# CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

#### FORM JCOR-C/OH

	Filer ID (Ethi	ics Commission Filers)	2 Total pages filed:			OFFICE	USE ONLY
	00088179		11			Date Received	USE UNLT
3	CANDIDATE /	MS / MRS / MR	I FIRST		MI	ELECTRONICA	ALLY EILED
	OFFICEHOLDER NAME	Mr.	Joel K.			02/26/2024	KLLI I ILLD
	IVAIVIE	NICKNAME	LAST		SUFFIX		
			Petrazio			Date Hand-delivered o	v Data Daatmarkad
	ORIGINAL	January 15	Runoff	Other (s	pecify)	Date Hand-delivered o	ir Date Postmarkeu
	REPORT TYPE	July 15	Exceeded modified	reporting limit		Receipt #	Amount
		$\chi$ 30th day before election	15th day after camp				
		8th day before election	appointment (office	• •		Date Processed	
5	ORIGINAL PERIOD	Month Day Yea	 ar	Month Day	Year	Date Imaged	
	COVERED	01/01/2024	THROUGH	01/25/2024		Date imaged	
6	EXPLANATION OF C	CORRECTION					
7	AFFIDAVIT		and	ear, or affirm, under po		, that this corrected	d roport is true
			Cile	ak the how next to any	and all applica	blo statements:	u report is true
				ck the box next to any	and all applica	ble statements:	u report is true
				Semiannual reports was made in good fa misrepresent the info	s: I swear, or aith and without	affirm that the orig an intent to mislea	inal report
			X	Semiannual reports was made in good fa	s: I swear, or aith and without ormation contain swear, or affirm, the 14th busine ginally filed is in any error or or	affirm that the orig an intent to mislea ned in the report. that I am filing this ass day after the da accurate or incom	inal report d or to corrected te I learned plete. I
			X	Semiannual reports was made in good fa misrepresent the info  Other reports: I s report not later than that the report as oris swear, or affirm, that	s: I swear, or aith and without ormation contain swear, or affirm, the 14th busine ginally filed is in any error or or	affirm that the orig an intent to mislea ned in the report. that I am filing this ss day after the da naccurate or incomp nission in the repor	inal report d or to corrected te I learned plete. I
			□	Semiannual reports was made in good fa misrepresent the info  Other reports: I s report not later than that the report as ori swear, or affirm, that filed was made in go	s: I swear, or aith and without brmation contain twear, or affirm, the 14th busine ginally filed is in any error or or od faith.  Mr. Joel K. P	affirm that the orig an intent to mislea ned in the report. that I am filing this ss day after the da naccurate or incomp nission in the repor	inal report d or to corrected te I learned plete. I
	AFFIX NOTARY ST	AMP / SEAL ABOVE	X	Semiannual reports was made in good fa misrepresent the info  Other reports: I s report not later than that the report as ori swear, or affirm, that filed was made in go	s: I swear, or aith and without brmation contain twear, or affirm, the 14th busine ginally filed is in any error or or od faith.  Mr. Joel K. P	affirm that the orig an intent to mislea ned in the report. that I am filing this ss day after the da accurate or incomp nission in the repor	inal report d or to corrected te I learned plete. I
			_	Semiannual reports was made in good far misrepresent the information of the reports: It is report not later than that the report as originated was made in good Signature.	s: I swear, or aith and without ormation contain the 14th busine ginally filed is in any error or or od faith.  Mr. Joel K. Pre of Candidate	affirm that the orig an intent to mislea ned in the report.  that I am filing this ss day after the da accurate or incomp nission in the report	inal report d or to corrected te I learned olete. I t as originally
	Sworn to and subsc	ribed before me, by the sai	 	Semiannual reports was made in good far misrepresent the information of the reports: It is report not later than that the report as or swear, or affirm, that filed was made in good Signature.	s: I swear, or aith and without ormation contain swear, or affirm, the 14th busine ginally filed is in any error or or od faith.  Mr. Joel K. Pre of Candidate , this ti	affirm that the orig an intent to mislea ned in the report.  that I am filing this ss day after the da accurate or incomp nission in the report	inal report d or to corrected te I learned olete. I t as originally
	Sworn to and subsc		 	Semiannual reports was made in good far misrepresent the information of the reports: It is report not later than that the report as or swear, or affirm, that filed was made in good Signature.	s: I swear, or aith and without ormation contain swear, or affirm, the 14th busine ginally filed is in any error or or od faith.  Mr. Joel K. Pre of Candidate , this ti	affirm that the orig an intent to mislea ned in the report.  that I am filing this ss day after the da accurate or incomp nission in the report	inal report d or to corrected te I learned olete. I t as originally

