CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comp	olete this form.	1 Filer ID (Ethics Comm 00088269		2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST	.1	MI	OFFICE	JSE ONLY
OFFICEHOLDER NAME	Ms.	Morgan L.			Date Received ELECTRONICA	
					07/12/2024	ALLI FILLD
	NICKNAME	LAST Kirkpatrick		SUFFIX	0111212024	
4 CANDIDATE /	ADDRESS / PO BOX; APT	Γ/SUITE#; CIT	Γ Y ;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING ADDRESS	4417 77th Street				Receipt #	Amount
Change of Address	Lubbock, TX 79424				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST	,	MI		
TREASURER NAME	Ms.	Deitra A.				
	NICKNAME	LAST		SUFFIX		
	Dede	Kirkpatrick				
6 CAMPAIGN	STREET ADDRESS (NO PO	O BOX PLEASE);	AP	T / SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER ADDRESS	4417 77th Street					
(Residence or Business)	Lubbock, TX 79424					
7 CAMPAIGN TREASURER PHONE	AREA CODE PHOI (806) 790-3348	NE NUMBER E	EXTENSION			
8 REPORT TYPE	January 15	30th day before	e election	Runoff	15th day after can appointment (offic	
	X July 15	8th day before	election	Exceeded modified reporting limit	Final Report (Atta	ch C/OH-FR)
9 PERIOD COVERED	Month Day Year 01/01/2024	TI	HROUGH	Month Day 06/30/202	Year 24	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	F	Primary	Runoff	Other	
	11/05/2024	XG	General	Special	_	
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
					Education District	15
	1					
		GO 7	TO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 29

13 C / OH NAME	Kirkpatrick, Morgan L	. (Ms.)		14 Filer ID 00088269	(Ethics Com	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures m	ccepted or political expenditual lay have been made without to uired to report this information	he candidate's or offi	ceholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
		COMMITTEE ADDRE	ESS			
	SPECIFIC					
		COMMITTEE CAMPA	AIGN TREASURER NAME			
		COMMITTEE CAMPA	AIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS		ITRIBUTIONS (OTHER THAI ONTRIBUTIONS MADE ELEC		s, \$	0.00	
	\$	3,568.00				
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS						0.00
	4. TOTAL POLITIC		\$	3,980.93		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		MAINTAINED AS OF THE LA	AST DAY OF THE	\$	962.13
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR		OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT		tru	wear, or affirm, under penalty le and correct and includes al lder Title 15, Election Code.			
			Ms. Mo	organ L. Kirkpatrick	ζ.	
		_	Signature of	Candidate or Officeh	older	_
AFFIX NO	TARY STAMP / SEAL AB	OVE				
Sworn to and subso	cribed before me, by the s	aid		, this the		day
of	, 20, to co	ertify which, witness m	y hand and seal of office.			
Signature of office	er administering	Printed name of	officer administering	Title of offic	er administer	ng oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				3 of 29
18 FILER NAI		19 Filer ID	(Ethics	Commission Filers)
-	k, Morgan L. (Ms.)	00088269		
	LE SUBTOTALS SCHEDULE		St	JBTOTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	3,568.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$		
4.	SCHEDULE E: LOANS	\$		
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	3,980.93	
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	\$		
12. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	428.96

	MONET	ARY POLITICAL CONTRIBU	TIOI	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete th	his fo	rm.	1	Total pages Schedule A1: Sch: 1/11 Rpt: 4/29	
2	FILER NAME Kirkpatrick, N	Лorgan L. (Ms.)			3	Filer ID (Ethics Commission 00088269	n Filers)
4	Date 02/28/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$10.00
_	District	Lubbock, TX 79416		Forely and (One best west are			
8	Student	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 02/05/2024	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	Lubbock, TX 79424 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Date 06/05/2024	Full name of contributor	(ID#:			Amount of Contribution (\$)	\$5.00
	Delicalization	Houston, TX 77077		Faralana (Cara Instructions			
	Financial Ma	pation / Job title (See Instructions) nager		Employer (See Instructions First Sterling Ventures (р	
	Date 02/25/2024	Full name of contributor out-of-state PAC Baxter, Nicole Contributor address; City; State; Zip Code Lubbock, TX 79423)		Amount of Contribution (\$)	\$25.00
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions	<u>I</u> S)		
	Date 01/26/2024	Full name of contributor out-of-state PAC Bowman, Amy Contributor address; City; State; Zip Code Lubbock, TX 79413				Amount of Contribution (\$)	\$250.00
	Principal occu unemployed	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/11 Rpt: 5/29	
2	FILER NAME Kirkpatrick, I	Morgan L. (Ms.)		3	Filer ID (Ethics Commission 00088269	n Filers)
