#### 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) 00082014 14 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Robbie S. NAME Date Received **ELECTRONICALLY FILED** 10/27/2024 NICKNAME LAST **SUFFIX** Partida-Kipness CANDIDATE / Date Hand-delivered or Date Postmarked ADDRESS / PO BOX; APT / SUITE #; CITY; 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. Robbie S. NAME NICKNAME LAST **SUFFIX** Partida-Kipness **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** (214) 405-6480 **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) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 09/27/2024 10/26/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/05/2024 χ General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE Court Of Appeals, Justice Place 2 District 5 Court Of Appeals, Justice Place 2 District 5

**GO TO PAGE 2** 

### JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM JC/OH COVER SHEET PG 2

2 of 14

13 C / OH NAME	Partida-Kipness, Rob	bie S. (The Honorable)		<b>14</b> Filer ID 00082014	(Ethics Com	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	res made by political c the candidate's or office n only if they receive no	eholder's kno	owledge or			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	X GENERAL	Texas Justice Democrats	5			
		COMMITTEE ADDRESS				
	SPECIFIC	6333 Mockingbird Lane,	Suite 147, Box 800			
		Dallas, TX 75214				
		COMMITTEE CAMPAIGN T	REASURER NAME			
		Donovan, Carol				
		COMMITTEE CAMPAIGN T	REASURER ADDRES	SS		
		6333 Mockingbird Lane,	Suite 147, Box 800			
		Dallas, TX 75214				
<b>16</b> CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBL ES OF LOANS, OR CONTRI			\$	0.00
	2. TOTAL POLIT	ICAL CONTRIBUTIONS			\$	10,097.00
	<del></del>	PLEDGES, LOANS, OR GUA		S)	ļ*	,
EXPENDITURE TOTALS		IZED POLITICAL EXPENDIT	URES		\$	0.00
	4. TOTAL POLIT	ICAL EXPENDITURES			\$	40,797.22
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINT	TAINED AS OF THE LA	AST DAY OF THE	\$	72,668.02
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTS TING PERIOD	TANDING LOANS AS	OF THE LAST DAY	\$	0.00
<b>17</b> AFFIDAVIT		true and		v of perjury, that the ac Il information required t		
			The Honorable	Robbie S. Partida-ł	Kipness	
				Candidate or Officeho	-	
AFFIV NO	TABY (TAMB / 05 AL AB	OV.				
AFFIX NO	TARY STAMP / SEAL AB	JVE				
		aid		, this the		day
of	, 20, to co	ertify which, witness my hand	and seal of office.			
Signature of office	cer administering oath	Printed name of officer	administering oath	Title of office	r administeri	ng oath

### **SUBTOTALS - JC/OH**

### FORM JC/OH COVER SHEET PG 3

3 of 14

					0 01 14						
18 FII	18 FILER NAME  19 Filer ID (Ethics Commission										
Pa	ırtida-Ki	pness, Robbie S. (The Honorable)	00082014								
	HEDUL ME OF		SUBTOTAL AMOUNT								
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	8,105.00						
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	1,992.00						
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$							
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$							
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	40,797.22						
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	. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	1,082.52						