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

#### FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00088179 11 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mr. Joel K. NAME Date Received **ELECTRONICALLY FILED** 02/26/2024 NICKNAME LAST **SUFFIX** Petrazio CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 5465 Legacy Drive MAILING Receipt # Amount **ADDRESS** Suite 650 Plano, TX 75024 Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Jeff W. NAME NICKNAME LAST **SUFFIX** Hunt STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 1969 Lariat Trail **ADDRESS** (Residence or Business) Celina, TX 75009 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (636) 234-5593 **PHONE** REPORT TYPE 30th day before election Runoff 15th day after campaign treasurer January 15 X appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 01/01/2024 01/25/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 03/05/2024 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE None Collin District Judge District 401

Forms provided by Texas Ethics Commission

GO TO PAGE 2
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Version V3.5.1.9000c47f

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM JC/OH COVER SHEET PG 2

3 of 11

13 C / OH NAME	Petrazio, Joel K. (Mr	.)	<b>14</b> Filer ID 00088179	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder	political contributions accepted or political expenditu These expenditures may have been made without to d 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	
46 CONTRIBUTION	1 TOTAL UNITED	TIZED DOLLTICAL CONTRIBUTION CONTRIBUTION	LDI EDOEC LOANS	
16 CONTRIBUTION TOTALS		IIZED POLITICAL CONTRIBUTIONS(OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00
		TICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$ 5,925.00
EXPENDITURE TOTALS	EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$ 0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		<b>\$</b> 1,333.00
CONTRIBUTION BALANCE	5. TOTAL POLITION REPORTING PL	CAL CONTRIBUTIONS MAINTAINED AS OF THE L	AST DAY OF THE	\$ 5,923.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCII OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS RTING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.		
		Mr.	Joel K. Petrazio	
		Signature of	Candidate or Officehol	der
AFFIX NOT	ΓARY STAMP / SEAL AE	OVE		
		said	, this the	day
of	, 20, to c	ertify which, witness my hand and seal of office.		
Signature of offic	er administering oath	Printed name of officer administering oath	Title of office	r administering oath

### SUBTOTALS - JC/OH

## FORM JC/OH COVER SHEET PG 3

			C	OVER S	4 of 11
l	ER NAN		19 Filer ID	(Ethics Cor	nmission Filers)
		SUBTOTALS	00088179	T	
l	ME OF	SUBT	OTAL AMOUNT		
1.	1. X SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)			\$	5,925.00
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	S	\$	1,133.00
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	200.00
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	\$	