4	Date 06/06/2024	 5 Full name of contributor out-of-state PAC (ID#:_Brian, P.K. 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$100.00
_	Deignaignal annu	Amarillo, TX 79109	O Francisco (Coo Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 03/16/2024	Full name of contributor out-of-state PAC (ID#:_Bustillos, Jenny Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
		Lubbock, TX 79412				
	Event Staff	pation / Job title (See Instructions)	Employer (See Instructions KT Black)		
	Date 04/16/2024	Full name of contributor out-of-state PAC (ID#:_ Bustillos, Jenny Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
		Lubbock, TX 79412				
	Principal occu Event staff	pation / Job title (See Instructions)	Employer (See Instructions KT Black)		
	Date 05/16/2024	Full name of contributor out-of-state PAC (ID#:_ Bustillos, Jenny Contributor address; City; State; Zip Code Lubbock, TX 79412)		Amount of Contribution (\$)	\$5.00
	Principal occu Event staff	pation / Job title (See Instructions)	Employer (See Instructions KT Black)		
	Date 06/16/2024	Full name of contributor out-of-state PAC (ID#:_ Bustillos, Jenny Contributor address; City; State; Zip Code Lubbock, TX 79412			Amount of Contribution (\$)	\$5.00
	Principal occu Event staff	pation / Job title (See Instructions)	Employer (See Instructions KT Black)		

	MONET	ARY POLITICAL CONTRI	BUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to comple	ete this for	n.	1	Total pages Schedule A1: Sch: 3/11 Rpt: 6/29	
2	FILER NAME Kirkpatrick, N	Morgan L. (Ms.)			3	Filer ID (Ethics Commission 00088269	n Filers)
4	Date 02/23/2024)	7	Amount of Contribution (\$)	\$500.00
		Lubbock, TX 79416-5714	į				
8	Principal occu Gardner	pation / Job title (See Instructions)	9	Employer (See Instructions Growing Together Texa			
	Date 01/05/2024	Claridge, Sonja)		Amount of Contribution (\$)	\$25.00
	Wheaton , IL 60189 Principal occupation / Job title (See Instructions)			Employer (See Instructions	·/		
	Registered N			Northwestern Medicine,		nicago	
	Date 01/31/2024	Full name of contributor out-of-state Deckard, Darla Contributor address; City; State; Zip Code	e PAC (ID#:)		Amount of Contribution (\$)	\$50.00
		Lubbock, TX 79413					
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
Date 02/29/2024		Full name of contributor out-of-state PAC (ID#:) Deckard, Darla Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$18.00
	Principal occuretired	Lubbock, TX 79413 pation / Job title (See Instructions)		Employer (See Instructions retired	<u> </u> 5)		
	Date 04/04/2024	Full name of contributor out-of-state Dunham, Charlotte Contributor address; City; State; Zip Code Lubbock, TX 79416	e PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Professor	pation / Job title (See Instructions)		Employer (See Instructions Texas Tech University	5)		
	. 1010301			. SAGE FOOT OTHERSTAY			

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	rm.	1	Total pages Schedule A1: Sch: 4/11 Rpt: 7/29	
2	FILER NAME Kirkpatrick, N	Morgan L. (Ms.)			3	Filer ID (Ethics Commission 00088269	n Filers)
4	Date 05/04/2024	5 Full name of contributorDunham, Charlotte6 Contributor address; City; Sta	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu Professor	Lubbock, TX 79416 pation / Job title (See Instructions)	9	Employer (See Instructions Texas Tech University	j ;)		
	Date 06/04/2024	Full name of contributor Dunham, Charlotte Contributor address; City; Sta	out-of-state PAC (ID#: atte; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu Professor	Lubbock, TX 79416 pation / Job title (See Instructions)		Employer (See Instructions Texas Tech University	<u> </u> 5)		
	Date 02/26/2024	Full name of contributor Elmer, Christina Contributor address; City; Sta	out-of-state PAC (ID#: atte; Zip Code)		Amount of Contribution (\$)	\$5.00
	•	Lubbock, TX 79416 pation / Job title (See Instructions)		Employer (See Instructions) 5)		
	Date 01/12/2024	Full name of contributor Giemza, Kristi Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu Nurse Practi	pation / Job title (See Instructions) tioner		Employer (See Instructions Lubbock Health Departr		nt	
	Date 06/05/2024	Full name of contributor Gonzalez, Kimberleigh Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$200.00
	Principal occu Realtor	pation / Job title (See Instructions)		Employer (See Instructions eXp Realty	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/11 Rpt: 8/29	
2	FILER NAME Kirkpatrick, N	Morgan L. (Ms.)		3	Filer ID (Ethics Commission 00088269	n Filers)
4	Date 05/07/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$10.00
_	<u> </u>	Lubbock, TX 79407				
8	Principal occu Realtor	pation / Job title (See Instructions)	Employer (See Instructions eXp Realty)		
