

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) 00087197	2 Total pages filed: 18		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Kim T.	MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/07/2024	
	NICKNAME	LAST Phipps	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; P.O. Box 670213		ZIP CODE	Date Hand-delivered or Date Postmarked	
	Dallas, TX 75367			Receipt # Amount	
				Date Processed	
				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Kim T.	MI		
	NICKNAME	LAST Phipps	SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); P.O. Box 670213		APT / SUITE #; CITY; STATE; ZIP CODE		
	Dallas, TX 75367				
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	(770)	356-4043			
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)				
	<input 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	THROUGH	Month Day Year		
	07/01/2024		09/26/2024		
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE		
	11/05/2024		<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other
		<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)		
			District Judge District 162		

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 18

13 C / OH NAME Phipps, Kim T. (Ms.) **14** Filer ID (Ethics Commission Filers)
00087197

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)	\$	35,071.06
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	30,484.30
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	50,993.01
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.

Ms. Kim T. Phipps

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 Phipps, Kim T. (Ms.)		19 Filer ID 00087197	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	35,071.06
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	30,484.30
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/12 Rpt: 4/18
2 FILER NAME Phipps, Kim T. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087197
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRON, THOMAS	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75204	
8 Contributor's Principal Occupation ATTORNEY		9 Contributor's Job Title ATTORNEY
10 Contributor's employer/law firm SELF		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Barry	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75220	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Susman Godfrey LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Battiste, Alison	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75204	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Battiste Clement PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/12 Rpt: 5/18
2 FILER NAME Phipps, Kim T. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087197
4 Date 09/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chalaki, Sean	7 Amount of Contribution (\$) \$5,000.00
	6 Contributor address; City; State; Zip Code Carrollton, TX 75006	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Chalaki Law P.C.		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clarke, Melissa	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Silver Spring, MD 20901	
Contributor's Principal Occupation Chief Health Equity Officer		Contributor's Job Title Chief Health Equity Officer
Contributor's employer/law firm Elevance Health		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Linda	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75211	
Contributor's Principal Occupation unemployed		Contributor's Job Title unemployed
Contributor's employer/law firm unemployed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/12 Rpt: 6/18
2 FILER NAME Phipps, Kim T. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087197
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crain, Robert	7 Amount of Contribution (\$) \$2,500.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75225	
8 Contributor's Principal Occupation Law Firm		9 Contributor's Job Title Law Firm
10 Contributor's employer/law firm Crain Brogdon, LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deitchman, Deitchman	Amount of Contribution (\$) \$104.39
	Contributor address; City; State; Zip Code Dallas, TX 75248	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm B Buzz Deitchman		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedman & Feiger	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75252	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/12 Rpt: 7/18
2 FILER NAME Phipps, Kim T. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087197
4 Date 09/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frizell, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75249	7 Amount of Contribution (\$) \$104.39
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Burt Barr & Associates		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs, Evelyn <hr/> Contributor address; City; State; Zip Code Dallas, TX 75249	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Social worker		Contributor's Job Title Social worker
Contributor's employer/law firm Dept of VA		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giblin, Gina <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75228	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Hernandez Law Group		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/12 Rpt: 8/18
2 FILER NAME Phipps, Kim T. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087197
4 Date 09/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosewehr, Rocio	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Plano, TX 75025	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Snellings Law PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gruber, Grady M	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Greenberg Traurig		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynes & Boone Political Action Committee	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/12 Rpt: 9/18
2 FILER NAME Phipps, Kim T. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087197
4 Date 09/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holland and Knight Texas PAC <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75201	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kastl, Kristina <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204	Amount of Contribution (\$) \$519.94
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm KASTL LAW, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kastl, Kristina <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204	Amount of Contribution (\$) \$1,039.36
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm KASTL LAW, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/12 Rpt: 10/18
