		Fees					ide of Texas. Complete Schedule T. , officeholder living expense			
						CC Fees	., .,.,				
	Complete ONLY if direct		Candidate/Officeholder name		Office sou	nht		Office held			
	expenditure to benefit C/Oł					<u>, , , , , , , , , , , , , , , , , , , </u>		0			
	Data	-									
	Date		Payee name								
	11/13/2023		Anedot								
	Amount (\$)		Payee address; City;	State;	; Zip Co	de					
	\$2.40		1340 Poydras Street								
			Suite 1770								
			New Orleans, LA 70112								
	PURPOSE	(a)	Category (See Categories listed at the	ton of this sch	edule)	(b) Description					
	OF	Ľ	Fees		cuuc)		outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE						ı, ТХ,	, officeholder living expense			
						CC Fees					
L											
	Complete ONLY if direct		Candidate/Officeholder name	C	Office sou	ght		Office held			
	expenditure to benefit C/OH										

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense           Food/Beverage Expense         Polling Expense           y -         Gift/Awards/Memorials Expense			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 FIL	ER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 3/5 Rpt: 15/20	No	wak, Christine A. (The Hor	norable)				00088037	
4	Date	5 Pay	vee name				-		
	11/15/2023	An	edot						
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$208.65	1340 Poydras Street							
		Su	te 1770						
		Ne	w Orleans, LA 70112						
8	PURPOSE	(a) Cat	egory (See Categories listed at the	top of this sche	edule)	(b) Description			
	OF EXPENDITURE	Fee			,			ide of Texas. Complete Schedule T.	
						CC Fees	I, TX,	, officeholder living expense	
						CC Fees			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		lidate/Officeholder name	C	Office soug	ht		Office held	
	Date	Pay	vee name						
	11/16/2023	An	edot						
	Amount (\$)	Pay	vee address; City;	State;	Zip Co	le			
	\$40.30	134	10 Poydras Street						
		Su	te 1770						
		Ne	w Orleans, LA 70112						
	PURPOSE	(a) Cat	egory (See Categories listed at the	top of this sche	edule)	(b) Description			
	OF EXPENDITURE	Fee			,			ide of Texas. Complete Schedule T.	
						CC Fees	i, TX,	, officeholder living expense	
						001003			
	Complete ONLY if direct	Cano	lidate/Officeholder name		Office soug	iht		Office held	
	expenditure to benefit C/OF			-		,			
_	Date	Pa	vee name						
	11/24/2023	-	edot						
	Amount (\$)	Pa	vee address; City;	State:	Zip Co	le			
	\$60.30		10 Poydras Street	,	1				
		Su	te 1770						
		Ne	w Orleans, LA 70112						
-	PURPOSE	(a) Cat		ton of this solu	edule)	(b) Description			
	OF	Fee	<b>- - ( - - - - - - - -</b>		euule)	•	outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE						I, TX	, officeholder living expense	
						CC Fees			
	Complete ONLY if direct	C	lidate/Officeholder name		)ffico cours	ıht		Office held	
	Complete ONLY if direct         Candidate/Officeholder name         Office sought         Office held           expenditure to benefit C/OH         Office 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     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense			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 FI	LER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 4/5 Rpt: 16/20		owak, Christine A. (The Hon	orable)				00088037	
4	Date 11/27/2023		ayee name nedot						
6	Amount (\$) \$40.30	7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112							
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)       (b) Description         Fees       Check if travel outside of Texas. Complete Schedule T.         Check if Austin, TX, officeholder living expense       CC Fees							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	0	office sou	ht		Office held	
	Date	Pa	ayee name						
	11/29/2023	Ar	nedot						
	Amount (\$)	Pa	ayee address; City;	State;	Zip Co	le			
	\$10.30	13	340 Poydras Street						
		Sı	uite 1770						
		Ne	ew Orleans, LA 70112						
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the tr	op of this sche	edule)			ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	0	office sou	ht		Office held	
	Date	Pa	ayee name						
	11/11/2023	C	ollin County Republican Part	ty					
	Amount (\$) \$1,500.00	29 Si	ayee address; City; 063 West 15th Street uite 2981 ano, TX 75075	State;	Zip Co	le			
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the to GeS	op of this sche	edule)			ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	0	office sou	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		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: 5/5 Rpt: 17/20	Nowak, Christine A. (The Honorable) 00088037							
4	Date 12/27/2023	5 Payee name Nowak, Christine							
6	Amount (\$) \$3,106.91	7 Payee address; City; State; Zip Code PO Box 31 McKinney, TX 75070							
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense <b>nt for personal expenditures</b>						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	11/30/2023	Prosperity Bank							
	Amount (\$) \$171.87	Payee address; City; State; Zip Code 2976 El Dorado Pkway							
		McKinney, TX 75072							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	11/30/2023	Prosperity Bank							
	Amount (\$) \$10.00	Payee address; City; State; Zip Code 2976 El Dorado Pkway							
		McKinney, TX 75072							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense I <b>C</b>						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/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 G: Sch: 1/3 Rpt: 18/20	2 FILER NAME Nowak, Christine A. (The Honorable)	:	<b>3</b> Filer ID (Ethics Commission Filers) 00088037				
4 Date 10/23/2023	5 Payee name Neil Rosekrans LLC						
6 Amount (\$) \$694.00 Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 11383 E. Greythorn Drive Scottsdale, AZ 85262						
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 e development				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held				
Date	Payee name						
11/28/2023	Neil Rosekrans LLC						
Amount (\$) \$625.00	Payee address; City; State; Zip Code						
Reimbursement from political contributions intended	Scottsdale, AZ 85262						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense e development				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held				
Date	Payee name						
11/24/2023	Nothing Bundt Cakes						
Amount (\$) \$504.00 Reimbursement from political contributions	Ste 104	ode					
intended	McKinney, TX 75070	1					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held				