B Contributor's Principal Occupation Attorney 10 Contributor's employer/law firm Passman & Jones 12 If contributor is a child, law firm of parent(s) (if any)  Date 10/16/2024 Brooks, Diana Contributor address; City; State; Zip Code  Contributor's Principal Occupation Attorney  Contributor's spouse (if any)  Amount of Contribution (\$) \$250.  Contributor's Principal Occupation Attorney  Contributor's Principal Occupation Attorney  Law firm of contributor's spouse (if any)  Law firm of contributor's Job Title Attorney  Law firm of contributor's spouse (if any)  Diana Brooks Law PLLC  If contributor is a child, law firm of parent(s) (if any)  Date  Full name of contributor  out-of-state PAC (ID#:		MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
Partida-Kipness, Robbie S. (The Honorable)  1 Oate		The Instru	ction Guide explains ho	ow to complete this	form.	1	• , ,
4 Date 10/01/2024 5 Full name of contributor  out-of-state PAC (IDE	2	FILER NAME				3 Filer ID	(Ethics Commission Filers)
Alexander, Jerry  Alexander, Jerry  B Contributor's Principal Occupation Attorney  Date Attorney  Date Attorney  Date Attorney  Contributor's Principal Occupation Attorney  Attorney  Amount of Contribution (\$)  \$250.  Amount of Contribution (\$)  \$250.  Contributor's employer/law firm Diana Brooks, Diana  Contributor's employer/law firm Contributor address; City; State; Zip Code  Contributor's Principal Occupation Attorney  Contributor's employer/law firm Diana Brooks Law PLLC  If contributor is a child, law firm of parent(\$) (if any)  Date Ontributor address; City; State; Zip Code  Attorney  Contributor's employer/law firm Diana Brooks Law PLLC  If contributor is a child, law firm of parent(\$) (if any)  Date Ontributor address; City; State; Zip Code  Contributor's employer/law firm Diana Brooks Law PLLC  Contributor address; City; State; Zip Code  Amount of Contribution (\$)  Amount of Contribution (\$)  \$5,000.  Contributor's principal Occupation Amount of Contribution (\$)  Amount of Contribution (\$)  \$5,000.  Contributor's Principal Occupation Attorney  Contributor's Principal Occupation Attorney  Contributor's employer/law firm Con		Partida-Kipn	ess, Robbie S. (The Honor	able)		00082	014
Ballas, TX 75270  8 Contributor's Principal Occupation Attorney 10 Contributor's employer/law firm Passman & Jones 12 If contributor is a child, law firm of parent(s) (if any)  Date 10/16/2024  Contributor's Principal Occupation Attorney  Date 10/16/2024  Full name of contributor Attorney  Contributor's Principal Occupation Attorney  Contributor's employer/law firm Diana Brooks Law PLLC  If contributor is a child, law firm of parent(s) (if any)  Date 10/16/2024  Goudarzi, Brent Contributor's Principal Occupation Attorney  Contributor's Principal Occupation Amount of Contribution (s) \$5,000.	4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7 Amoun	t of Contribution (\$)
Be Contributor's Principal Occupation Attorney  Date Attorney  Date Attorney  Date Attorney  Contributor's Principal Occupation Attorney  Date Attorney  Contributor's Principal Occupation Attorney  Date Attorney  Contributor's spouse (if any)  Amount of Contribution (is) \$250.  Contributor's Principal Occupation Attorney  Contributor's Principal Occupation Attorney  Contributor's employer/law firm Diana Brooks Law PLLC If contributor is a child, law firm of parent(s) (if any)  Date 10/16/2024  Full name of contributor  Attorney  Contributor's employer/law firm Diana Brooks Law PLLC If contributor is a child, law firm of parent(s) (if any)  Date 10/16/2024  Goudarzi, Brent Contributor's Principal Occupation Attorney  Contributor's Principal Occupation Attorney  Contributor's Principal Occupation Attorney  Law firm of contributor's spouse (if any)  Amount of Contribution (is) \$5,000.  Amount of Contribution (is) \$5,000.  Contributor's Principal Occupation Attorney  Law firm of contributor's spouse (if any)		10/01/2024					\$1,000.00
