

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM **JC/OH**  
COVER SHEET PG 1

<b>The JC/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00087963	<b>2</b> Total pages filed:  18									
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Veronica	MI	<b>OFFICE USE ONLY</b>  Date Received <b>ELECTRONICALLY FILED</b>  02/05/2024								
	NICKNAME	LAST Juarez-Dunne	SUFFIX									
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input checked="" type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;  <div style="background-color: black; color: white; text-align: center; padding: 2px;"> <b>REDACTED PER 254.0313, GOV'T CODE</b> </div>		ZIP CODE	Date Hand-delivered or Date Postmarked  Receipt #      Amount  Date Processed  Date Imaged								
	<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Laurence A.	MI								
		NICKNAME Trey	LAST Dunne III	SUFFIX								
	<b>6</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);      APT / SUITE #;      CITY;      STATE;      ZIP CODE  <div style="background-color: black; color: white; text-align: center; padding: 2px;"> <b>REDACTED PER 254.0313, GOV'T CODE</b> </div>										
<b>7</b> CAMPAIGN TREASURER PHONE	AREA CODE (512)	PHONE NUMBER 585-2087	EXTENSION									
<b>8</b> REPORT TYPE	<table style="width:100%; border: none;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input checked="" type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded modified reporting limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH-FR)</td> </tr> </table>				<input type="checkbox"/> January 15	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded modified reporting limit	<input type="checkbox"/> Final Report (Attach C/OH-FR)
<input type="checkbox"/> January 15	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)									
<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded modified reporting limit	<input type="checkbox"/> Final Report (Attach C/OH-FR)									
<b>9</b> PERIOD COVERED	Month    Day    Year 01/01/2024		THROUGH	Month    Day    Year 01/25/2024								
<b>10</b> ELECTION	ELECTION DATE Month    Day    Year 03/05/2024		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special									
<b>11</b> OFFICE	OFFICE HELD (if any) District Judge District 465 Bastrop		<b>12</b> OFFICE SOUGHT (if known) District Judge District 465									

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# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2

2 of 18

**13** C / OH NAME      Juarez-Dunne, Veronica (The Honorable)      **14** Filer ID      (Ethics Commission Filers)  
00087963

**15** NOTICE FROM POLITICAL COMMITTEE(S)  
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

<b>16</b> CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	7,412.40
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$	9,694.06
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	5,354.86
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	320.63

**17** AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

\_\_\_\_\_  
 The Honorable Veronica Juarez-Dunne  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
 Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# SUBTOTALS - JC/OH