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A(J)1: Sch: 1/4 Rpt: 5/11
2	FILER NAME Petrazio, Joe	el K. (Mr.)			3	Filer ID (Ethics Commission Filers) 00088179
4	Date 01/12/2024  5 Full name of contributor  out-of-state PAC (ID#:) Fredericks, Chris (Mr.)  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$500.00		
		McKinney, TX 75069				
8		Principal Occupation		9 Contributor's Job Title		
		ivate Practice		Owner		
10		employer/law firm f Chris Fredericks		11 Law firm of contributor's sp	ous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	01/20/2024	Gravley, Jeff (Mr.)  Contributor address; City;	State; Zip Code			\$200.00
		Celina, TX 75009				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Security Mai	nagement Systems		Business Development	Ма	ınager
		employer/law firm		Law firm of contributor's sp	ous	se (if any)
		BUILDING TECHNOLOGIES				
	If contributor is	s a child, law firm of parent(s) (i	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	01/22/2024	Hunt, Lucinda (Mrs.)	_			\$250.00
		Contributor address; City;  Celina, TX 75009	State; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Homemaker			Homemaker		
Contributor's employer/law firm Law firm Law firm of contributor's s			ous	se (if any)		
	None					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 2/4 Rpt: 6/11
2	FILER NAME Petrazio, Joe	el K. (Mr.)			3	Filer ID (Ethics Commission Filers) 00088179
4	Date 01/20/2024  5 Full name of contributor out-of-state PAC (ID#:) Miller, Thomas (Mr.)  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$75.00		
		Celina, TX 75009				
8		Principal Occupation		9 Contributor's Job Title		
_	Retired			Retired		
10	Retired	employer/law firm		11 Law firm of contributor's sp	oous	se (If any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)	•		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	01/04/2024	Morris, Bryan (Mr.)  Contributor address; City;	State; Zip Code			\$2,500.00
		Frisco, TX 75034				
		Principal Occupation		Contributor's Job Title		
		ivate Practice		Owner		
		employer/law firm of Mac Morris		Law firm of contributor's sp	oous	se (if any)
_		s a child, law firm of parent(s) (i	family			
	ii continuator i	s a cilliu, iaw iiiiii oi pareiii(s) (i	i airy)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	01/17/2024	Myers, Wayne (Mr.)				\$500.00
		Contributor address; City; Celina, TX 75009				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Real Estate			Agent		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Keller Willian	ns First Team				
	If contributor is	s a child, law firm of parent(s) (i	f any)	1		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE	A(J)1
	The Instruction Guide explains how to complete this form.					otal pages Schedule A(J) ch: 3/4 Rpt: 7/11	1:
2	FILER NAME Petrazio, Joe	el K. (Mr.)			ı	ler ID (Ethics Commiss 0088179	ion Filers)
4	Date 01/03/2024  5 Full name of contributor out-of-state PAC (ID#:) Nichols, Van (Mr.)  6 Contributor address; City; State; Zip Code		<b>7</b> Ai	mount of Contribution (\$)	\$300.00		
		Celina, TX 75009					
8		Principal Occupation		9 Contributor's Job Title			
	Real Estate			Owner			
10		employer/law firm		11 Law firm of contributor's sp	ouse (	(if any)	
12	Nichols Land	s a child, law firm of parent(s) (i	f any)				
12	i Continuator i	s a criliu, iaw ilitri or pareril(s) (i	i airy)				
H	Date	Full name of contributor	out-of-state PAC (ID#:	)	Aı	mount of Contribution (\$)	
	01/20/2024	Rasor, Angie (Mrs.)  Contributor address; City;	<u> </u>				\$500.00
		Celina, TX 75009					
		Principal Occupation		Contributor's Job Title			
	Homemaker			Homemaker			
		employer/law firm		Law firm of contributor's sp	ouse (	(if any)	
	None	a a shild law firm of parant(a) (i	f any)				
	ii contributor i	s a child, law firm of parent(s) (i	rany)				
H	Date	Full name of contributor	out-of-state PAC (ID#:	)	Aı	mount of Contribution (\$)	
	01/18/2024	Seay, David (Mr.)	_				\$250.00
		Contributor address; City; Celina, TX 75009	State; Zip Code				
	Contributor's F	Principal Occupation		Contributor's Job Title			
	Finance	Timopai Coodpailon		Regional Accounts Mar	nager		
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (	(if any)	
	Sherman Wi	lliams Paints					
	If contributor is	s a child, law firm of parent(s) (i	f any)	1			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1	
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A(J)1: Sch: 4/4 Rpt: 8/11	=
2	FILER NAME Petrazio, Joe	el K. (Mr.)			3	Filer ID (Ethics Commission Filers) 00088179	
4	Date 01/02/2024  5 Full name of contributor out-of-state PAC (ID#:) Stringer, Linda (Mrs.)  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$100.0	0		
		Irving, TX 75060					
8		Principal Occupation		9 Contributor's Job Title			
	Retired			None			_
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)	
12		s a child, law firm of parent(s) (if	any)				_
			,				
F	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	=
	01/16/2024	Whiddon, Jordan (Mr.)  Contributor address; City; \$	State; Zip Code		•	\$500.0	0
		Dallas, TX 75251					
		Principal Occupation		Contributor's Job Title			
		ivate Practice		Partner			
		employer/law firm		Law firm of contributor's sp	ous	se (if any)	
	Song Whidd		A				_
	If contributor is	s a child, law firm of parent(s) (if	any)				
-	Date	Full name of contributor	out-of-state PAC (ID#:	)	Т	Amount of Contribution (\$)	=
	01/17/2024	Whiddon, Jordan (Mr.)				\$250.0	0
		Contributor address; City; S	State; Zip Code		-		
		Dallas, TX 75251		T			_
		Principal Occupation		Contributor's Job Title			
Lawyer in Private Practice Partner  Contributor's employer/law firm Law firm of contributor's sp			20116	co (if any)	_		
	Song Whidd			Law firm of contributor's sp	Jous	se (II ally)	
		s a child, law firm of parent(s) (if	any)				_
L							_

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

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
_	Sch: 1/2 Rpt: 9/11	Petrazio, Joel K. (Mr.)  00088179
4	Date	5 Payee name
	01/04/2024	48Hourprint
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$233.00	8000 Haskell Avenue
		Van Nuys, CA 91406
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense pop-up banner
		pop-up barrier
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_	Date	Pausa noma
		Payee name
	01/05/2024	Collin County GOP
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	2963 West 15th Street
		Suite 2981
		Plano, TX 75075
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Lincoln Day Dinner Campaign Slide
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Davisa nama
	01/05/2024	Payee name Collin County GOP
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	2963 West 15th Street
		Suite 2981
		Plano, TX 75075
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Lincoln Day Dinner Campaign Table
		Emoon Day Dimer Gampaign Table
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### 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 Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment		Committee Legal Services Salaries/Wages/Contract Labor	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.	
1	Total pages Schedule F1: Sch: 2/2 Rpt: 10/11	2 FILER NAME Petrazio, Joel K. (Mr.)	3 Filer ID (Ethics Commission Filers) 00088179
4		·	
	01/08/2024	5 Payee name Collin County GOP	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$300.00	2963 West 15th Street	
		Suite 2981	
		Plano, TX 75075	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Event Expense	outside of Texas. Complete Schedule T.
			TX, officeholder living expense
		Lincoln Day L	Dinner two event tickets
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 11/11 Petrazio, Joel K. (Mr.) 00088179 Date Payee name 01/12/2024 Collin County GOP 6 Amount (\$) Payee address; City; State; Zip Code \$200.00 2963 West 15th Street Suite 2981 Reimbursement from political contributions intended Plano, TX 75075 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense **Event Expense EXPENDITURE** Lincoln Day Dinner VIP Tickets Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH