

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00020056	2 Total pages filed: 7	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST E. Lee	MI	
	NICKNAME	LAST Gabriel	SUFFIX	
OFFICE USE ONLY				
Date Received			ELECTRONICALLY FILED	
			07/13/2024	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE	
	REDACTED PER 254.0313, GOV'T CODE			
	Date Hand-delivered or Date Postmarked		Receipt #	Amount
	Date Processed		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Sue	MI	
	NICKNAME	LAST Bancroft	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #; CITY; STATE; ZIP CODE	
	REDACTED PER 254.0313, GOV'T CODE			
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	(817)	475-3693		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year 01/01/2024	THROUGH	Month Day Year 06/30/2024	
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE	
			<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) Senior Judge	12 OFFICE SOUGHT (if known) None		

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 7

13 C / OH NAME Gabriel, E. Lee (The Honorable) **14** Filer ID (Ethics Commission Filers)
00020056

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

Additional Pages

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

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	9,471.29
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT

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

The Honorable E. Lee Gabriel

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - JC/OH

18 FILER NAME Gabriel, E. Lee (The Honorable)		19 Filer ID 00020056	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	0.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	0.00
4.	<input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	0.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	0.00
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00
7.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	0.00
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	0.00
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	0.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	1,420.77
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

PLEGGED CONTRIBUTIONS (JUDICIAL)

SCHEDULE B(J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B(J):
Sch: 1/1 Rpt: 4/7

2 FILER NAME
Gabriel, E. Lee (The Honorable)

3 Filer ID (Ethics Commission Filers)
00020056

4 TOTAL OF UNITEMIZED PLEDGES \$ 0.00

5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	8 Amount of pledge (\$)	9 In-kind description (if applicable)
	7 Pledgor Address; City; State; Zip Code		
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	

10 Pledgor's principal occupation

11 Pledgor's job title

12 Pledgor's employer/law firm

13 Law firm of pledgor's spouse (if any)

14 If pledgor is a child, law firm of parent(s) (if any)

LOANS (JUDICIAL)

SCHEDULE E(J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): Sch: 1/1 Rpt: 5/7
2 FILER NAME Gabriel, E. Lee (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020056
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Lender's Principal Occupation		13 Lender's Job Title
14 Lender's Employer/Law Firm		15 Law Firm of lender's spouse (if any)
16 If lender is child, law firm of parent(s) (if any)		
17 Description of Collateral <input type="checkbox"/> None		18 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
19 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	20 Name of guarantor	22 Amount Guaranteed (\$)
	21 Guarantor address; City; State; Zip Code	
23 Guarantor's Principal Occupation		24 Guarantor's Job Title
25 Guarantor's Employer/Law Firm		26 Law Firm of guarantor's spouse (if any)
27 If guarantor is child, law firm of parent(s) (if any)		

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/2 Rpt: 6/7	2 FILER NAME Gabriel, E. Lee (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020056
4 Date 03/18/2024	5 Payee name Denton County Bar Association	
6 Amount (\$) 850.00	7 Payee Address; City; State; Zip 1504 E. McKinney St Denton, TX 76209	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Registration Fee for Denton County Bar Association Bench Bar Conference
Date 04/13/2024	Payee name Kiowa Spirits	
Amount (\$) 23.00	Payee Address; City; State; Zip 100 Kiowa Dr. Gainesville, TX 76240	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) prize for winner of presentation (Evidence Jeopardy) at Regional Conference
Date 05/14/2024	Payee name Kroger	
Amount (\$) 35.00	Payee Address; City; State; Zip 1529 S Loop 288 Denton, TX 76205	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) prizes for 2nd Regional Conference for winners of presentation (Evidence Jeopardy)
Date 04/21/2024	Payee name Littlefield's Country Market	
Amount (\$) 46.11	Payee Address; City; State; Zip 55991 OK-85A Afton, OK 74331	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) gas to travel home from Denton County Bar Association Bench Bar Conference

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/2 Rpt: 7/7	2 FILER NAME Gabriel, E. Lee (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020056
4 Date 04/19/2024	5 Payee name QT	
6 Amount (\$) 33.05	7 Payee Address; City; State; Zip 6940 US-67 Alvarado, TX 76009	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) gas to travel to Denton County Bar Association Bench Bar Conference
Date 04/19/2024	Payee name QT	
Amount (\$) 20.41	Payee Address; City; State; Zip 6940 US-67 Alvarado, TX 76009	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) food while traveling to Denton County Bar Association Bench Bar Conference
Date 04/25/2024	Payee name Texas Board of Legal Specialization	
Amount (\$) 400.00	Payee Address; City; State; Zip 505 E. Huntland Dr. Ste. 400 LB 28 Austin, TX 78752	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Criminal Law Specialization Fees
Date 01/16/2024	Payee name Tom Thumb	
Amount (\$) 13.20	Payee Address; City; State; Zip 206 N. Grand Ave. Gainesville, TX 76240	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) stamps