	Date 02/10/2024	Full name of contributor out-of-state PAC (ID#:_ Goodwin, Constance Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Deireire I e e e	Lubbock, TX 79410-1407	Fandayar (Caa Instructions			
	Retired		Employer (See Instructions)		
	Date 01/01/2024	Full name of contributor out-of-state PAC (ID#:_ Gross, Melissa Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.00
		Lubbock, TX 79416				
	Principal occu Business As	pation / Job title (See Instructions) sistant	Employer (See Instructions Texas Tech University)		
	Date 02/20/2024	Full name of contributor out-of-state PAC (ID#:_ Guico, Kevin Contributor address; City; State; Zip Code Austin, TX 78756)		Amount of Contribution (\$)	\$25.00
	Principal occu Candidate	pation / Job title (See Instructions)	Employer (See Instructions self-employed)		
	Date 06/05/2024	Full name of contributor out-of-state PAC (ID#:_ Heggen, Melissa Contributor address; City; State; Zip Code Austin, TX 78704			Amount of Contribution (\$)	\$20.00
	Principal occu Actuary	pation / Job title (See Instructions)	Employer (See Instructions State of Texas)		

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how t	o complete this for	m.	1	Total pages Schedule A1: Sch: 6/11 Rpt: 9/29	
2	FILER NAME Kirkpatrick, N	Лorgan L. (Ms.)			3	Filer ID (Ethics Commission 00088269	n Filers)
4	Date 06/17/2024	5 Full name of contributor Hicks, Laura6 Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code)	7	Amount of Contribution (\$)	\$25.00
8	Principal occur	Lubbock, TX 79423 pation / Job title (See Instructions)	Iq	Employer (See Instructions	;) 		
Ŭ	unemployed	pation / oob title (eee manuchons)		unemployed	,,		
	Date 01/04/2024	Full name of contributor Howden, Norman Contributor address; City; Stat	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$25.00
		Dallas, TX 75218					
	Principal occu Librarian	pation / Job title (See Instructions)		Employer (See Instructions DCCCD	5)		
	Date 06/05/2024	Full name of contributor Jansz, Chrystal Contributor address; City; Stat	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$20.00
		Lubbock, TX 79424					
	Principal occu Professor	pation / Job title (See Instructions)		Employer (See Instructions TCS	s)		
	Date 06/28/2024	Full name of contributor Jones, Stephanie Contributor address; City; Stat Lubbock, TX 79423	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Professor	pation / Job title (See Instructions)		Employer (See Instructions Texas Tech University	5)		
	Date 06/17/2024	Full name of contributor Keel, Anne Contributor address; City; Stat Lubbock, TX 79403	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 7/11 Rpt: 10/29	
2	FILER NAME Kirkpatrick, N	Morgan L. (Ms.)				3	Filer ID (Ethics Commission 00088269	n Filers)
4	Date 01/28/2024	5 Full name of contributor Kirkpatrick, Eddie6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$100.00
	Dringing con	Lubbock, TX 79424	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Employer (See Instructions	,, 		
8	Handyman	pation / Job title (See Instructions)	9	Employer (See Instructions Self-employed	5)		
	Date 03/27/2024	Full name of contributor Kirkpatrick, Eddie Contributor address; City; St					Amount of Contribution (\$)	\$250.00
	Principal occu	Lubbock, TX 79424 pation / Job title (See Instructions)		Employer (See Instructions	رد آ		
	unemployed	pation / oob title (occ motivations	,		Employer (Gee mandenorie	,,		
	Date 06/16/2024	Full name of contributor Kohout, Sharon Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$20.00
		Lubbovk, TX 79423						
	Principal occu unemployed	pation / Job title (See Instructions)		Employer (See Instructions unemployed	5)		
	Date 06/28/2024	Full name of contributor Lindquist, Carol (Lady) Contributor address; City; St Lubbock, TX 79416)		Amount of Contribution (\$)	\$50.00
	Principal occu Professor	pation / Job title (See Instructions)		Employer (See Instructions Texas Tech University	<u> </u>		
	Date 06/27/2024	Full name of contributor Maloney, Patricia Contributor address; City; St Lubbock, TX 79410	out-of-state PAC (ID#:	••••			Amount of Contribution (\$)	\$50.00
	Principal occu Professor	pation / Job title (See Instructions			Employer (See Instructions Texas Tech University	5)		
	12.00001		1		2000 2000 2000			

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 8/11 Rpt: 11/29	
2	FILER NAME Kirkpatrick, N	Morgan L. (Ms.)			3	Filer ID (Ethics Commission 00088269	n Filers)
4	Date 06/10/2024	5 Full name of contributor Marbley, Aretha6 Contributor address; City; State	out-of-state PAC (ID#:; Zip Code		7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Lubbock, TX 79424 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>		
	Faculty	,		Texas Tech University	,		