<b>18 FILER NAME</b> Juarez-Dunne, Veronica (The Honorable)	<b>19 Filer ID</b> (Ethics Commission Filers) 00087963
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<b>20 SCHEDULE SUBTOTALS</b>		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 6,525.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 887.40
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$ 320.63
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 9,694.06
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 1/9 Rpt: 4/18
2 FILER NAME Juarez-Dunne, Veronica (The Honorable)		3 Filer ID (Ethics Commission Filers) 00087963
4 Date 01/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banks, Paula (Mrs.)	7 Amount of Contribution (\$)  \$500.00
	6 Contributor address; City; State; Zip Code  Round Rock, TX 78681	
8 Contributor's Principal Occupation paralegal		9 Contributor's Job Title litigation supervisor
10 Contributor's employer/law firm Perdue, Brandon, Fielder, Collins & Mott		11 Law firm of contributor's spouse (if any) Perdue, Brandon, Fielder, Collins & Mott
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caulo, Jeanne (Mrs.)	Amount of Contribution (\$)  \$125.00
	Contributor address; City; State; Zip Code  Elgin, TX 78621	
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunne, Lori (Mrs.)	Amount of Contribution (\$)  \$250.00
	Contributor address; City; State; Zip Code  Austin, TX 78715	
Contributor's Principal Occupation Custom Framing		Contributor's Job Title Framer
Contributor's employer/law firm Self-Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 2/9 Rpt: 5/18
<b>2</b> FILER NAME Juarez-Dunne, Veronica (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00087963
<b>4</b> Date 01/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fohn, Justin (Mr.)	<b>7</b> Amount of Contribution (\$) \$250.00
<b>6</b> Contributor address; City; State; Zip Code  Bastrop, TX 78602		
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Fohn Law		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Sergio (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  Austin, TX 78730		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Perdue Brandon Fielder Collins & Mott		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Danny (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  Elgin, TX 78621		
Contributor's Principal Occupation Contract Management		Contributor's Job Title Contract Specialist
Contributor's employer/law firm Texas Dept. of Health & Human Services		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 3/9 Rpt: 6/18
2 FILER NAME Juarez-Dunne, Veronica (The Honorable)		3 Filer ID (Ethics Commission Filers) 00087963
4 Date 01/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harden, Rick (Mr.)	7 Amount of Contribution (\$)  \$250.00
	6 Contributor address; City; State; Zip Code  Elgin, TX 78621	
8 Contributor's Principal Occupation Self-Employed		9 Contributor's Job Title Self-Employed
10 Contributor's employer/law firm Southern Inc. Co.		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herring, Jennifer (Mrs.)	Amount of Contribution (\$)  \$125.00
	Contributor address; City; State; Zip Code  Elgin, TX 78621	
Contributor's Principal Occupation Dental Hygienist		Contributor's Job Title Dental Hygienist
Contributor's employer/law firm Elgin Family Dental		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howell, Clyde (Mr.)	Amount of Contribution (\$)  \$250.00
	Contributor address; City; State; Zip Code  Bastrop, TX 78602	
Contributor's Principal Occupation retired		Contributor's Job Title n/a
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 4/9 Rpt: 7/18
2 FILER NAME Juarez-Dunne, Veronica (The Honorable)		3 Filer ID (Ethics Commission Filers) 00087963
4 Date 01/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Will (Mr.)	7 Amount of Contribution (\$)  \$250.00
	6 Contributor address; City; State; Zip Code  Bastrop, TX 78621	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm William H. Jenkins, PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Patsy (Mrs.)	Amount of Contribution (\$)  \$250.00
	Contributor address; City; State; Zip Code  Elgin, TX 78621	
Contributor's Principal Occupation Court Clerk		Contributor's Job Title Court Clerk
Contributor's employer/law firm Bastrop County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lerma, Sammy (Dr.)	Amount of Contribution (\$)  \$250.00
	Contributor address; City; State; Zip Code  Bastrop, TX 78602	
Contributor's Principal Occupation Doctor		Contributor's Job Title Doctor
Contributor's employer/law firm Self-Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 5/9 Rpt: 8/18
<b>2</b> FILER NAME Juarez-Dunne, Veronica (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00087963
<b>4</b> Date 01/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muery, Astrid (Mrs.)	<b>7</b> Amount of Contribution (\$)  \$550.00
<b>6</b> Contributor address; City; State; Zip Code  Coupland, TX 78615		
<b>8</b> Contributor's Principal Occupation Clerk		<b>9</b> Contributor's Job Title clerk
<b>10</b> Contributor's employer/law firm Muery, Farrell & Kelly		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pfeifer, Neil (Mr.)	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code  Bastrop, TX 78602		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Pecan Street Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickering, Terry (Mr.)	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code  Elgin, TX 78621		
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 6/9 Rpt: 9/18
