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) 00086174 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Jennifer M. NAME Date Received **ELECTRONICALLY FILED** 07/02/2024 NICKNAME LAST **SUFFIX** Ebrom Dillingham CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Amy Alexander NAME NICKNAME LAST **SUFFIX** Seal **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** (830) 534-2475 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 01/01/2024 06/30/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge (Multi-county) District Judge (Multi-county) District 81

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 7

13 C / OH NAME	Dillingham, Jennifer N	Л. (The Honorable)	14 Filer ID 00086174	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures may have been	litical expenditures made by political or made without the candidate's or offic this information only if they receive no	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
ages	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASU	JRER NAME	
		COMMITTEE CAMPAIGN TREASU	JRER ADDRESS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS ES OF LOANS, OR CONTRIBUTION	S(OTHER THAN PLEDGES, LOANS, NS MADE ELECTRONICALLY)	\$ 0.00
		I CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTI	EES OE LOANS)	\$ 0.00
EXPENDITURE TOTALS		ZED POLITICAL EXPENDITURES	EES OF LOANS)	\$ 0.00
	4. TOTAL POLIT	CAL EXPENDITURES		\$ 4,942.51
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED	AS OF THE LAST DAY OF THE	\$ 5,490.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDII TING PERIOD	NG LOANS AS OF THE LAST DAY	\$ 10,803.99
17 AFFIDAVIT				
			n, under penalty of perjury, that the ac and includes all information required Election Code.	
			The Honorable Jennifer M. Dilling	gham
			Signature of Candidate or Officeho	lder
AFFIX NO	TARY STAMP / SEAL ABO	OVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
of	, 20, to ce	ertify which, witness my hand and se	al of office.	
Signature of office	er administering oath	Printed name of officer adminis	stering oath Title of office	er administering oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			3 of 7
18 FILER NAI Dillinghar	ME m, Jennifer M. (The Honorable)	19 Filer ID 00086174	(Ethics Commission Filers)
20 SCHEDUL NAME OF	SUBTOTAL AMOUNT		
1.	\$		
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 4,942.51
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	\$

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Advertising Expense Event Expense

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Office Overhead/Rental Expense Food/Beverage Expense Foling Expense Offit/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor	Transportation Equipment & Related 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 G:	FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 1/3 Rpt: 4/7	Dillingham, Jennifer M. (The Honorable)	00086174
4	Date	Payee name	
	01/13/2024	Atascosa County Livestock Show, Inc.	
6	Amount (\$)	Payee address; City; State; Zip Code	
	\$775.00	PO Box 711	
	Reimbursement from		
	political contributions intended	Pleasanton, TX 78064	
8	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Contributions/Donations Made By	Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee Stockshow Cor	tributions
9	Complete ONLY if direct expenditure to benefit	andidate/Officeholder name Office sought	Office held
	C/OH		
	Date	Payee name	
	06/13/2024	Google LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$36.00	1600 Amphitheatre Pkwy	
	Reimbursement from	,	
	X political contributions intended	Mountain View, CA 94043	
	PURPOSE OF	Category (See Categories listed at the top of this schedule) Description	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense	Check if Austin, TX, officeholder living expense
		Email Address	
	Complete ONLY if direct	andidate/Officeholder name Office sought	Office held
	expenditure to benefit	and date/Oniceholder name Onice sought	Office field
	C/OH		
	Date	Payee name	
	01/20/2024	Karnes County Youth Show, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$3,078.00	PO Box 590	
	Reimbursement from political contributions		
	intended	Runge, TX 78151	
	PURPOSE OF	Category (See Categories listed at the top of this schedule) Description	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Contributions/Donations Made By	Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee Stockshow Dor	auoris
H	Complete ONLY if direct	andidate/Officeholder name Office sought	Office held
	expenditure to benefit	Cince Sought	Office field
	C/OH		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

Solicitation/Fundraising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense

Loan Repayment/Reimbursement

	Consulting Expense Constitutions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Polling Ex Printing E Salaries/V	xpense Vages/Contract Labor		Travel in District Travel Out of District OTHER (enter a categ	ory not listed above)
		Ι	·	now to co	implete this form.			
1	Total pages Schedule G: Sch: 2/3 Rpt: 5/7	2 FILER NAME	E Jennifer M. (The Honorable	2)		1	Filer ID (Ethics 00086174	Commission Filers)
_	<u> </u>	_		=)			00080174	
4	Date 06/27/2024	5 Payee name Pleasanton						
6	Amount (\$)	7 Payee addre	ss; City; State;	; Zip Co	ode			
	\$40.00	PO Box 880	0					
	Reimbursement from							
	X political contributions intended	Pleasanton	, TX 78064		_			
8	PURPOSE OF	(a) Category (s	ee Categories listed at the top of this sch	edule)	(b) Description	_		Texas. Complete Schedule T.
	EXPENDITURE	Advertising	Expense		L	Cn	eck if Austin, TX, office	nolder living expense
					4th of July Ad			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	holder name		Office sought		Office	held
	Date	Payee name						
	03/11/2024	Pleasanton						
	Amount (\$)	Payee addre	ss; City; State;	; Zip Co	ode			
	\$45.00	PO Box 880		•				
	Reimbursement from							
	X political contributions intended	Pleasanton	. TX 78064					
	PURPOSE	_	ee Categories listed at the top of this sch	edule)	Description	☐ Ch	eck if travel outside of	Texas. Complete Schedule T.
	OF	Advertising		edule)		=	eck if Austin, TX, office	·
	EXPENDITURE	, averasing	Ехрепос		Seasonal Ad	_		
	Complete ONLY if direct	L Candidate/Office	holder name		Office sought		Office	held
	expenditure to benefit				ŭ			
	C/OH							
	Date	Payee name						
	06/18/2024	Squarespa	ce					
	Amount (\$)	Payee addre	ss; City; State;	; Zip Co	ode			
	\$293.11	225 Varick	Street					
	Reimbursement from	12th Floor						
	X political contributions intended	New York,	NY 10014					
\vdash	PURPOSE		ee Categories listed at the top of this sch	edule)	Description	Ch	eck if travel outside of	Texas. Complete Schedule T.
	OF	Advertising		,	·	=	eck if Austin, TX, office	
	EXPENDITURE				Website Renewa	al		
	Complete ONLY if direct	<u>I</u> Candidate/Office	holder name		Office sought		Office	held
	expenditure to benefit						- 100	
	C/OH							
l								

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E Salaries/V	xpense Vages/Contract Labor		Transportation Equipment & Relate Travel in District Travel Out of District OTHER (enter a category not listed	
			The Instruction Guide explains	how to co	omplete this form.			
1	Total pages Schedule G:	2 FILER NAME				3	Filer ID (Ethics Commiss	sion Filers)
	Sch: 3/3 Rpt: 6/7	Dillingham,	Jennifer M. (The Honorable	e)			00086174	
4	Date	5 Payee name				<u> </u>		
	02/29/2024	The Happy	Dudes					
6	Amount (\$)	7 Payee addre	ss; City; State;	; Zip Co	ode			
	\$325.40	218 N. Smit	th Street					
	Reimbursement from							
	X political contributions intended	Pleasanton	, TX 78064					
8	PURPOSE	(a) Category (s	ee Categories listed at the top of this sch	edule)	(b) Description	Ch	eck if travel outside of Texas. Com	plete Schedule T.
	OF EXPENDITURE	Advertising	Expense			Ch	eck if Austin, TX, officeholder living	expense
	EXI ENDITORE				Shirts for Parade	es		
9	Complete ONLY if direct expenditure to benefit	Candidate/Office	holder name		Office sought		Office held	
	С/ОН							
	Date	Payee name						
	05/30/2024	Wilson Cou	nty News					
	Amount (\$)	Payee addre	ss; City; State;	; Zip Co	ode			
	\$30.00	1012 C Stre	eet					
	Reimbursement from							
	X political contributions intended	Elorosvillo	TV 7011 <i>1</i>					
		Floresville,	17 /0114					
	PURPOSE OF	1	ee Categories listed at the top of this sch	edule)	Description	=	eck if travel outside of Texas. Com	
	EXPENDITURE	Advertising	Expense		L 4		eck if Austin, TX, officeholder living	expense
					4th of July Ad			
	Complete ONLY if direct expenditure to benefit	Candidate/Office	holder name		Office sought		Office held	
	C/OH							
		ı						
	Date	Payee name						
	02/13/2024	Wilson Cou	nty Republican Party					
	Amount (\$)	Payee addre	ss; City; State;	; Zip Co	ode			
	\$320.00	860 Paddy	Road					
	Reimbursement from							
	X political contributions intended	Floresville,	TX 78114					
	PURPOSE	Category (s	ee Categories listed at the top of this sch	edule)	Description	=	eck if travel outside of Texas. Com	
	OF EXPENDITURE		ns/Donations Made By			Ch	eck if Austin, TX, officeholder living	expense
		Candidate/0	Officeholder/Political Comm	ittee	Table for Event			
		Candidate/Office	holder name		Office sought		Office held	
	expenditure to benefit C/OH							
L								

The Instruction Guide explains how to complete this form. FILER NAME Dillingham, Jennifer M. (The Honorable) 4 Name of lender Dillingham, Jennifer (The Honorable) 5 Lender address; City; State; Zip Code Falls City, TX 78113 GUARANTOR INFORMATION 8 Name of guarantor GUARANTOR INFORMATION 7 Guarantor address; City; State; Zip Code	OUTS	TANDING LOANS	SCHEDULE L			
Dillingham, Jennifer M. (The Honorable) LENDER INFORMATION 4 Name of lender Dillingham, Jennifer (The Honorable) 5 Lender address; City; State; Zip Code Falls City, TX 78113 GUARANTOR INFORMATION 6 Name of guarantor	The Inst	ruction Guide explains how to complete this form.				
Dillingham, Jennifer (The Honorable) 5 Lender address; City; State; Zip Code Falls City, TX 78113 GUARANTOR INFORMATION 6 Name of guarantor			3 Filer ID (Ethics Commission Filers) 00086174			
5 Lender address; City; State; Zip Code Falls City, TX 78113 GUARANTOR INFORMATION 6 Name of guarantor	LENDER INFORMAT	TON!	·			
GUARANTOR INFORMATION 6 Name of guarantor		5 Lender address; City; State; Zip Code				
INFORMATION						
not applicable 7 Guarantor address; City; State; Zip Code		OR TION 6 Name of guarantor				
	X not appl	icable 7 Guarantor address; City; State; Zip Code				