8 Contributor's Principal Occupation Attorney  10 Contributor's employer/law firm Passman & Jones  12 If contributor is a child, law firm of parent(s) (if any)  Date 10/16/2024    Full name of contributor   out-of-state PAC (ID#:			6 Contributor address; City;	State; Zip Code			
Attorney  Attorney  Attorney  Attorney  Attorney  Attorney  11 Law firm of contributor's spouse (if any)  Passman & Jones  12 If contributor is a child, law firm of parent(s) (if any)  Date   Full name of contributor   out-of-state PAC (ID#:			Dallas, TX 75270				
10 Contributor's employer/law firm Passman & Jones  12 If contributor is a child, law firm of parent(s) (if any)  Date 10/16/2024	8	Contributor's	Principal Occupation		9 Contributor's Job Title		
Passman & Jones  12 If contributor is a child, law firm of parent(s) (if any)  Date 10/16/2024 Brooks, Diana Contributor Contributor address; City; State; Zip Code    McKinney, TX 75070   Contributor's Principal Occupation Attorney   Law firm of contributor's spouse (if any)		Attorney			Attorney		
Date 10/16/2024   Full name of contributor   Out-of-state PAC (ID#:	10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any	<b>'</b> )
Date 10/16/2024   Full name of contributor   out-of-state PAC (ID#:		Passman &	Jones				
### Spooks Diana ### Diana Brooks Campulation ### Diana Brooks Law PLLC ### Diana Brooks Law PLLC ### Diana Brooks Law PLLC ### Diana Brooks Law PLC ### Diana Brooks Law PLC ### Diana Brooks Dia	12	If contributor i	s a child, law firm of parent(s) (	if any)			
Contributor address; City; State; Zip Code  McKinney, TX 75070  Contributor's Principal Occupation Attorney  Contributor's employer/law firm Diana Brooks Law PLLC  If contributor is a child, law firm of parent(s) (if any)  Date 10/16/2024  Gilmer, TX 75644  Contributor's Principal Occupation Attorney  Contributor's spouse (if any)  Amount of Contribution (\$)  \$5,000.  Contributor's Principal Occupation Attorney  Contributor's Principal Occupation Attorney  Contributor's employer/law firm Goudarzi & Young LLP  Law firm of contributor's spouse (if any)  Law firm of contributor's spouse (if any)		Date	Full name of contributor	out-of-state PAC (ID#:	)	Amoun	t of Contribution (\$)
Contributor's Principal Occupation Attorney  Contributor's employer/law firm Diana Brooks Law PLLC  If contributor is a child, law firm of parent(s) (if any)  Date 10/16/2024  Gilmer, TX 75644  Contributor's Principal Occupation Attorney  Contributor's Principal Occupation Attorney  Contributor's employer/law firm Goudarzi & Young LLP  McKinney, TX 75070  Contributor's Job Title Attorney  Law firm of contributor's spouse (if any)  Amount of Contribution (\$)  \$5,000.		10/16/2024	Brooks, Diana	_			\$250.00
Contributor's Principal Occupation Attorney  Contributor's employer/law firm Diana Brooks Law PLLC  If contributor is a child, law firm of parent(s) (if any)  Date 10/16/2024  Goudarzi, Brent  Contributor address; City; State; Zip Code  Contributor's Principal Occupation Attorney  Contributor's employer/law firm  Contributor is a child, law firm of parent(s) (if any)  Amount of Contribution (\$)  \$55,000.			Contributor address; City;	State; Zip Code		··	
Contributor's Principal Occupation Attorney  Contributor's employer/law firm Diana Brooks Law PLLC  If contributor is a child, law firm of parent(s) (if any)  Date 10/16/2024  Goudarzi, Brent  Contributor address; City; State; Zip Code  Contributor's Principal Occupation Attorney  Contributor's employer/law firm  Contributor is a child, law firm of parent(s) (if any)  Amount of Contribution (\$)  \$55,000.							
Contributor's Principal Occupation Attorney  Contributor's employer/law firm Diana Brooks Law PLLC  If contributor is a child, law firm of parent(s) (if any)  Date 10/16/2024  Goudarzi, Brent  Contributor address; City; State; Zip Code  Contributor's Principal Occupation Attorney  Contributor's employer/law firm  Contributor is a child, law firm of parent(s) (if any)  Amount of Contribution (\$)  \$55,000.							