<b>2</b> FILER NAME Juarez-Dunne, Veronica (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00087963
<b>4</b> Date 01/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pietsch, Rose (Mrs.)	<b>7</b> Amount of Contribution (\$) \$100.00
<b>6</b> Contributor address; City; State; Zip Code  Smithville, TX 78957		
<b>8</b> Contributor's Principal Occupation Retired		<b>9</b> Contributor's Job Title Retired
<b>10</b> Contributor's employer/law firm n/a		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Placke, Martin (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  Giddings, TX 78942		
Contributor's Principal Occupation Attorney		Contributor's Job Title County Attorney
Contributor's employer/law firm Lee County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rethlake, Amber (Mrs.)	Amount of Contribution (\$) \$125.00
Contributor address; City; State; Zip Code  Round Rock, TX 78665		
Contributor's Principal Occupation Sales		Contributor's Job Title Director of HQ Sales
Contributor's employer/law firm Link Snacks		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 7/9 Rpt: 10/18
<b>2</b> FILER NAME Juarez-Dunne, Veronica (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00087963
<b>4</b> Date 01/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Robbie (Mrs.)	<b>7</b> Amount of Contribution (\$)  \$125.00
	<b>6</b> Contributor address; City; State; Zip Code  Bastrop, TX 78621	
<b>8</b> Contributor's Principal Occupation self-employed		<b>9</b> Contributor's Job Title retired
<b>10</b> Contributor's employer/law firm n/a		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
<b>Date</b> 01/17/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanderson, Celena (Mrs.)	<b>Amount of Contribution (\$)</b>  \$125.00
	<b>Contributor address; City; State; Zip Code</b>  Bastrop, TX 78602	
<b>Contributor's Principal Occupation</b> Legal		<b>Contributor's Job Title</b> Legal Assistant
<b>Contributor's employer/law firm</b> Pecan Street Law		<b>Law firm of contributor's spouse (if any)</b>
<b>If contributor is a child, law firm of parent(s) (if any)</b>		
<b>Date</b> 01/17/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanderson, Forrest (Mr.)	<b>Amount of Contribution (\$)</b>  \$125.00
	<b>Contributor address; City; State; Zip Code</b>  Bastrop, TX 78602	
<b>Contributor's Principal Occupation</b> Attorney		<b>Contributor's Job Title</b> Attorney
<b>Contributor's employer/law firm</b> Lee County		<b>Law firm of contributor's spouse (if any)</b>
<b>If contributor is a child, law firm of parent(s) (if any)</b>		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 8/9 Rpt: 11/18
<b>2</b> FILER NAME Juarez-Dunne, Veronica (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00087963
<b>4</b> Date 01/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simicek, John (Dr.)	<b>7</b> Amount of Contribution (\$) \$250.00
<b>6</b> Contributor address; City; State; Zip Code  Elgin, TX 78621		
<b>8</b> Contributor's Principal Occupation Doctor		<b>9</b> Contributor's Job Title Doctor
<b>10</b> Contributor's employer/law firm Self-Employed		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, Patrick (Mr.)	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Austin, TX 78738		
Contributor's Principal Occupation Insurance		Contributor's Job Title Owner
Contributor's employer/law firm Watkins Insurance Group		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woolery, Randy (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  Elgin, TX 78621		
Contributor's Principal Occupation Owner		Contributor's Job Title Owner
Contributor's employer/law firm Woolery Fence Co.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 9/9 Rpt: 12/18
<b>2</b> FILER NAME Juarez-Dunne, Veronica (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00087963
<b>4</b> Date 01/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Woolery, Shane (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Elgin, TX 78621	<b>7</b> Amount of Contribution (\$)  \$125.00
<b>8</b> Contributor's Principal Occupation General Manager		<b>9</b> Contributor's Job Title General Manager
<b>10</b> Contributor's employer/law firm Woolery Fence Co.		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 1/1 Rpt: 13/18	
2 FILER NAME Juarez-Dunne, Veronica (The Honorable)		3 Filer ID (Ethics Commission Filers) 00087963	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 01/17/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connor, Geoffrey (Mr.)	8 Amount of contribution (\$) \$862.40	9 In-kind contribution description Supplies and staff for campaign event.
	7 Contributor address; City; State; Zip Code  Bastrop, TX 78602	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL) Attorney		13 Contributor's job title (FOR JUDICIAL) (See instructions) Attorney	
14 Contributor's employer/law firm (FOR JUDICIAL) Self		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 01/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veronica, Juarez-Dunne (Judge)	Amount of contribution (\$) \$25.00	In-kind contribution description Smithville Chamber Luncheon ticket
	Contributor address; City; State; Zip Code  Elgin, TX 78621	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL) District Judge		Contributor's job title (FOR JUDICIAL) (See instructions) District Judge	
Contributor's employer/law firm (FOR JUDICIAL) Bastrop County		Law firm of contributor's spouse (if any) (FOR JUDICIAL) Dunne, Trey Dunne attorney at law	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# LOANS (JUDICIAL)

