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) 00069345 CANDIDATE / MS / MRS / MR **FIRST** ΜI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Jesus E. NAME Date Received **ELECTRONICALLY FILED** 07/02/2024 NICKNAME LAST **SUFFIX** Jesse Nevarez Jr. CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; ZIP CODE Date Hand-delivered or Date Postmarked **OFFICEHOLDER** MAILING Receipt # Amount **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST ΜI **TREASURER** Mr. Jesus E. NAME NICKNAME LAST **SUFFIX** Jesse Nevarez Jr. **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (817) 800-0232 **PHONE** REPORT TYPE January 15 30th day before election 15th day after campaign treasurer Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Day Month Day Year Year **COVERED THROUGH** 01/01/2024 06/30/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/08/2022 χ General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 231 Tarrant District Judge District 231

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 5

13 C / OH NAME	Nevarez Jr., Jesus E	(The Honorable)		14 Filer ID 00069345	(Ethics Comn	nission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures i	accepted or political expenditu may have been made without t quired to report this information	the candidate's or offic	eholder's kno	wledge or
Additional Pages	COMMITTEE TYPE COMMITTEE NAME					
	GENERAL	COMMITTEE ADDR	NECC.			
	SPECIFIC	COMMITTEE ADDR	(E33			
	Si Edil lo					
		COMMITTEE CAMP	PAIGN TREASURER NAME			
		COMMITTEE CAMP	PAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS			NTRIBUTIONS(OTHER THAN CONTRIBUTIONS MADE ELEC		\$	0.00
		ICAL CONTRIBUT		S)	\$	0.00
EXPENDITURE TOTALS	(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES				\$	0.00
	4. TOTAL POLIT	ICAL EXPENDITU	RES		\$	10,960.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD				\$	4,614.44
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT						
		tr	swear, or affirm, under penalty ue and correct and includes al nder Title 15, Election Code.			
			The Honoral	ble Jesus E. Nevare	ez Jr.	
		-	Signature of	Candidate or Officeho	older	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
				, this the		_ day
of	, 20, to ce	ertify which, witness n	ny hand and seal of office.			
Signature of office	er administering oath	Printed name o	f officer administering oath	Title of office	er administerin	g oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			3 of 5				
18 FILER NAME Nevarez Jr., Jesus E. (The Honorable) 19 Filer ID (Ethics Commission Filers) 00069345							
l	20 SCHEDULE SUBTOTALS NAME OF SCHEDULE						
1.	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$				
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$				
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$					
4.	SCHEDULE E(J): LOANS (JUDICIAL)	\$					
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$ 10,960.00				
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$				
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$				
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$				
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$				
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$				
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$				
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS ITO FILER	RETURNED	\$				

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee			Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services	ood/Beverage Expense Polling Expense ft/Awards/Memorials Expense Printing Expense				Travel in District Travel Out of District OTHER (enter a category not listed above)			
	Credit Card Payment The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F1: Sch: 1/2 Rpt: 4/5					Filer ID 00069345	•	nission Filers)			
4	Date	5 Payee name	<u> </u>					<u> </u>			
	03/01/2024	1	Bar Assocation								
6	Amount (\$)	7 Payee addre		State:	Zip Cod						
•	\$200.00	Post Office		otato,	2. p 00 0	Ü					
		Arlington, ⁻	TX 76004-0882								
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fish Fry									
9	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Off	fice soug	ht			Office	neld	
	Date	Payee name									
	01/02/2024	Colleyville	Lions Club								
	Amount (\$)	Payee addr	ess; City;	State;	Zip Cod	e					
\$95.00 PO Box 536											
		Colleyville,	TX 76034								
	PURPOSE	(a) Category (See Categories listed at the	top of this sched	ule) (b) D	escription				
	OF EXPENDITURE	Dues Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Dues									
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Off	fice soug	ht			Office	neld	
	Date	Payee name									
	04/26/2024	Law Office	s of Elizabeth Parr	met							
	Amount (\$) \$10,000.00	Payee addro 4320 West	ess; City; : Vickery Blvd	State;	Zip Cod	е					
		Fort Worth	, TX 76107								
	PURPOSE	(a) Category (s	See Categories listed at the	top of this sched	ule) (b) D	escription				
	OF EXPENDITURE	Legal Serv	ices					n, TX	ide of Texas. Co , officeholder livi	mplete Schedule T. ng expense	
	Operation ONE V. C. P.	0	£' -			1-4			6.5	1-1	
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Off	fice soug	nt			Office	neid	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitl/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor

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

	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: 2/2 Rpt: 5/5	Nevarez Jr., Jesus E. (The Honorable) 00069345
4	Date	5 Payee name
	04/24/2024	McFarling, Bruce
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$50.00	Unknown
		Fort Worth, TX 76244
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Networking Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Networking Fees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
"	expenditure to benefit C/OI	the state of the s
⊨	Data	
	Date	Payee name
L	03/05/2024	Tarrant County Family Law Bar Association
	Amount (\$)	Payee address; City; State; Zip Code
	\$115.00	1807 Tremont Ave.
		Fort Worth, TX 76107
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Annual Golf Tourn.
		Allitual Golf Tourn.
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Data	Davida marea
	Date 04/01/2024	Payee name True Texas
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	3617 Greenbriar Ct
		Colleyville, TX 76034
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense Fund Raiser
		Fullu Naisei
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	
\vdash		