Attorney  Contributor's employer/law firm Diana Brooks Law PLLC  If contributor is a child, law firm of parent(s) (if any)  Date 10/16/2024 Goudarzi, Brent Contributor address; City; State; Zip Code  Gilmer, TX 75644  Contributor's Principal Occupation Attorney  Contributor's employer/law firm Goudarzi & Young LLP  Attorney  Attorney  Attorney  Attorney  Contributor's spouse (if any)  Amount of Contribution (\$)  \$5,000.			McKinney, TX 75070				
Contributor's employer/law firm Diana Brooks Law PLLC  If contributor is a child, law firm of parent(s) (if any)  Date 10/16/2024 Gilmer, TX 75644  Contributor's Principal Occupation Attorney  Contributor's employer/law firm Goudarzi & Young LLP  Law firm of contributor's spouse (if any)  Amount of Contribution (\$)  \$5,000.		Contributor's	Principal Occupation		Contributor's Job Title		
Diana Brooks Law PLLC  If contributor is a child, law firm of parent(s) (if any)  Date 10/16/2024  Goudarzi, Brent Contributor address; City; State; Zip Code  Gilmer, TX 75644  Contributor's Principal Occupation Attorney  Contributor's employer/law firm Goudarzi & Young LLP  Amount of Contribution (\$)  Amount of Contribution (\$)  \$5,000.		Attorney			Attorney		
Date   Full name of contributor   out-of-state PAC (ID#:		Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any	<i>'</i> )
Date   Full name of contributor   out-of-state PAC (ID#:)   Amount of Contribution (\$)		Diana Brook	s Law PLLC				
10/16/2024 Goudarzi, Brent \$5,000.  Contributor address; City; State; Zip Code  Gilmer, TX 75644  Contributor's Principal Occupation Contributor's Job Title Attorney Attorney  Contributor's employer/law firm Law firm of contributor's spouse (if any)  Goudarzi & Young LLP		If contributor i	s a child, law firm of parent(s) (	if any)	1		
10/16/2024 Goudarzi, Brent \$5,000.  Contributor address; City; State; Zip Code  Gilmer, TX 75644  Contributor's Principal Occupation Contributor's Job Title Attorney Attorney  Contributor's employer/law firm Law firm of contributor's spouse (if any)  Goudarzi & Young LLP							
Contributor address; City; State; Zip Code  Gilmer, TX 75644  Contributor's Principal Occupation Attorney  Contributor's employer/law firm Goudarzi & Young LLP  Contributor's State; Zip Code  Contributor's Job Title Attorney  Law firm of contributor's spouse (if any)		Date	Full name of contributor	out-of-state PAC (ID#:	)	Amoun	t of Contribution (\$)
Gilmer, TX 75644  Contributor's Principal Occupation Attorney  Contributor's Job Title Attorney  Attorney  Law firm of contributor's spouse (if any)  Goudarzi & Young LLP		10/16/2024	Goudarzi, Brent	_			\$5,000.00
Contributor's Principal Occupation Attorney  Contributor's employer/law firm Coudarzi & Young LLP  Contributor's Principal Occupation Attorney  Law firm of contributor's spouse (if any)			Contributor address; City;	State; Zip Code		··	
Contributor's Principal Occupation Attorney  Contributor's employer/law firm Coudarzi & Young LLP  Contributor's Principal Occupation Attorney  Law firm of contributor's spouse (if any)							
Contributor's Principal Occupation Attorney  Contributor's employer/law firm Coudarzi & Young LLP  Contributor's Principal Occupation Attorney  Law firm of contributor's spouse (if any)							
Attorney  Contributor's employer/law firm  Goudarzi & Young LLP  Attorney  Law firm of contributor's spouse (if any)			Gilmer, TX 75644				
Contributor's employer/law firm  Goudarzi & Young LLP  Law firm of contributor's spouse (if any)		Contributor's	Principal Occupation		Contributor's Job Title	1	
Goudarzi & Young LLP		Attorney			Attorney		
<u> </u>		Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any	/)
If contributor is a child, law firm of parent(s) (if any)		Goudarzi &	Young LLP				
		If contributor i	s a child, law firm of parent(s) (	if any)	1		