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	payment/Reimbursement     Solicitation/Fundraising Expense       verhead/Rental Expense     Transportation Equipment & Related Expense       xpense     Travel in District       Expense     Travel Out of District       Wages/Contract Labor     OTHER (enter a category not listed above)					
1 Total pages Schedule G: Sch: 2/3 Rpt: 19/20	2 FILER NAME Nowak, Christine A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088037					
4 Date 11/24/2023	5 Payee name Office Depot						
6 Amount (\$) \$185.41	7 Payee address; City; State; Zip Code 1751 N. Central Expwy 75 McKinney, TX 75069						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Paper and printing for investiture programs					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held					
Date	Payee name						
12/05/2023	PRW (Plano Republican Women)						
Amount (\$) \$36.15							
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fee for event attendance	Description       Check if travel outside of Texas. Complete Schedule T.         Check if Austin, TX, officeholder living expense         Event ticket					
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held					
Date	Payee name						
11/16/2023	The Press Group						
Amount (\$)Payee address;City;State; Zip Code\$789.794620 Penbrook Ct.							
Reimbursement from political contributions intended	Plano, TX 75024						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Investiture invitations					
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	expenditure to benefit						

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/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 G: Sch: 3/3 Rpt: 20/20	2 FILER NAME Nowak, Christine A. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00088037					
4 Date 11/13/2023	5 Payee name USPS							
6 Amount (\$) \$198.00 Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 550 N. Central Expwy McKinney, TX 75070							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense titure invites					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held					
Date	Payee name							
11/24/2023	Walmart							
Amount (\$) \$45.56	Payee address; City; State; Zip Code							
Reimbursement from political contributions intended	McKinney, TX 75070							
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held					
Date	Payee name							
11/30/2023	We Tribute Inc.							
Amount (\$) \$29.00								
Reimbursement from political contributions intended	Brooklyn, NY 11211							
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Video	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense for investiture					
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held					