	Date 06/15/2024	Full name of contributor McLarty, Sara Contributor address; City; State				Amount of Contribution (\$)	\$100.00
	Dringingless	Lubbock, TX 79412		Franks or (Cook batwotisms	_		
	Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 01/01/2024	Full name of contributor Peaslee, Kathryn Contributor address; City; State	out-of-state PAC (ID#:;			Amount of Contribution (\$)	\$25.00
		Lubbock, TX 79413					
	Principal occu :ectirer	pation / Job title (See Instructions)		Employer (See Instructions Texas Tech University)		
	Date 01/01/2024	Full name of contributor Puga, David Contributor address; City; State Lubbock, TX 79416				Amount of Contribution (\$)	\$50.00
	Principal occu Sound Engir	pation / Job title (See Instructions) neer		Employer (See Instructions Self-employed	<u> </u>		
	Date 03/04/2024	Full name of contributor Rackley, Mauni Contributor address; City; State Shallowater, TX 79363	out-of-state PAC (ID#:; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			 				

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 9/11 Rpt: 12/29	
2	FILER NAME Kirkpatrick, N	Norgan L. (Ms.)		3	Filer ID (Ethics Commission 00088269	n Filers)
4	Date 01/05/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$200.00
_		Wolfforth, TX 79382	T	<u> </u>		
8	Principal occu retired	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 01/04/2024	Full name of contributor out-of-state PAC (ID Ryan, Renee Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu	Glendale, AZ 85308 pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Sales	oduon 7 Job title (See matrictions)	Self-employed	3)		
	Date 02/03/2024	Full name of contributor out-of-state PAC (ID Smith, Stephanie Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Lubbock, TX 79413				
	Principal occu Unemployed	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/04/2024	Full name of contributor out-of-state PAC (ID Tawney, Jakob Contributor address; City; State; Zip Code Lubbock, TX 79423))		Amount of Contribution (\$)	\$5.00
	Principal occu Public Policy	pation / Job title (See Instructions) Fellow	Employer (See Instructions Texas AFT	s)		
	Date 06/22/2024	Full name of contributor out-of-state PAC (ID Tawney, Jakob Contributor address; City; State; Zip Code Lubbock, TX 79423	#:)		Amount of Contribution (\$)	\$10.00
	Principal occu Public Policy	pation / Job title (See Instructions)	Employer (See Instructions Texas AFT	s)		
	. asio i olicy	. 5	10,00711			

	MONEI	ARY POLITICAL C	CONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	1	Total pages Schedule A1: Sch: 10/11 Rpt: 13/29			
2	FILER NAME Kirkpatrick, N	Morgan L. (Ms.)		3	Filer ID (Ethics Commission 00088269	n Filers)	
4	Date 01/06/2024	5 Full name of contributor Taylor, Jacqueline6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$5.00
8	Principal occu The Happy k	Lubbock, TX 79414 pation / Job title (See Instructions) 9	Employer (See Instructions Sustainable Food Cente			
	Date 01/17/2024	Full name of contributor Townley, Katy Contributor address; City; State Lubbock, TX 79413	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Sales	pation / Job title (See Instructions)	Employer (See Instructions Visual Edge IT	<u>l</u> s)		
	Date 02/25/2024	Full name of contributor Watkins, Hilary Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	Principal occu	Lubbock, TX 79413 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Event planne	er		Texas Tech University S	Sys	tem	
	01/05/2024 Wisniewski, Sara Contributor address; City; State; Zip Code		out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Engineer	Lubbock, TX 79411 pation / Job title (See Instructions)	Employer (See Instructions R2M Engineering	<u> </u>		
	Date 06/05/2024	Full name of contributor Wood, Jamie Contributor address; City; St. Ransom Canyon, TX 7936)		Amount of Contribution (\$)	\$25.00
	Principal occu Optomitrist	pation / Job title (See Instructions)	Employer (See Instructions self-employed	5)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	1	Total pages Schedule A1: Sch: 11/11 Rpt: 14/29		
2	FILER NAME Kirkpatrick, I	Morgan L. (Ms.)		3	Filer ID (Ethics Commission 00088269	n Filers)
4	Date 02/04/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Fritch, TX 79036 spation / Job title (See Instructions)	9 Employer (See Instructions	 s)		
	•	al Healthcare	CPCHEM	,		
	Date 01/01/2024	Full name of contributor out-of-state PAC (ID#:_ Zubia Rae, Diana Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
		Lubbock, TX 79412				
	Principal occu Director	ipation / Job title (See Instructions)	Employer (See Instructions YWCA	s)		
	Date 02/01/2024	Full name of contributor out-of-state PAC (ID#: Zubia Rae, Diana Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.00
	Principal occu	Lubbock, TX 79412 upation / Job title (See Instructions)	Employer (See Instructions	 s)		