MONET	ARY POLITICAL C	CONTRIBUTIO	DNS	SCHEDULE A(J)1
The Instru	ction Guide explains how	1 Total pages Schedule A(J)1: Sch: 2/3 Rpt: 5/14		
2 FILER NAME Partida-Kipn	ess, Robbie S. (The Honorab	le)		3 Filer ID (Ethics Commission Filers) 00082014
4 Date 10/15/2024	<ul><li>5 Full name of contributor Holland &amp; Knight Texas P</li><li>6 Contributor address; City; St</li></ul>	7 Amount of Contribution (\$) \$1,000.00		
	Dallas, TX 75201		T	
8 Contributor's F	Principal Occupation		9 Contributor's Job Title	
10 Contributor's 6	employer/law firm		11 Law firm of contributor's sp	pouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if a	ny)		
Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
10/01/2024	Munoz, Patricia Contributor address; City; St	<u> </u>		\$5.00
	Carrollton, TX 75006		_	
	Principal Occupation		Contributor's Job Title	
Attorney			Attorney	
	employer/law firm Del Rey, Bernsen & Loewy, LL	D	Law firm of contributor's sp	bouse (ii any)
	s a child, law firm of parent(s) (if a			
ii continuatori.	s a clind, law littl of parent(s) (ii a	119)		
Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
10/01/2024	Seliger, Lane	_		\$500.00
	Contributor address; City; St  Dallas, TX 75205	ate; Zip Code		
Contributor's F	Principal Occupation		Contributor's Job Title	
President	molpai Goodpation		President	
Contributor's e	employer/law firm		Law firm of contributor's sp	oouse (if any)
Lake Steel				
If contributor is	s a child, law firm of parent(s) (if a	ny)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 3/3 Rpt: 6/14
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Partida-Kipr	ness, Robbie S. (The Honorable)		00082014
4	Date	5 Full name of contributor out-of-state PAC (ID#	t:)	7 Amount of Contribution (\$)
	10/06/2024	Stiglets, Robert		\$100.00
		6 Contributor address; City; State; Zip Code  Hutto, TX 78634		
•	Contributor's	Principal Occupation	9 Contributor's Job Title	
0	Purchasing		Purchasing Director	
10		employer/law firm		nauga (if any)
10	TGS	етіріоуетлам інті	11 Law firm of contributor's s	pouse (II arry)
12		is a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (ID#	<i>t</i> :)	Amount of Contribution (\$)
	10/15/2024	Stonewall Democrats of Dallas		\$250.00
		Contributor address; City; State; Zip Code		· ·
	0	Dallas, TX 75219	T 0	
	Contributors	Principal Occupation	Contributor's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
	If contributor i	is a child, law firm of parent(s) (if any)		

### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 7/14 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Partida-Kipness, Robbie S. (The Honorable) 00082014 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 10/01/2024 **Texas Justice Democrats** \$1,992.00 In-kind donation of printing 7 Contributor address; City; State; Zip Code and texting and event expenses Dallas, TX 75214 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

### 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

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 1/6 Rpt: 8/14	2 FILER NAME Partida-Kipness, Robbie S. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00082014
4	Date 10/07/2024	5 Payee name Alto
6	Amount (\$) \$55.20	7 Payee address; City; State; Zip Code 141 Manufacturing St  Dallas, TX 75207
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Transportation to Dallas Hispanic Bar gala event
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 10/15/2024	Payee name Alto
	Amount (\$) \$40.00	Payee address; City; State; Zip Code  141 Manufacturing St  Dallas, TX 75207
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Transportation to campaign event
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 10/22/2024	Payee name Berlin Rosen LLC
	Amount (\$) \$34,587.67	Payee address; City; State; Zip Code  15 Madison Ln Ste 1600
		New York, NY 10038
	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  Digital advertising
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	s Expense	Salaries/W		se s/Contract Labor		OTHER (enter		not listed above)
	Credit Card r dyment			The Instruction G	uide explains h	now to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics	Commission Filers)
	Sch: 2/6 Rpt: 9/14		Partida-Kipr	ness, Robbie S	. (The Hono	rable)				00082014		
4	Date	5	Payee name									
	10/01/2024		Cedar Sprin	gs Parking								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$10.00		2101 Cedar	Springs Rd								
			Dallas, TX 7	'5201								
8	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Travel In Dis			,		Check if travel	outsi	de of Texas. Co	mplete Sche	edule T.
	EXPENDITORE							_		officeholder livi		
								Parking durin	ig d	linner with	colleagu	ies
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Office	ceholder name	0	office sou	ght			Office I	neld	
		_										
	Date		Payee name									
	09/30/2024		Central Mar	ket								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$65.76		4349 W Nor	thwest Hwy								
			Dallas, TX 7	'5220								
	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Food/Bever	age Expense						de of Texas. Co		edule T.
								ш		officeholder livi		
								Lunch for coll	lea	gues at co	urt	
	Complete ONLY if direct	<u> </u>	^andidate/Offi	ceholder name		office sou	aht			Office I	neld	
	expenditure to benefit C/O		Janaidate/Onit	centration name	O	ince sou	grit			Office	iciu	
-	Data	_										
	Date 10/15/2024		Payee name Costco									
				0		7: 0						
	Amount (\$)		Payee addres	-	State;	Zip Co	ae					
	\$148.30		8282 Park L	.ane								
			Dallas, TX 7	75231								
	PURPOSE OF	(a)		ee Categories listed at	the top of this sche	edule)	(b)	Description				
	EXPENDITURE		Food/Bever	age Expense				Check if travel of Check if Austin		de of Texas. Co		edule 1.
								Snacks for ca				
									٠.٢	J	=	
$\vdash$	Complete ONLY if direct	L(	 Candidate/Offi	ceholder name	0	office sou	ght			Office I	neld	
	expenditure to benefit C/OI				_		<b>J</b>					
l												

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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)

	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: 3/6 Rpt: 10/14	Partida-Kipness, Robbie S. (The Honorable)	00082014
4	Date	5 Payee name	
	10/09/2024	Dallas County Democratic Party	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$103.75	1414 NWashington Ave	
		Dallas, TX 75204	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	/ tavertising Expense	l outside of Texas. Complete Schedule T.
			n, TX, officeholder living expense Sponsorship of event
		, ta - o - ta - o - o - o - o - o - o - o - o - o -	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
_	Date	Payee name	
	10/21/2024	Democracy Toolbox	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4,750.00	PO Box 6250	
	, ,, , , , ,		
		McKinney, TX 75071	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Consulting Expense	l outside of Texas. Complete Schedule T.
			n, TX, officeholder living expense Onsulting services
		Campaign of	Sitsularity Scrinces
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	•	
	Date	Payee name	
	10/26/2024	DonorBox	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$261.61	1520 Belle View Blvd #4106	
		Alexandria, VA 22307	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if trave	I outside of Texas. Complete Schedule T.
	EXI ENDITORE		n, TX, officeholder living expense fees for online donations during the
		reporting per	_
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	•	Office field
l			

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

Advertising Expense Ever Accounting/Banking Fee: Consulting Expense Foot Contributions/ Donations Made By - Gift/

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

	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: 4/6 Rpt: 11/14	Partida-Kipness, Robbie S. (The Honorable) 00082014
4	Date	5 Payee name
	10/05/2024	Drake's
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$112.01	5007 W Lovers Ln
		Dallas, TX 75209
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Dinner with constituents
		Diffici with constituents
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	Payee name
	10/07/2024	Elizabeth Ginsberg Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	4502 W. Lovers Lane
		Dallas, TX 75209
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		Donation to political campaign
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	
	Date	Payee name
	10/08/2024	GabaldonArt
	Amount (\$)	Payee address; City; State; Zip Code
	\$64.95	1311 N Kansas
		El Paso, TX 79902
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense  Portrait for court office
		Portial for court office
	Operation ONLY if allowed	On all data (Office helder marre
	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)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Food/Beverage Expense