2 FILER NAME Phipps, Kim T. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087197
4 Date 09/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendall Law Group PLLC	7 Amount of Contribution (\$) \$5,000.00
6 Contributor address; City; State; Zip Code Dallas, TX 75219		
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kent, David	Amount of Contribution (\$) \$104.39
Contributor address; City; State; Zip Code Dallas, TX 75243		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Faegre Drinker Biddle & Reath LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lipp, Dana	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Dallas, TX 75220		
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer
Contributor's employer/law firm Lipp Legal PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/12 Rpt: 11/18
2 FILER NAME Phipps, Kim T. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087197
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynn Pinker Hurst & Schwegmann	7 Amount of Contribution (\$) \$2,500.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75201	
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Ben	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75219	
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer
Contributor's employer/law firm Ben Martin Law Group		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mastrogiovanni	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75206	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/12 Rpt: 12/18
2 FILER NAME Phipps, Kim T. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087197
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCullough Mediation	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75251	
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCullough, P. Michael	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75251	
Contributor's Principal Occupation Mediator		Contributor's Job Title Mediator
Contributor's employer/law firm McCullough Mediation		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Weisbrod Olesky LLP	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Dallas, TX 75243	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/12 Rpt: 13/18
2 FILER NAME Phipps, Kim T. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087197
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Queenan, M. Kevin	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Arlington, TX 76015		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Queenan Law		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Song Whiddon	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75240		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Frank	Amount of Contribution (\$) \$52.45
Contributor address; City; State; Zip Code Dallas, TX 75201		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Domingo Garcia		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 11/12 Rpt: 14/18
2 FILER NAME Phipps, Kim T. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087197
4 Date 08/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Ben	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75214	
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney
10 Contributor's employer/law firm Ted B. Lyon & Associates, P.C.		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Schorr Law Firm	Amount of Contribution (\$) \$456.78
	Contributor address; City; State; Zip Code Garland, TX 75043	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toles, William	Amount of Contribution (\$) \$1,039.36
	Contributor address; City; State; Zip Code Dallas, TX 75254	
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer
Contributor's employer/law firm Munsch Hardt		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 12/12 Rpt: 15/18
2 FILER NAME Phipps, Kim T. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087197
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasquez, Mark	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75231	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Deforest		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wishnew, Dave	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Contributor's Principal Occupation lawyer		Contributor's Job Title lawyer
Contributor's employer/law firm Crawford, Wishnew & Lang PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zokaie, Cheyenne	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Arlington, TX 76016	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Linebarger		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
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: 1/3 Rpt: 16/18	2 FILER NAME Phipps, Kim T. (Ms.)	3 Filer ID (Ethics Commission Filers) 00087197
4 Date 08/09/2024	5 Payee name AFL-CIO Dallas	
6 Amount (\$) \$240.00	7 Payee address; City; State; Zip Code 1408 N. Washington Avenue, Suite 240 Dallas, TX 75204	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labor breakfast ticket and ad
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/16/2024	Payee name Black Business Directory	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 8401 Manchester Drive Rowlett, TX 75089	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/19/2024	Payee name Democracy Toolbox	
Amount (\$) \$24,700.00	Payee address; City; State; Zip Code PO BOX 6250 McKinney, TX 75071	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting and communication service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
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: 2/3 Rpt: 17/18	2 FILER NAME Phipps, Kim T. (Ms.)	3 Filer ID (Ethics Commission Filers) 00087197
4 Date 09/26/2024	5 Payee name Donorbox	
6 Amount (\$) \$275.92	7 Payee address; City; State; Zip Code 1520 Belle View Blvd #4106 Alexandria, TX 22307	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation platform fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/16/2024	Payee name Elite News	
Amount (\$) \$1,100.00	Payee address; City; State; Zip Code 3155 S.Lancaster Road, Suite 240 Dallas, TX 75216	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/26/2024	Payee name PayPal	
Amount (\$) \$468.38	Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
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: 3/3 Rpt: 18/18	2 FILER NAME Phipps, Kim T. (Ms.)	3 Filer ID (Ethics Commission Filers) 00087197
4 Date 08/19/2024	5 Payee name Reilly Echols Printing	
6 Amount (\$) \$2,700.00	7 Payee address; City; State; Zip Code 1710 South Harwood Dallas, TX 75215	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Door material printing
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
	Candidate/Officeholder name	Office sought
		Office held