	unemployed					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		e)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission	Eilore)
_	Sch: 1/14 Rpt: 15/29	Kirkpatrick, Morgan L. (Ms.) 00088269	riieis)
4	Date 06/30/2024	5 Payee name ActBlue Technical Services	
6	Amount (\$) \$71.98	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, ME 02144-3132	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees for processing multiple political contribu 01/01/2024 - 06/30/2024	tions
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
	01/14/2024	ActBlue Technical Services	
	Amount (\$) \$90.00	Payee address; City; State; Zip Code 366 Summer Street	
		Somerville, ME 02144-3132	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Dinner ticket for the Texas Democratic Wome Convention	en's
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
F	Date	Payee name	
	01/14/2024	ActBlue Technical Services	
	Amount (\$) \$100.00	Payee address; City; State; Zip Code 366 Summer Street	
		Somerville, ME 02144-3132	
	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 Lubbock County Democratic Party Banquet as	ıd
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to compl	es/Contract Labor OTHER (enter a category not listed above) lete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 2/14 Rpt: 16/29	Kirkpatrick, Morgan L. (Ms.)	00088269
4	Date	5 Payee name	
	02/05/2024	ActBlue Technical Services	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$50.00	366 Summer Street	
		Somerville, ME 02144-3132	
8	PURPOSE OF	, (************************************	Description
	EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Texas Democrat Women's luncheon
			Salas Desired at the money tangeness.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
	Date	Payee name	
	02/05/2024	Allsups	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$25.94	311 South Gregg Street	
	420.01	CII Count Crogg Chook	
		Big Springs, TX 79720	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Gas for returning from San Angelo after meeting with
	l		Tom Greene County Democrats
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	•	
_	Date	Payee name	
	06/16/2024	Anedot	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1.92	555 Hilton Avenue	
	41.02	Suite 106	
		Baton Rouge, LA 70808	
	PURPOSE OF	The state of the s	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Fees	Check if Austin, TX, officeholder living expense
			Fees for processing multiple contributions
			01/01/2024 - 06/16/2024
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OF	4	
			I

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
pense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	Salaries	s/Wage	s/Contract Labor		OTHER (enter a	a category not listed above)	
	·			The Instruction Guid	de explains how to	compl	lete this form.	_			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)	
	Sch: 3/14 Rpt: 17/29		Kirkpatrick,	Morgan L. (Ms.)					00088269		
4	Date	5	Payee name								
	02/13/2024		Austin Marri	ott South							
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip (Code					
ľ	\$175.23	ľ	4415 S. High	•	otato, E.p.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	4110.20		1120011119	ay oo							
			A T./ =	107.45							
		L	Austin, TX 7	8745							
8	PURPOSE	(a)	Category (Se	e Categories listed at the	e top of this schedule)	(b)	Description				
	OF EXPENDITURE		Travel Out of	of District						plete Schedule T.	
							—		officeholder living		
							Democratic V			ttend the Texas ention	
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Office	ceholder name	Office so	ought			Office h	eld	
	experialitate to bettern over	<u></u>									
	Date		Payee name								
	05/02/2024		Campaign V	erify							
	Amount (\$)		Payee addres	ss; City;	State; Zip (Code					
	\$95.00		1215 31st S	treet NW							
			Washington	DC 20007							
_	DUDDOGE	₩				Las					_
	PURPOSE OF	(a)		e Categories listed at the		(a)	Description	outoi	do of Toyon Com	anloto Cohodulo T	
	EXPENDITURE		Solicitation/I	Fundraising Expe	ense		<u> </u>		officeholder living	nplete Schedule T. Diexpense	
							Preparation fo				
							•		J		
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office so	<u>l</u> ouaht			Office h	eld	_
	expenditure to benefit C/O		7 a a. a		000 0.	zug			000	o.u	
	D-t-	1									_
	Date		Payee name								
	01/31/2024		Canva								
	Amount (\$)		Payee addres	•	State; Zip (Code					
	\$18.99		3212 E. Ces	ar Chavez Stree	t						
			Building 1, S	Suite 1300							
			Austin, TX 7	8702							
	PURPOSE	(a)	Category (cr	e Categories listed at the	ton of this schedule)	(b)	Description				_
	OF		Website	e Calegories listed at the	top of this schedule)	'		outsi	de of Texas. Com	pplete Schedule T.	