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

	Candidate/Officeholder/Politica Credit Card Payment			Legal Services	s expense	Salaries/M		e /Contract Labor		OTHER (enter a	strict a category not listed al	oove)
	Credit Card Payment			The Instruction G	uide explains h	ow to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commiss	sion Filers)
	Sch: 5/6 Rpt: 12/14		Partida-Kipr	iess, Robbie S.	(The Honor	rable)				00082014		
4	Date	5	Payee name									
	10/07/2024		John Wiley	Price Campaigı	า							
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$100.00		P.O. Box 22	4725								
			Dallas, TX 7	5222								
8	PURPOSE	(a)		e Categories listed at t	the ten of this cohe.	dula)	(b)	Description				
	OF	(",		s/Donations Ma		aule)	(~)		outsi	de of Texas. Com	nplete Schedule T.	
	EXPENDITURE			Officeholder/Pol		ttee		Check if Austin,	, TX,	officeholder living	g expense	
								Donation to p	olit	ical campai	gn	
9	Complete ONLY if direct		Candidate/Offic	ceholder name	Ot	ffice sou	ght			Office h	eld	
	expenditure to benefit C/OI	Η										
	Date		Payee name									
	10/02/2024		Lucid Private	e Offices								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$150.47		6060 N Cen	tral Expwy Ste	500							
			Dallas, TX 7	5206								
	PURPOSE	(a)	Category (Se	e Categories listed at	the ton of this sche	dule)	(b)	Description				
	OF EXPENDITURE			nead/Rental Ex		uu.0)		`	outsi	de of Texas. Com	nplete Schedule T.	
	EXPENDITORE							<b>—</b>		officeholder living	g expense	
								Virtual campa	aıgr	n office		
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	Ot	ffice sou	ght			Office h	eld	
		_										
	Date		Payee name									
	10/11/2024		Mac Taylor	Inn of Court								
	Amount (\$)		Payee addres		State;	Zip Co	de					
	\$225.00		901 Main St	Ste 5500								
			Dallas, TX 7	5202								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Fees					ш			nplete Schedule T.	
								Membership		officeholder living	g expense	
								Membership (	uut	,,,		
_	Complete ONLY if direct	Ц,		ceholder name	0:	ffice sou	aht			Office h	eld	
	expenditure to benefit C/OI		Janunale/OIII	choluel Haille	Oi	mue suu	grit			Office II	Ciu	

### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide exp	Polling Expense Printing Expense Salaries/Wages/Contract Labor lains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NA	AME		3 Filer ID (Ethics Commission Filers)
l	Sch: 6/6 Rpt: 13/14	Partida-ŀ	Kipness, Robbie S. (The	Honorable)	00082014
4	Date	5 Payee na	me		•
l	10/21/2024	Uber			
6	Amount (\$)	7 Payee ad	dress; City;	State; Zip Code	
l	\$22.50	1455 Ma	rket St		
l					
Ļ			ncisco, CA 94103	la.	
8	PURPOSE OF		(See Categories listed at the top of t	his schedule) (b) Description	ា ravel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Travel In	DISTRICT		Austin, TX, officeholder living expense
				-	ation to campaign event
l					
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/ H	Officeholder name	Office sought	Office held

# INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 14/14 2 FILER NAME Filer ID (Ethics Commission Filers) Partida-Kipness, Robbie S. (The Honorable) 00082014 8 Amount (\$) 5 Name of person from whom amount is received 10/15/2024 \$1,082.52 **Dallas Women Lawyers Association** 6 Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75370 Purpose for which amount is received Check if political contribution returned to filer Reimbursement for tickets for gala sponsorship