# SCHEDULE E(J)

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E(J): Sch: 1/1 Rpt: 14/18
<b>2</b> FILER NAME Juarez-Dunne, Veronica (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00087963
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$</b>
<b>5</b> Date of loan 01/18/2024	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Juarez-Dunne, Veronica (Judge)	<b>9</b> Loan Amount (\$) \$320.63
<b>6</b> Is lender a financial institution? No	<b>8</b> Lender address; City; State; Zip Code  Elgin, TX 78621	<b>10</b> Interest Rate
		<b>11</b> Maturity Date
<b>12</b> Lender's Principal Occupation District Judge		<b>13</b> Lender's Job Title District Judge
<b>14</b> Lender's Employer/Law Firm Bastrop County		<b>15</b> Law Firm of lender's spouse (if any) Dunne, Trey Dunne, attorney at law
<b>16</b> If lender is child, law firm of parent(s) (if any)		
<b>17</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>18</b> Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
<b>19</b> GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	<b>20</b> Name of guarantor	<b>22</b> Amount Guaranteed (\$)
	<b>21</b> Guarantor address; City; State; Zip Code	
<b>23</b> Guarantor's Principal Occupation		<b>24</b> Guarantor's Job Title
<b>25</b> Guarantor's Employer/Law Firm		<b>26</b> Law Firm of guarantor's spouse (if any)
<b>27</b> If guarantor is 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 Committee  
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 1/4 Rpt: 15/18	<b>2</b>	FILER NAME Juarez-Dunne, Veronica (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00087963	
<b>4</b>	Date 01/24/2024	<b>5</b>	Payee name Bastrop Co. Board of Realtors			
<b>6</b>	Amount (\$) \$100.00	<b>7</b>	Payee address; City; State; Zip Code 1115 San Jacinto Blvd Ste. 200  Austin, TX 78701			
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) networking event	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense networking event			
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 01/02/2024		Payee name Bastrop Signs			
	Amount (\$) \$3,627.46		Payee address; City; State; Zip Code 248 Hwy 304  Bastrop, TX 78602			
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 01/08/2024		Payee name Bastrop Signs			
	Amount (\$) \$216.50		Payee address; City; State; Zip Code 248 Hwy 304  Bastrop, TX 78602			
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Metal stakes			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	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 Committee  
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 2/4 Rpt: 16/18	<b>2</b>	FILER NAME Juarez-Dunne, Veronica (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00087963	
<b>4</b>	Date 01/22/2024	<b>5</b>	Payee name Bastrop Signs			
<b>6</b>	Amount (\$) \$915.80	<b>7</b>	Payee address; City; State; Zip Code 248 Hwy 304  Bastrop, TX 78602			
<b>8</b>	PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs		
<b>9</b>		Complete ONLY if direct expenditure to benefit C/OH				
	Date 01/16/2024		Candidate/Officeholder name Office sought Office held Payee name Holly Seigmund Photography			
	Amount (\$) \$270.63		Payee address; City; State; Zip Code 5530 County Road 309  Lexington, TX 78947			
	PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography		
		Complete ONLY if direct expenditure to benefit C/OH				
	Date 01/21/2024		Candidate/Officeholder name Office sought Office held Payee name Holly Seigmund Photography			
	Amount (\$) \$135.31		Payee address; City; State; Zip Code 5530 County Road 309  Lexington, TX 78947			
	PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography for collateral and social media		
		Complete ONLY if direct expenditure to benefit C/OH				



# 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  
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 3/4 Rpt: 17/18	<b>2</b>	FILER NAME Juarez-Dunne, Veronica (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00087963	
<b>4</b>	Date 01/24/2024	<b>5</b>	Payee name Holly Seigmund Photography			
<b>6</b>	Amount (\$) \$160.31	<b>7</b>	Payee address; City; State; Zip Code 5530 County Road 309  Lexington, TX 78947			
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography for collateral and social media			
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 01/13/2024		Payee name Rocky Road Printing			
	Amount (\$) \$387.54		Payee address; City; State; Zip Code 199 US Hwy 290 East Ste. C  Elgin, TX 78621			
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T-shirts			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 01/08/2024		Payee name Smithville Lion's Club			
	Amount (\$) \$200.00		Payee address; City; State; Zip Code PO Box 716  Smithville, TX 78957			
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Charitable event			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/4 Rpt: 18/18	<b>2</b> FILER NAME Juarez-Dunne, Veronica (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00087963
<b>4</b> Date 01/19/2024	<b>5</b> Payee name Texana Public Affairs	
<b>6</b> Amount (\$) \$3,680.51	<b>7</b> Payee address; City; State; Zip Code 2720 Bluebonnet Blvd.  Brenham, TX 77833	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultation, website, collateral design and printing
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held