	EXPENDITURE						Check if Austin,	, TX,	officeholder living	g expense	
							Online platfor	m	to build a we	ebsite	
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office so	ought			Office h	eld	
	expenditure to benefit C/OI	H									
											_
l											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/14 Rpt: 18/29	Kirkpatrick, Morgan L. (Ms.) 00088269
4	Date	5 Payee name
	02/23/2024	Canva
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$12.99	3212 E. Cesar Chavez Street
		Building 1, Suite 1300
		Austin, TX 78702
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Website and design Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Online platform to build website and creating
		graphics
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_	Date	David and the second se
	03/24/2024	Payee name Canva
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.99	3212 E. Cesar Chavez Street
		Building 1, Suite 1300
		Austin, TX 78702
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Website and design Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Online platform for building website and creating
		graphics
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	04/23/2024	Canva
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.99	3212 E. Cesar Chavez Street
		Building 1, Suite 1300
		Austin, TX 78702
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Website and design Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Online platform for building website and creating graphics
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Coi	Gift/Awards/Memorials Expense Printing Legal Services Salarie The Instruction Guide explains how to	s/Wage	ense Travel Out of District ges/Contract Labor OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)	
L	Sch: 5/14 Rpt: 19/29	_	Kirkpatrick, Morgan L. (Ms.)		00088269	
4	Date	5	Payee name			
L	05/22/2024	L	Canva			
6	Amount (\$)	7	Payee address; City; State; Zip 0	Code	e	
	\$12.99		3212 E. Cesar Chavez Street			
			Building 1, Suite 1300			
			Austin, TX 78702			
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b	b) Description	
	OF EXPENDITURE		Website and design		Check if travel outside of Texas. Complete Schedule T.	
					Check if Austin, TX, officeholder living expense	
					Online platform for building website and creating graphics	
Ļ	Commission ONE V. C. F.	<u> </u>	Canadidate /Office had a sure sure			
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Officeholder name Office s	ough	ht Office held	
	Date		Payee name			
	06/22/2024		Canva			
	Amount (\$)		Payee address; City; State; Zip (Code	e	
	\$12.99		3212 E. Cesar Chavez Street			
			Building 1, Suite 1300			
			Austin, TX 78702			
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b	b) Description	_
	OF EXPENDITURE		Website/design		Check if travel outside of Texas. Complete Schedule T.	
					Check if Austin, TX, officeholder living expense	
					Online tool for designing website and creating graphics	
	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Officeholder name Office s	ough	nt Office held	
	Date		Payee name			
	01/22/2024		Canva			
	Amount (\$)		Payee address; City; State; Zip (Code	e	\neg
	\$12.99		3212 E. Cesar Chavez Street			
			Bldg. 1, Suite 1300			
			Austin, TX 78702			
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b	b) Description	_
	OF EXPENDITURE		Website and Design		Check if travel outside of Texas. Complete Schedule T.	
	LAFENDITURE				Check if Austin, TX, officeholder living expense	
					Online platform to build website and create graphic	S
	Complete ONLY if direct		Candidate/Officeholder name Office so	ough	nt Office held	
	expenditure to benefit C/OH	Н				
L	rms provided by Tayas E	thic	es Commission wave athics state to	. IIC	Version V// 1.0 d378ah	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/14 Rpt: 20/29	Kirkpatrick, Morgan L. (Ms.)
4	Date	5 Payee name
	01/15/2024	DRI Printing Services/Next Day Flyers
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$56.26	8000 Haskell Avenue
		Van Nuys, CA 91406
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Business cards
		Business ourds
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
,	expenditure to benefit C/O	
_	Data	
	Date 06/06/2024	Payee name Exxon Carlsbad
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.05	106 W. Greene St
		Carlsbad, NM 88220
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Gas for trip to El Paso - Texas Democratic
		Convention
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y
_	Data	
	Date 02/09/2024	Payee name
		Fairfield Inn & Suites
	Amount (\$)	Payee address; City; State; Zip Code
	\$109.25	1740 Airport Blvd.
		Amarillo, TX 79118
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Attended the Panhandle Democratic Banquet - hotel
		charges
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/14 Rpt: 21/29	Kirkpatrick, Morgan L. (Ms.) 00088269
4	Date	5 Payee name
	06/12/2024	FastSigns
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$99.59	4825 50th Street
		 #B
		Lubbock, TX 79414
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign banner
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiorare to benefit C/O	<u>'</u>
	Date	Payee name
	04/26/2024	Hilton Garden Inn
	Amount (\$)	Payee address; City; State; Zip Code
	\$759.51	111 West University Avenue
		El Paso, TX 79902
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Lodging - Texas Democratic Convention
		25dgillig Toxac 25lillocialis Colivertion
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	04/29/2024	LubbockPRIDE
	Amount (\$)	
	\$55.20	P. O. Box 6771
		Lubbock, TX 79493
	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
		Campaign booth at the Lubbock Pride Festival
		Sampagh South at the Eubbook i nuc i Collival
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comi

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/14 Rpt: 22/29	Kirkpatrick, Morgan L. (Ms.) 00088269
4	Date	5 Payee name
	02/10/2024	Lyft Car Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$13.49	1740 Airport Blvd.
		Amarillo, TX 79118
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Lyft ride from hotel to Amarillo - after attending the
		Panhandle Democratic Banquet
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	02/13/2024	Lyft Car Services
_	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	4415 South Highway 35
	Ψ30.00	4413 South Flighway 33
		Austin, TX 78745
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Lyft from Austin hotel to Austin Airport - Attending the
		Texas Democratic Women's Convention
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/12/2024	Main Street Member Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$22.72	10801 Airport Blvd.
		Amarillo, TX 79111
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense travel expense
		πανοι ολροπου
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

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

Contributions/ Donations Made By - Candidate/Officeholder/Political Co Credit Card Payment	Gift/Awards/Memorials Expense Printing Expense Travel Out of District committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
4 7 1 0 1 1 5 1	· · · · · · · · · · · · · · · · · · ·	- \
1 Total pages Schedule F1: 2 Sch: 9/14 Rpt: 23/29	FILER NAME Kirkpatrick, Morgan L. (Ms.) 3 Filer ID (Ethics Commission Filers) 00088269	5)
4 Date 5	Payee name	
06/22/2024	Office Depot	
6 Amount (\$) 7	Payee address; City; State; Zip Code	
\$33.94	2504 50th Street	
	Lubbock, TX 79413	
8 PURPOSE (a	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 Tabling displays - Lubbock Pride Fest	
	Tability displays - Eubbock Flide Fest	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
·		
Date	Payee name	
06/22/2024	Office Depot	
Amount (\$)	Payee address; City; State; Zip Code	
\$5.00	2504 50th Street	
	Lubbock, TX 79413	
PURPOSE (a	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	
	Printing of campaign material for a meet & greet	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
Deta 1		
Date	Payee name	
06/27/2024	Office Depot	
Amount (\$)	Payee address; City; State; Zip Code	
\$13.00	2504 50th Street	
	Lubbock, TX 79413	
PURPOSE (a	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.	
	Conico of bandauta for most 8 great	
	Copies of handouts for meet & greet	
Complete ONLY if direct	Condidate Office holder name Office hought	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
,		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/14 Rpt: 24/29	Kirkpatrick, Morgan L. (Ms.) 00088269
4	Date	5 Payee name
	06/07/2024	SMG El Paso
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$13.00	C Street
		El Paso, TX 79901
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Parking/Texas Democratic Convention Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Parking
		T Willing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
,	expenditure to benefit C/O	
\vdash	Dete	
	Date	Payee name
	06/07/2024	SMG El Paso
	Amount (\$)	Payee address; City; State; Zip Code
	\$13.00	C Street
		El Paso, TX 79901
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Parking Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Parking / Texas Democratic Convention
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/08/2024	SMG El Paso
	Amount (\$)	Payee address; City; State; Zip Code
	\$13.00	C Street
		El Paso, TX 79901
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Parking Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Parking / Texas Democratic Convention
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Oriana.o to borioni O/Oi	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment									
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers	s)							
-	Sch: 11/14 Rpt: 25/29	Kirkpatrick, Morgan L. (Ms.)	-,							
_	•									
4	Date	5 Payee name								
	06/20/2024	Sam's								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$165.46	6016 Marsha Sharp Freeway								
		Lubbook TV 70407								
		Lubbock, TX 79407								
8	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								
		Canopy and candy for a booth for Lubbock Pride Fest								
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
L	expenditure to benefit C/OI	п 								
	Date	Payee name								
	02/06/2024	Southwest Airlines								
\vdash	Amount (\$)	Payee address; City; State; Zip Code								
	\$51.20	2702 Love Field Drive								
	Φ31.20	2702 Love Field Dilive								
		Dallas, TX 75235								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.								
	EXPENDITURE	Check if Austin, TX, officeholder living expense								
		Airline tickets to attend Texas Democratic Women	n's							
L		Convention in Austin								
Complete ONLY if direct Candidate/Officeholder name Office sought Office held										
	expenditure to benefit C/O	H								
H	Date	Payee name								
	03/14/2024	Southwest Airlines								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$363.96	2702 Love Field Drive								
		Dallas, TX 75235								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF	Travel Out of District Check if travel outside of Texas. Complete Schedule T.								
	EXPENDITURE	Check if Austin, TX, officeholder living expense								
		Flight to El Paso for Texas Democratic Convention	n							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
expenditure to benefit C/OH										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.			Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Cabadula F1:	2							١,	Filor ID	(Ethics Commission Filers)
	Total pages Schedule F1:	 			`				3		(Luics Commission File(s)
	Sch: 12/14 Rpt: 26/29		тікраілск,	Morgan L. (Ms.)					00088269	
4	Date	5	Payee name								
	03/14/2024		Southwest A	Airlines							
6	Amount (\$)	7	Payee addres	ss; City;	State	; Zip Co	de				
	\$35.00		2702 Love I	Field Drive							
			Dallas, TX 7	75235							
Ļ	DUDDOCE	(=)				-	/b\	5			
8	PURPOSE OF	(a)		ee Categories listed at	the top of this sch	nedule)	(D)	Description	outoi	do of Toyon Con	nplete Schedule T.
	EXPENDITURE		Travel Out	of District				=		officeholder livin	
								—			t to El Paso for Texas
								Democratic C		-	
9	Complete ONLY if direct		Candidate/Offi	ceholder name		Office sou	aht			Office h	eld
9	expenditure to benefit C/O		Januiuale/UIII	conduct Haine	(onice soul	grit			Office II	Ciu
_	<u> </u>	_									
	Date		Payee name								
	03/14/2024		Southwest A	Airlines							
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de		_		
	\$30.00		2702 Love I	Field Drive							
			Dallas, TX	75235							
	PURPOSE OF	(a)		ee Categories listed at	the top of this sch	nedule)	(b)	Description			
EXPENDITURE			Travel Out of District				Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
											rn Flight to El Paso for
								Texas Democ			
<u> </u>	Complete ONU V if alice	Ļ	Dandidet-10"			Office	a. la ±				
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH											
H	Date	Г	Payee name								
06/08/2024			Speedway								
		\vdash		O:t- ::	Ct-1	, 7:- O	d-				
	Amount (\$)		Payee addres	•	State	; Zip Co	ue				
	\$21.36		6700Gatew	ay Bivd. E							
			El Paso, TX	79915							
	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sch	nedule)	(b)	Description			
	OF EXPENDITURE		Travel Out					ш			nplete Schedule T.
	_/, _,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							ш		officeholder livin	
								Gas - El Paso) - T	rexas Dem	ocratic Convenstion
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			Candidate/Offi	ceholder name	(Office sou	ght			Office h	eld
experientere to benefit 0/011											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/14 Rpt: 27/29	Kirkpatrick, Morgan L. (Ms.) 00088269
4	Date	5 Payee name
	02/01/2024	Target
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$32.46	6064 Marsha Sharp Freeway
		Lubbock, TX 79407
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Camera equipment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		for us in Zoom meetings and interview
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientare to benefit Great	<u>'</u>
	Date	Payee name
	02/11/2024	Target
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.74	6064 Marsha Sharp Freeway
		Lubbock, TX 79407
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Snacks for trip to Amarillo then Austin
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/22/2024	Texas Democratic Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$325.00	P. O. Box 15707
		Austin, TX 78761
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Voter information Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Access to voter information
		7.60035 to Voter information
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not list The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 14/14 Rpt: 28/29	Kirkpatrick, Morgan L. (Ms.) 00088269				
4	Date	5 Payee name				
	02/11/2024	Texas Democratic Party				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$325.00	P. O. Box 15707				
		Austin, TX 78761				
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Access to voter information Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		Access to voter information				
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
	Date	Payee name				
	02/14/2024	Worley Printing Co., Inc.				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$264.80	3217 North IH 35				
		Austin, TX 78722				
	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				
		Printing of campaign literature				
		Thining or outripage.				
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H				
H	Date	Payee name				
	02/07/2024	Payee name Worley Printing Co., Inc.				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$372.94	3217 North IH 35				
		Austin, TX 78722				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense				
		Printing of campaign literature				
\vdash	Complete ONI V if direct	Candidate/Officeholder name Office sought Office held				
	Complete ONLY if direct expenditure to benefit C/Ol	y				
L						

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 29/29 2 FILER NAME Filer ID (Ethics Commission Filers) Kirkpatrick, Morgan L. (Ms.) 00088269 8 Amount (\$) Date 5 Name of person from whom amount is received 05/07/2024 Southwest Airlines \$398.96 6 Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75235 Purpose for which amount is received Check if political contribution returned to filer Refund of airfare to El Paso Amount (\$) Date Name of person from whom amount is received 05/09/2024 Southwest Airlines \$30.00 Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75235 Purpose for which amount is received Check if political contribution returned to filer Refund of Early Bird boarding